

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

**2007**

Department of the Treasury  
 Internal Revenue Service (77)

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

For calendar year 2007, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

**G** Check all that apply:  Initial return  Final return  Amended return  Address change  Name change

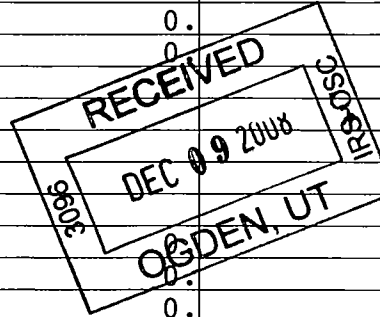
Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation <b>TURN THE CORNER FOUNDATION</b> Number and street (or P O box number if mail is not delivered to street address) Room/suite <b>15 WEST 63RD STREET</b> City or town, state, and ZIP code <b>NEW YORK, NY 10023</b>	<b>A</b> Employer identification number <b>03-0392311</b> <b>B</b> Telephone number <b>212-580-6262</b>
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**H** Check type of organization:  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, col (c), line 16) **\$ 975,632.** (Part I, column (d) must be on cash basis)  
**J** Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

**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))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Contributions, gifts, grants, etc., received	913,366.			
<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
<b>3</b> Interest on savings and temporary cash investments	24,152.	24,152.	24,152.	<b>STATEMENT 1</b>
<b>4</b> Dividends and interest from securities				
<b>5a</b> Gross rents				
<b>b</b> Net rental income or (loss)				
<b>6a</b> Net gain or (loss) from sale of assets not on line 10	555.			
<b>b</b> Gross sales price for all assets on line 6a	555.			
<b>7</b> Capital gain net income (from Part IV, line 2)		555.		
<b>8</b> Net short-term capital gain			N/A	
<b>9</b> Income modifications				
<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold				
<b>c</b> Gross profit or (loss)				
<b>11</b> Other income	237,743.	0.	237,743.	<b>STATEMENT 2</b>
<b>12</b> Total. Add lines 1 through 11	1,175,816.	24,707.	261,895.	
<b>13</b> Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
<b>14</b> Other employee salaries and wages				
<b>15</b> Pension plans, employee benefits				
<b>16a</b> Legal fees <b>STMT 3</b>	1,574.	0.	0.	1,574.
<b>b</b> Accounting fees <b>STMT 4</b>	13,000.	0.	0.	13,000.
<b>c</b> Other professional fees				
<b>17</b> Interest				
<b>18</b> Taxes				
<b>19</b> Depreciation and depletion				
<b>20</b> Occupancy				
<b>21</b> Travel, conferences, and meetings	10.		0.	10.
<b>22</b> Printing and publications	4,623.		0.	4,623.
<b>23</b> Other expenses <b>STMT 5</b>	437,900.	0.	0.	437,900.
<b>24</b> Total operating and administrative expenses. Add lines 13 through 23	457,107.	0.	0.	457,107.
<b>25</b> Contributions, gifts, grants paid	376,131.			376,131.
<b>26</b> Total expenses and disbursements. Add lines 24 and 25	833,238.	0.	0.	833,238.
<b>27</b> Subtract line 26 from line 12:				
<b>a</b> Excess of revenue over expenses and disbursements	342,578.			
<b>b</b> Net investment income (if negative, enter -0-)		24,707.		
<b>c</b> Adjusted net income (if negative, enter -0-)			261,895.	



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		593,487.	975,632.	975,632.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis ▶				
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis ▶	2,796.				
	Less: accumulated depreciation <b>STMT 6</b> ▶	2,796.				
15	Other assets (describe ▶)					
16	<b>Total assets</b> (to be completed by all filers)			593,487.	975,632.	975,632.
Liabilities	17	Accounts payable and accrued expenses		55,000.	53,000.	
	18	Grants payable			41,567.	
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
	23	<b>Total liabilities</b> (add lines 17 through 22)			55,000.	94,567.
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			538,487.	881,065.	
30	<b>Total net assets or fund balances</b>			538,487.	881,065.	
31	<b>Total liabilities and net assets/fund balances</b>			593,487.	975,632.	

**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	538,487.
2	Enter amount from Part I, line 27a	2	342,578.
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	881,065.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30</b>	6	<b>881,065.</b>

**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.)
<b>1a CAPITAL GAIN</b>		<b>P</b>	<b>VARIOUS</b>	<b>VARIOUS</b>
b				
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 555.			555.	
b				
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) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			555.	
b				
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	555.	
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) If (loss), enter -0- in Part I, line 8		3	555.	

