

Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning 01-01-2009, and ending 12-31-2009

G Check all that apply: Initial return, Initial return of a former public charity, Final return, Amended return, Address change, Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions. Name of foundation: THE LINDEN FOUNDATION INC. A Employer identification number: 22-6678640. B Telephone number: (617) 426-7080.

H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$ 7,358,045. J Accounting method: Cash.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Summary (27-29).

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	1,470	1,314	1,314	1,314	
	2	Savings and temporary cash investments	440,135	385,903	385,903	385,903	
	3	Accounts receivable <input type="checkbox"/> _____ Less allowance for doubtful accounts <input type="checkbox"/> _____					
	4	Pledges receivable <input type="checkbox"/> _____ Less allowance for doubtful accounts <input type="checkbox"/> _____					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)					
	7	Other notes and loans receivable (attach schedule) <input type="checkbox"/> _____ Less allowance for doubtful accounts <input type="checkbox"/> _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)	0 <input type="checkbox"/>	551,406	503,635	503,635	
	b	Investments—corporate stock (attach schedule)	4,208,967 <input type="checkbox"/>	3,439,438	5,087,233	5,087,233	
	c	Investments—corporate bonds (attach schedule)	651,468 <input type="checkbox"/>	590,735	619,872	619,872	
	11	Investments—land, buildings, and equipment basis <input type="checkbox"/> _____ Less accumulated depreciation (attach schedule) <input type="checkbox"/> _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	502,824 <input type="checkbox"/>	719,657	760,088	760,088	
	14	Land, buildings, and equipment basis <input type="checkbox"/> _____ Less accumulated depreciation (attach schedule) <input type="checkbox"/> _____					
15	Other assets (describe <input type="checkbox"/> _____)						
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,804,864	5,688,453	7,358,045	7,358,045		
Liabilities	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe <input type="checkbox"/> _____)					
23	Total liabilities (add lines 17 through 22)	0	0				
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds	0	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	5,804,864	5,688,453			
30	Total net assets or fund balances (see page 17 of the instructions)	5,804,864	5,688,453				
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	5,804,864	5,688,453				

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,804,864
2	Enter amount from Part I, line 27a	2	-92,682
3	Other increases not included in line 2 (itemize) <input type="checkbox"/> _____	3	0
4	Add lines 1, 2, and 3	4	5,712,182
5	Decreases not included in line 2 (itemize) <input type="checkbox"/> _____	5	23,729
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	5,688,453

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a	SALE OF PUBLICLY TRADED SECURITIES			
b	Capital Gains Dividends	P		
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a	2,657,526	2,018,038	639,488	
b	6,754		6,754	
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a			639,488	
b			6,754	
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2 646,242
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8	{ }		3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	955,924	10,197,948	0.093737
2007	874,423	11,827,915	0.073929
2006	879,471	10,939,366	0.080395
2005	730,500	10,228,671	0.071417
2004	796,241	10,110,843	0.078751

2	Total of line 1, column (d).	2	0.398229
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.	3	0.079646
4	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5.	4	6,808,939
5	Multiply line 4 by line 3.	5	542,305
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	7,974
7	Add lines 5 and 6.	7	550,279
8	Enter qualifying distributions from Part XII, line 4.	8	899,366

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Total tax due is 5,454.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political influence, expenditures, and state reporting. Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW LINDENFOUNDATION ORG	13	Yes	
14 The books are in care of GMA FOUNDATIONS Telephone no (617) 426-7080 Located at 77 SUMMER STREET 8TH FLOOR BOSTON MA ZIP+4 02110			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the foundation (either directly or indirectly)				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c			No
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20___, 20___, 20___, 20___				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions).	2b			
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20___, 20___, 20___, 20___				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.</i>)	3b			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a			No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions). . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870.</p> <p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	5b	
	6b	No
	7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
3 All other program-related investments. See page 24 of the instructions	

Total. Add lines 1 through 3. **0**

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	6,372,126
b	Average of monthly cash balances.	1b	540,502
c	Fair market value of all other assets (see page 24 of the instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	6,912,628
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	6,912,628
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	103,689
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,808,939
6	Minimum investment return. Enter 5% of line 5.	6	340,447