**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 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))
2006	554,932.	406,470.	1.365247
2005			
2004			
2003			
2002			
2 Total of line 1, column (d)			2 1.365247
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 1.365247
4 Enter the net value of noncharitable-use assets for 2007 from Part X, line 5			4 772,792.
5 Multiply line 4 by line 3			5 1,055,052.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 247.
7 Add lines 5 and 6			7 1,055,299.
8 Enter qualifying distributions from Part XII, line 4			8 833,238.

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.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling letter: _____ (attach copy of ruling letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	494.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under Section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	494.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	494.
6 Credits/Payments:			
a	2007 estimated tax payments and 2006 overpayment credited to 2007	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	494.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
11	Enter the amount of line 10 to be: <b>Credited to 2008 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a		X
1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
1c		X
2 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0.		
2		X
3 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		
3		X
4a		X
4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		
5		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		
6		X
7	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <u>NY</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		
8b	X	
9		X
10	X	

N/A

STMT 7

**Part VII-A Statements Regarding Activities** (continued)

<p><b>11a</b> 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 instructions)</p>	11a		X
<p><b>b</b> If "Yes," did the foundation have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in the attachment for line 11a?</p>	11b		N/A
<p><b>12</b> Did the foundation acquire a direct or indirect interest in any applicable insurance contract?</p>	12		X
<p><b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.TURNTHECORNER.ORG</u></p>	13	X	
<p><b>14</b> The books are in care of ► <u>STACI GRODIN</u> Telephone no. ► <u>212-580-6262</u> Located at ► <u>15 WEST 63RD STREET, NEW YORK, NY</u> ZIP+4 ► <u>10023</u></p>			
<p><b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year</p>	15		N/A

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

		Yes	No
<b>File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.</b>			
<p><b>1a</b> During the year did the foundation (either directly or indirectly):</p> <p>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(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</p> <p>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(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</p> <p>(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</p>			
<p><b>b</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 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here</p>	1b		N/A
<p><b>c</b> 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 2007?</p>	1c		X
<b>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)):</b>			
<p><b>a</b> At the end of tax year 2007, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2007? If "Yes," list the years ► _____, _____, _____, _____</p>			N/A
<p><b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 instructions.)</p>	2b		N/A
<p><b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____, _____, _____, _____</p>			
<p><b>3a</b> 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</p>			
<p><b>b</b> If "Yes," did it have excess business holdings in 2007 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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2007)</p>	3b		N/A
<p><b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?</p>	4a		X
<p><b>b</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 2007?</p>	4b		X

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

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(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)?  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**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 instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here  N/A

**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?  Yes  No  
 If "Yes," attach the statement required by Regulations section 53.4945-5(d)  N/A

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
 If you answered "Yes" to 6b, also file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**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.**

(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 STATEMENT 8		0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1). 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. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
POWERED BY PROFESSIONALS, INC. 1375 BROADWAY, 3RD FLOOR, NEW YORK, NY 10018	MANAGEMENT FEES	192,000.
<b>Total number of others receiving over \$50,000 for professional services</b>		<b>0</b>

**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 THE FOUNDATION PRODUCES LOCAL AND NATIONAL PROGRAMS DESIGNED TO EDUCATE COMMUNITY MEMBERS AND HEALTH CARE PROFESSIONALS ON LYME DISEASE AND FUNDS RESEARCH PROGRAMS TO FIND A CURE.	456,441.
2	
3	
4	

**Part IX-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		
2		
3 All other program-related investments. See instructions.		
<b>Total. Add lines 1 through 3</b>		<b>0.</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	
<b>b</b>	Average of monthly cash balances	<b>1b</b>	784,560.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	784,560.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	784,560.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	11,768.
<b>5</b>	<b>Net value of noncharitable-use assets</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	772,792.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	38,640.

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

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	38,640.
<b>2a</b>	Tax on investment income for 2007 from Part VI, line 5	<b>2a</b>	494.
<b>b</b>	Income tax for 2007. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	494.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	38,146.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	38,146.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	38,146.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	833,238.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	833,238.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	833,238.

**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 instructions)

	(a) Corpus	(b) Years prior to 2006	(c) 2006	(d) 2007
1 Distributable amount for 2007 from Part XI, line 7				38,146.
2 Undistributed income, if any, as of the end of 2006				
a Enter amount for 2006 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2007:				
a From 2002				
b From 2003				
c From 2004				
d From 2005				
e From 2006				534,729.
f Total of lines 3a through e	534,729.			
4 Qualifying distributions for 2007 from Part XII, line 4: ▶ \$ 833,238.				
a Applied to 2006, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2007 distributable amount				38,146.
e Remaining amount distributed out of corpus	795,092.			
5 Excess distributions carryover applied to 2007 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,329,821.			
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 instructions		0.		
e Undistributed income for 2006. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2007. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2008				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2002 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2008. Subtract lines 7 and 8 from line 6a	1,329,821.			
10 Analysis of line 9:				
a Excess from 2003				
b Excess from 2004				
c Excess from 2005				
d Excess from 2006	534,729.			
e Excess from 2007	795,092.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2007, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	
2 a 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 foundation had \$5,000 or more in assets at any time during the year-see 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) )

NONE

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.

NONE

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 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:  
**CONTACT THE ORGANIZATION DIRECTLY**

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

c Any submission deadlines:

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

**Part XV** **Supplementary Information** (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
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)				
<b>a Paid during the year</b>				
<b>SEE STATEMENT 9</b>				
<b>Total</b>			<b>▶ 3a</b>	<b>376,131.</b>
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b>			<b>▶ 3b</b>	<b>0.</b>





**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**Supplementary Information for  
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No 1545-0047

**2007**

Name of organization

Employer identification number

TURN THE CORNER FOUNDATION

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Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions )

**General Rule-**

- For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II )

**Special Rules-**

- For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II )
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III )
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year ) ▶ \$ \_\_\_\_\_

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions  
for Form 990, Form 990-EZ, and Form 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