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	340,447
2a	Tax on investment income for 2009 from Part VI, line 5.	2a	7,974
b	Income tax for 2009 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	7,974
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	332,473
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	332,473
6	Deduction from distributable amount (see page 25 of the instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	332,473

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	899,366
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	899,366
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions).	5	7,974
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	891,392

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				332,473
2 Undistributed income, if any, as of the end of 2008				
a Enter amount for 2008 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2009				
a From 2004.	297,165			
b From 2005.	239,266			
c From 2006.	350,889			
d From 2007.	288,159			
e From 2008.	450,993			
f Total of lines 3a through e.	1,626,472			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ <u>899,366</u>				
a Applied to 2008, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions).	0			
d Applied to 2009 distributable amount.				332,473
e Remaining amount distributed out of corpus	566,893			
5 Excess distributions carryover applied to 2009 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,193,365			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions.		0		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions.			0	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).	0			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions).	297,165			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.	1,896,200			
10 Analysis of line 9				
a Excess from 2005.	239,266			
b Excess from 2006.	350,889			
c Excess from 2007.	288,159			
d Excess from 2008.	450,993			
e Excess from 2009.	566,893			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

THOMAS V A KELSEY

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

BRIANNA LLOYD
C/O GMA FOUNDATIONS 77 SUMMER ST
8TH FLOOR
BOSTON, MA 021101006
(617) 426-7080

b The form in which applications should be submitted and information and materials they should include

A Letter of Inquiry should be a maximum of two pages and describe the project, its purpose, its target population, its likely impact, and the amount being requested. Please include contact information for applicant. Organizations may submit only one Letter of Inquiry per year. Upon invitation from the Foundation, a full proposal should include the following information: 1) A two-page Application Cover Sheet, signed by the organization's President summarizing the request; 2) A narrative, no longer than three pages, including a description of the organization's mission, past accomplishments, qualifications, current programs, and the population it serves; 3) a detailed program budget; 4) an organizational budget; 5) Names, occupations & length of service of board; 6) qualifications of key personnel managing the program; 7) IRS 501c(3) determination letter; 8) financial statements for the most recent two years; 9) funds raised or expected from other sources.

c Any submission deadlines

DECEMBER 1 TO BE CONSIDERED FOR SPRING GRANT CYCLE, JUNE 1 TO BE CONSIDERED FOR FALL GRANT CYCLE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NO GRANTS WILL BE MADE TO INDIVIDUALS, PUBLIC SCHOOLS, CHARTER SCHOOLS, COLLEGES OR UNIVERSITIES. NO GRANTS WILL BE MADE TO SUPPORT COMMUNITY ORGANIZING, POLITICAL LOBBYING EFFORTS, OR STAND-ALONE ENRICHMENT ACTIVITIES SUCH AS TICKETS TO ARTISTIC AND MUSICAL PERFORMANCES. DUE TO LIMITED FUNDING, NO GRANTS WILL BE MADE FOR COMPUTER CENTERS OR GENERAL OPERATING SUPPORT FOR COMMUNITY CENTERS. ALL GRANT APPLICANTS MUST BE NON-PROFIT, 501(C)(3) ORGANIZATIONS, GENERALLY SERVING DISADVANTAGED, LOW-INCOME COMMUNITIES IN THE FOLLOWING AREAS: THE NORTHERN SIDE OF THE GREATER BOSTON AREA, WITH EMPHASIS ON COMMUNITIES INSIDE ROUTE 128 AND THE NORTH SHORE TO THE GLOUCESTER AREA, AND THE COUNTIES OF THE LAKES REGION NORTH SHORE TO THE GLOUCESTER AREA, AND THE COUNTIES OF THE LAKES REGION AND NORTHERN NEW HAMPSHIRE.