Name of organization

Employer identification number

TURN THE CORNER FOUNDATION

03-0392311

**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	AARON WOLFSON ONE STATE STREET PLAZA NEW YORK, NY 10004	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	AMANDA LEE 140 PERRY STREET NEW YORK, NY 10014	\$ 5,400.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	AIG INC 70 PINE STREET NEW YORK, NY 10270	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	BALYASNY INC 181 WEST MADISON STREET SUITE 3600 CHICAGO, IL 60602	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	BARRY & LEA PORTER 9280 NIGHTINGALE DRIVE LOS ANGELES, CA 90069	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	CUSHMAN & WAKEFIELD, INC 51 W 52RD STREET NEW YORK, NY 10019	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BRAD HOENIG 300 EAST 62ND STREET, APT. 2701 NEW YORK, NY 10021	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	BRIAN GOLDMAN 15 PARK ROAD SCARSDALE, NY 10583	\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	CANTOR FITZGERALD 110 EAST 59TH STREET NEW YORK, NY 10022	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	DAMON GIGLIO 845 UNITED NATIONS PLAZA, APT. 58E NEW YORK, NY 10017-3000	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	DAN AND MICHELE MATTHEWS 810-21 DALLAS ROAD VICTORIA BRITISH COLUMBIA V8V 4X9	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	DANNY LIRTZMAN 99 JANE STREET, APT. 10B NEW YORK, NY 10014	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>TURN THE CORNER FOUNDATION</b>	Employer identification number <b>03-0392311</b>
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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	DAVID AND CINDY REICHENBAUM 11 LINDEN DRIVE PURCHASE, NY 10577	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	DIPAK AND ANITA PATEL 1570 PARK AVENUE MERRICK, NY 11566	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	DIRECT ACCESS PARTNERS LLC 19111 COLLINS AVENUE, APT. 3205 SUNNY ISLES, FL 33160	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	GILLIS MACGIL ADDISON 11 EAST 68TH STREET NEW YORK, NY 10021	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	GOLDMAN SACHS 1 UNION SQUARE SOUTH, APT. 17F NEW YORK, NY 10003	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	GREG AND SARAH KNIGHT 198 COLUMBIA HEIGHTS, UNIT 3 BROOKLYN HEIGHTS, NY 11201	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	HOENIG 380 MADISON AVENUE NEW YORK, NY 10017-3000	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
20	IAN AND JEN GOODMAN 225 WEST 86TH STREET, APT. 805 NEW YORK, NY 10024	\$ 9,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
21	INSTINET 3 TIMES SQUARE, 8TH FLOOR NEW YORK, NY 10036	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
22	IGENEX 797 SAN ANTONIO ROAD PALO ALTO, CA 94303	\$ 6,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
23	INSIGHT VENTURE PARTNERS/ JAGEX LTD 680 FIFTH AVENUE, 8TH FLOOR NEW YORK, NY 10019	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
24	JEFFREY FEINBERG 6682 LAS ARBOLEDAS P.O. BOX 1883 RANCHO SANTA FE, CA 92067	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	JNK SECURITIES 489 5TH AVENUE, 25TH FLOOR NEW YORK, NY 10017	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
26	JOHN HERR 106 PROSPECT STREET RIDGEWOOD, NJ 07450	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
27	LEVEL GLOBAL INVESTORS 537 STEAMBOAT ROAD GREENWICH, CT 06830	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
28	MARQUIS JET 2 TULANE DRIVE LIVINGSTON, NJ 07039-6132	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
29	MICHAEL AND ELIZABETH STEINBERG 350 EAST 79TH STREET, APT. 26A NEW YORK, NY 10021	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
30	NY TICK CONTROL P.O. BOX 1439 NEW YORK, NY 10017	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization <b>TURN THE CORNER FOUNDATION</b>	Employer identification number <b>03-0392311</b>
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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	ROBERT AND DONNA SHAFIR 102 ROBERTS ROAD ENGLEWOOD CLIFFS, NJ	\$ 17,450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
32	STEVEN AND FARREL STARKER 7 FLAGLER DRIVE RYE, NY 10580-1851	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
33	CARL & MARION WOLF 627 INWOOD LANE SOUTH ORANGE, NJ 07079	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
34	CRAIG DONALDSON 600 STEAMBOAT ROAD GREENWICH, CT 06830	\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
35	CITIGROUP 390 GREENWICH STREET, 3RD FLOOR NEW YORK, NY 10013	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
36	DANIELLE CHIESI 418 EAST 59TH STREET, APT 35A NEW YORK, NY 10020	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	DAVE DUTHIE 145 NORTH CHATSWORTH AVENUE LARCHMONT, NY 10538	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
38	F'TV MANAGEMENT COMPANY L.P. 555 CALIFORNIA STREET, SUITE 2900 SAN FRANCISCO, CA 94104	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
39	DAVID CHOI 200 RIVERSIDE BLVD APT 7 H NEW YORK, NY 10069	\$ 5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
40	DAVID GANEK 390 PARK AVENUE NEW YORK, NY 10022	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
41	DENNIS & SUSY MCCAULEY 1 LAVENDER LANE RYE, NY 10580	\$ 6,050.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
42	TITAN ADVISORS 3 INTERNATIONAL DRIVE SUITE 120 RYE BROOK, NY 10573	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