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total				▶ 3a 868,500
b <i>Approved for future payment</i>				
Total				▶ 3b 0

Additional Data

Software ID: 09000028
Software Version: 2009.03050
EIN: 22-6678640
Name: THE LINDEN FOUNDATION INC

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THOMAS V A KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	PRESIDENT & TREASURER 2 00	0	0	0
ELIZABETH S KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0
MARGEN S KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	SECRETARY 2 00	0	0	0
MARK J PINE C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0
SUZANNE V A KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0
KENNETH V SIEGERT C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0
WILLIAM C KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0
LEA DOBBS KELSEY C/O GMA FOUNDATIONS 77 SUMMER STREET BOSTON, MA 02110	DIRECTOR 2 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACTION INC180 MAIN STREET GLOUCESTER, MA 01930	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	28,000
AFFORDABLE HOUSING EDUCATION & DEVELOPMENT161 MAIN STREET LITTLETON, NH 03561	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
AMYOTROPHIC LATERAL SCLEROSIS ASSOCIATION27001 AGOURA ROAD STE 250 CALABASAS HILLS, CA 91301	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
ASSOCIATED GRANT MAKERS INC 55 COURT STREET STE 520 BOSTON, MA 02108	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	5,000
BRIDGE FUND OF MASSACHUSETTS INC233 NEEDHAM STREET NEWTON, MA 02464	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
BRIDGE FUND OF NEW YORK CITY INC105 EAST 22ND ST STE 621 NEW YORK, NY 10010	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
BRIDGE HOUSE INC260 HIGHLAND STREET PLYMOUTH, NH 03264	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
CATHOLIC CHARITIES BUREAU OF THE ARCHDIOCESE OF BOSTON INC55 LYNN SHORE DRIVE LYNN, MA 01902	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
CHELSEA RESTORATION CORPORATION154 PEARL STREET 2 CHELSEA, MA 02150	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
CHILDREN'S FRIEND AND FAMILY SERVICES110 BOSTON STREET SALEM, MA 01970	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
CIRCLE PROGRAMPO BOX 815 85 MAIN ST PLYMOUTH, NH 03264	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	5,000
CITIZENS FOR ADEQUATE HOUSING INC42 WASHINGTON STREET PEABODY, MA 01960	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
COMMUNITY ACCESS UNLIMITED 80 WEST GRAND STREET ELIZABETH, NJ 07202	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	12,500
EVA'S KITCHEN AND SHELTERING PROGRAMS INC393 MAIN STREET PATERSON, NJ 07501	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
FAMILY CONNECTIONS CENTER UNIV OF NH 51 COLLEGE RD 111 DURHAM, NH 03824	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	30,000
Total				868,500

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Name and address (home or business)				
a <i>Paid during the year</i>				
FAMILY RESOURCE CENTER AT GORHAM123 MAIN STREET GORHAM,NH 03581	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
FAMILY SELF-SUFFICIENCY CENTER INC280 WASHINGTON STREET SALEM,MA 01970	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
GREATER LIFE INCPO BOX 8447 NEWARK,NJ 07108	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	18,000
HARBORCOV INCPO BOX 505754 CHELSEA,MA 02150	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
HEALING ABUSE WORKING FOR CHANGE27 CONGRESS ST STE 201 SALEM,MA 01970	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	35,000
HOMESTART INC105 CHAUNCY ST STE 502 BOSTON,MA 02111	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
HOUSING FAMILIES INC354 CROSS STREET MALDEN,MA 02148	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
HUDSON COUNTY CHILD ABUSE PREVENTION CENTER880 BERGEN AVE 302 JERSEY CITY,NJ 07306	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
JULIE'S FAMILY LEARNING PROGRAM INC133 DORCHESTER STREET SOUTH BOSTON,MA 02127	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
LAWRENCE COMMUNITY WORKS INC168 NEWBURY STREET LAWRENCE,MA 01841	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
MASSACHUSETTS COALITION FOR THE HOMELESS15 BUBIER STREET LYNN,MA 01901	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
MERCY CENTER INC377 EAST 145TH STREET BRONX,NY 10454	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
NEIGHBORS LINK CORPORATION 27 COLUMBUS AVE MOUNT KISCO,NY 10549	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
ONE FAMILY CAMPAIGN INC186 SOUTH STREET BOSTON,MA 02111	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
OREGON HEALTH & SCIENCE UNIVERSITY3181 SW SAM JACKSON PARK RD PORTLAND,OR 97201	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
Total				868,500

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OSBORNE ASSOCIATION809 WESTCHESTER AVE BRONX, NY 10455	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	30,000
PALISADES EMERGENCY RESIDENCE CORP108 36TH STREET UNION CITY, NJ 07087	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	10,000
PARENT-CHILD HOME PROGRAM INC1415 KELLUM PLACE STE 101 GARDEN CITY, NY 11530	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
PARENTS PLACES3 CARHART AVE WHITE PLAINS, NY 01605	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
RAW ART WORKS INC37 CENTRAL SQUARE LYNN, MA 01901	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	15,000
ROCA INC101 PARK STREET CHELSEA, MA 02150	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
THE SALVATION ARMY4 GARY ROAD UNION, NJ 07083	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	5,000
SHELTER INC DBA HEADING HOME PO BOX 390516 CAMBRIDGE, MA 02139	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
SOMERVILLE HOMELESS COALITIONPO BOX 440436 SOMERVILLE, MA 02144	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	10,000
TRAVELER'S AID FAMILY SERVICES INC17 EAST STREET BOSTON, MA 02111	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	20,000
UNITED SOUTH END SETTLEMENTS566 COLUMBUS AVE BOSTON, MA 02118	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	5,000
UNIVERSITY SETTLEMENT SOCIETY OF NEW YORK184 ELDRIDGE STREET NEW YORK, NY 10002	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
WELLSPRING HOUSE INC302 ESSEX AVE GLOUCESTER, MA 01930	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
WHOLE VILLAGE FAMILY RESOURCE CENTER258 HIGHLAND STREET PLYMOUTH, NH 03264	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	10,000
WINDMILL ALLIANCE INC141 BROADWAY BAYONNE, NJ 07002	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	10,000
Total				868,500

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YORK STREET PROJECT89 YORK STREET JERSEY CITY, NJ 07302	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
YOUTH CONSULTATION SERVICE 235 MAIN STREET HACKENSACK, NJ 07601	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	25,000
YWCA OF EASTERN UNION COUNTY1131 E JERSEY ST ELIZABETH, NJ 17201	N/A	501(C)(3)	GENERAL OPERATING/PROGRAM SUPPORT	10,000
Total				868,500

TY 2009 Accounting Fees Schedule

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Tax preparation fee	3,100	1,550		1,550

**TY 2009 Investments Corporate
Bonds Schedule**

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS - U.S. TRUST	590,735	619,872

**TY 2009 Investments Corporate
Stock Schedule**

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK - U.S. TRUST	3,439,438	5,087,233

**TY 2009 Investments Government
Obligations Schedule**

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

**US Government Securities - End of
Year Book Value:** 551,406

**US Government Securities - End of
Year Fair Market Value:** 503,635

**State & Local Government
Securities - End of Year Book
Value:** 0

**State & Local Government
Securities - End of Year Fair
Market Value:** 0

TY 2009 Investments - Other Schedule**Name:** THE LINDEN FOUNDATION INC**EIN:** 22-6678640

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
PUBLIC REITS & REAL ESTATE PRIVATE OWNERSHIP - U.S. TRUST	AT COST	487,349	525,589
MUTUAL FUNDS - U.S. TRUST	AT COST	232,308	234,499

TY 2009 Other Decreases Schedule**Name:** THE LINDEN FOUNDATION INC**EIN:** 22-6678640

Description	Amount
DISTRIBUTION FROM REAL ESTATE INVESTMENT TRUST (BASIS ADJUSTMENT)	23,729

TY 2009 Other Expenses Schedule

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISC ADMINISTRATIVE EXP	3,738	0		3,738
INSURANCE	725	0		725
STATE FILING FEES	109	0		109
DUES AND SUBSCRIPTIONS	495	0		495
INTERNET FEES	104	0		104

TY 2009 Other Professional Fees Schedule

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	23,170	23,170		0
GRANTS MANAGEMENT FEES	22,923	0		22,923

TY 2009 Taxes Schedule

Name: THE LINDEN FOUNDATION INC

EIN: 22-6678640

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	750	0		0
FOREIGN TAX WITHHELD	2,494	2,494		0