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**Part I Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43	DOUG WILSON 3160 SERENA AVE CARPENTERIA, CA 93013	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
44	EVAN HALPERN 1930 BROADWAY, APT 17B NEW YORK, NY 10023	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
45	H.N. AND FRANCES C BERGER FOUNDATION PO 13390 PALM DESERT, CA 92255-5293	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
46	GARY & EUDORA SOMMERS PO BOX 402 10 SHOSHONE DRIVE GOLDEN BRIDGE, NY 10526	\$ 24,435.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
47	TITAN LEGACY FUND ADVISORS LLC 3 INTENAIONAL DRIVE, SUITE 120 RYE BROOK, NY 10573	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
48	GREG KNIGHT 198 COLUMBIA HEIGHTS, UNIT 3 BROOKLYN HEIGHTS, NY 11201	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
49	KEVIN DANN & PARTNERS, LLC 400 MADISON AVENUE 4TH FLOOR NEW YORK, NY 10117	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
50	HOWARD WEINERMAN 70 DARREN DRIVE BASKING RIDGE, NJ 07920	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
51	JARROD & LORRIE NADEL 166 KNICKERBOCKER CLOSTER, NJ 07624	\$ 8,105.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
52	JENN & IAN GOODMAN 225 WEST 86TH STREET APT 805 NEW YORK, NY 10024	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
53	JENNIFER CATLIN WOLFARD 702 ORANGE AVENUE LOS ALTOS, CA 94022	\$ 19,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
54	JESSE ITZLER 235 WEST 75TH STREET, APT 9D NEW YORK, NY 10023	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
55	KAREN KISSLING 613 NOD HILL ROAD WILTON, CT 06897	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
56	LARRY AUSTIN 790 GREENWICH STREET, APT 3F NEW YORK, NY 10014	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
57	GOLDEN TREE ASSET MANAGEMENT, LP 300 PARK AVE 21ST FLOOR NEW YORK, NY 10022	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
58	DEUTSCHE BANK AMERICAS PO BOX 3288 PRINCETON, NJ 08543	\$ 6,350.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
59	ING USA ANNUITY & LIFE INSURANCE 1475 DUNWOODY DRIVE WESTCHESTER, PA 19380	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
60	FIELD CHECK GROUP 2043 OAKLEY AVENUE MENLO PARK, CA 94025	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
61	LOYALTEX FASHION INC 135 WEST 36TH STREET, 9TH FLOOR NEW YORK, NY 10018	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
62	PAM LAMBERTON 12410 NW 11TH COURT VANCOUVER, WA 98686-2453	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
63	PATRICK & CHRISTINE BEACH 1504 EAST MOUNTAIN DR SANTA BARBARA, CA 93108	\$ 10,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
64	MACDONALD FAMILY FOUNDATION PO BOX 64788 LOSANGELES, CA 90064	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
65	RAYMOND MIRRA 1494 TREE LINE DRIVE MALVERN, PA 19355	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
66	GREENBERG TAURIG 200 PARK AVENUE NEW YORK, NY 10166	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization <b>TURN THE CORNER FOUNDATION</b>	Employer identification number <b>03-0392311</b>
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**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
67	ROSS DEUTSCH 1151 HILARY LANE HIGHLAND PARK, IL 60035	\$ 9,850.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
68	ROY & JOANNE GOLDBERG 8109 BAYSHORE DRIVE MARGATE, NJ 08402	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
69	RUSSELL GEYSER PO BOX 235169 ENCENITAS, CA 92023	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
70	OTA LLC 80E MANHATTANVILLE ROAD PURCHASE, NY 10577	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
71	MILLER TABAK & CO 331 MADISON AVE NEW YORK, NY 10117	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
72	BERNSTEIN GLOBAL WEALTH MANAGEMNT 1345 AVENUE OF THE AMERICAS 16TH FLOOR NEW YORK, NY 10105	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

TURN THE CORNER FOUNDATION

03-0392311

**Part I Contributors** (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
73	TONY MILLER 151 BINGHAM AVE RUMSON, NJ 07760	\$ 5,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
74	WARREN SPAR 20 FAIRFIELD DRIVE SHORT HILLS, NJ 07078	\$ 41,273.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
75	WAYNE & KATHY MUELLER 1102 FAIRWAY GREEN MAMARONECK, NY 10543	\$ 10,850.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
76	WILLIAM & CAROLYN PATTERSON 1050 PARK AVENUE NEW YORK, NY 10028	\$ 5,190.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
77	JEFFREY PERRY 9 WAYSIDE LANE SCARSDALE, NY 10583	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
78	LAURA CAVALLARO, C/O TURN THE CORNER 15 WEST 63RD STREET NEW YORK, NY 10023	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

2007 DEPRECIATION AND AMORTIZATION REPORT  
 FORM 990-PF PAGE 1

990-PF

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	FURNITURE * TOTAL 990-PF PG 1 DEPR	VARIABLES		5.00	16	2,796.		0.	2,796.	2,796.	0.	0.
						2,796.			2,796.	2,796.	0.	0.

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**FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1**


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SOURCE	AMOUNT
INTEREST AND DIVIDEND INCOME	24,152.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	24,152.

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**FORM 990-PF OTHER INCOME STATEMENT 2**


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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	237,743.	0.	237,743.
TOTAL TO FORM 990-PF, PART I, LINE 11	237,743.	0.	237,743.

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**FORM 990-PF LEGAL FEES STATEMENT 3**


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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	1,574.	0.	0.	1,574.
TO FM 990-PF, PG 1, LN 16A	1,574.	0.	0.	1,574.

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**FORM 990-PF ACCOUNTING FEES STATEMENT 4**


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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	13,000.	0.	0.	13,000.
TO FORM 990-PF, PG 1, LN 16B	13,000.	0.	0.	13,000.

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FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SUPPLIES	1,602.	0.	0.	1,602.	
POSTAGE AND SHIPPING	646.	0.	0.	646.	
MANAGEMENT FEES	192,000.	0.	0.	192,000.	
DUES AND SUBSCRIPTIONS	162.	0.	0.	162.	
COMPUTER EXPENSES	737.	0.	0.	737.	
RECRUITMENT	1,800.	0.	0.	1,800.	
MEALS AND ENTERTAINMENT	1,578.	0.	0.	1,578.	
WEBSITE AND INTERNET	64.	0.	0.	64.	
GIFT	228.	0.	0.	228.	
INSURANCE	1,340.	0.	0.	1,340.	
DIRECT FUNDRAISING EXPENSES	237,743.	0.	0.	237,743.	
TO FORM 990-PF, PG 1, LN 23	437,900.	0.	0.	437,900.	

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT			STATEMENT	6
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE		
FURNITURE	2,796.	2,796.	0.		
TOTAL TO FM 990-PF, PART II, LN 14	2,796.	2,796.	0.		

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10		STATEMENT	7
NAME OF CONTRIBUTOR	ADDRESS			
HOENIG	380 MADISON AVENUE, NEW YORK, NEW YORK 10017			
SHARI AND PETER BOOCKVAR	11 VANDERBILT DRIVE, LIVINGSTON, NEW JERSEY 07039			
AIG ENVIRONMENTAL	380 WEST 12TH STREET, APT 3A, NEW YORK, NEW YORK 10014			
JNK SECURITIES	489 5TH AVENUE, 25TH FLOOR, NEW YORK, NEW YORK 10017			

TODD DEUTSCH AND BROOKE ELDER 401 EAST 60TH STREET, APT 22D, NEW YORK,  
NEW YORK 10021

DIPAK AND ANITA PATEL 1570 PARK AVENUE, MERRICK, NEW YORK 11566

GILLIS MACGIL ADDISON 11 EAST 68TH STREET, NEW YORK, NEW YORK  
10021

STEVEN AND FARREL STARKER 7 FLAGLER DRIVE, RYE, NEW YORK 10580

BEVERLY PERRY 700 PARK AVENUE, NEW YORK, NEW YORK 10021

NY TICK CONTROL P.O. BOX 1439, NEW YORK, NEW YORK 10017

BILL KAY INVESTMENTS INC 339 KINDERSLEY, MONTREAL QUEBEC H3R 1R8

CHAPMAN CAPITAL LLC 222 NORTH SEPULVEDA BOULEVARD, SUITE 1322,  
EL SEGUNDO, CALIFORNIA 90245

JEFFREY AND ELIZABETH PERRY 9 WAYSIDE LANE, SCARSDALE, NEW YORK 10583

SKADDEN ARPS SLATE MEAGHER AND FLOM 4 TIMES SQUARE, NEW YORK, NEW YORK 10036  
LLP

IVAN AND FRANCESCA 1 WEST 72ND STREET, APT 39, NEW YORK, NEW  
YORK 10023

MARQUIS JET 2 TULANE DRIVE, LIVINGSTON, NEW JERSEY  
07039

ROBERTO AND ALLISON MIGNONE 9 ESSEX PLACE, BRONXVILLE, NEW YORK 10708

MICHAEL AND ELIZABETH STEINBERG 350 EAST 79TH STREET, APT 26A, NEW YORK,  
NEW YORK 10021

GLEN AND GINA GIORDANO 70 STUYVESANT AVENUE, NEW YORK, NEW YORK  
10580

JOHN HERR 106 PROSPECT STREET, RIDGEWOOD, NEW JERSEY  
07450

GREG AND SARAH KNIGHT 198 COLUMBIA HEIGHTS, UNIT 3, BROOKLYN  
HEIGHTS, NEW YORK 11201

ERIC REICHENBAUM 3 GREENBRIAR CIRCLE, ARMONK, NEW YORK  
11054

SCOTT SUSSMAN 1230 PARK AVENUE, APT 5D, NEW YORK, NEW  
YORK 10128

STERLING COMMODITIES CORP 1 NORTH END AVENUE, SUITE 1117, NEW YORK,  
NEW YORK 10282

BILL AND CAROLYN BRODY 941 FOREST AVENUE, RYE, NEW YORK 10580

BRIAN GOLDMAN 15 PARK ROAD, SCARSDALE, NEW YORK 10583

INSTINET 3 TIMES SQUARE, 8TH FLOOR, NEW YORK, NEW YORK 10036

DAVID AND CINDY REICHENBAUM 11 LINDEN DRIVE, PURCHASE, NEW YORK 10577

LEVEL GLOBAL INVESTORS 390 PARK AVENUE, 15TH FLOOR, NEW YORK, NEW YORK 10022

BRAD HOENIG 300 EAST 62ND STREET, APT 2701, NEW YORK, NEW YORK 10021

AARON WOLFSON ONE STATE STREET PLAZA, NEW YORK, NEW YORK 10004

DIRECT ACCESS PARTNERS LLC 19111 COLLINS AVENUE, APT 3205, SUNNY ISLES, FLORIDA 33160

DAN AND MICHELE MATTHEWS 810-21 DALLAS ROAD, VICTORIA BRITISH COLUMBIA V8V 4X9

IAN AND JEN GOODMAN 225 WEST 86TH STREET, APT 805, NEW YORK, NEW YORK 10024

NANCY PERRY CROTTY AND JOHN CROTTY 4 MAGNOLIA PLACE, RYE, NEW YORK 10580

AIG INC 70 PINE STREET, NEW YORK, NEW YORK 10270

JEFFREY FEINBERG 6682 LAS ARBOLEDAS P.O. BOX 1883, RANCHO SANTA FE, CA 92067

DANNY LIRTZMAN 99 JANE STREET, APT 10B, NEW YORK, NEW YORK 10014

ROBERT AND DONNA SHAFIR 102 ROBERTS ROAD, ENGLEWOOD CLIFFS, NEW JERSEY

DAMON GIGLIO 845 UNITED NATIONS PLAZA, APT 58E, NEW YORK, NEW YORK 10017

GOLDMAN SACHS 1 UNION SQUARE SOUTH, APT 17F, NEW YORK, NEW YORK 10003

FORM 990-PF                      PART VIII - LIST OF OFFICERS, DIRECTORS                      STATEMENT    8  
    TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
STACI GRODIN 15 WEST 63RD ST NEW YORK, NY 10023	PRESIDENT 10.00	0.	0.	0.
RICHARD GRODIN 15 WEST 63RD ST NEW YORK, NY 10023	TREASURER 1.00	0.	0.	0.
BRIAN GRODIN 15 WEST 63RD ST NEW YORK, NY 10023	V. PRESIDENT 1.00	0.	0.	0.
LISA GITNIK MALOUL 15 WEST 63RD ST NEW YORK, NY 10023	SECRETARY 1.00	0.	0.	0.
ANTHONY ADDISON 470 PARK AVENUE, APT 2DE NEW YORK, NY 10022	BOARD MEMBER 1.00	0.	0.	0.
CHARLES BALDUCCI 308 EAST 72 STREET, APT 4E NEW YORK, NY 10021	BOARD MEMBER 1.00	0.	0.	0.
MICHAEL BEACH 69 LEONARD STREET, PH5B NEW YORK, NY 10013	BOARD MEMBER 1.00	0.	0.	0.
NANCY PERRY CROTTY 4 MAGNOLIA PLACE RYE, NY 10580	BOARD MEMBER 1.00	0.	0.	0.
SANDY FEIN 111 COLONIAL DRIVE WILMINGTON, NC 28403	BOARD MEMBER 1.00	0.	0.	0.
MATT JACOBS 401 EAST 60TH STREET, APT 14D NEW YORK, NY 10022	BOARD MEMBER 1.00	0.	0.	0.
MARGARET (TULA) KARRAS 130 HICKS STREET, 5E BROOKLYN, NY 11201	BOARD MEMBER 1.00	0.	0.	0.

GREGORY KNIGHT 198 COLUMBIA HEIGHTS, 3 BROOKLYN, NY 11201	BOARD MEMBER 1.00	0.	0.	0.
ERIC KRATZ 6 GAREY DRIVE CHAPPAQUA, NY 10514	BOARD MEMBER 1.00	0.	0.	0.
DANNY LIRTZMAN 15 WEST 63RD ST NEW YORK, NY 10023	BOARD MEMBER 1.00	0.	0.	0.
BOBBY LUBIN 15 WEST 63RD ST NEW YORK, NY 10023	BOARD MEMBER 1.00	0.	0.	0.
DAN PINE 666 GREENWICH STREET, APT 10016 NEW YORK, NY 10014	BOARD MEMBER 1.00	0.	0.	0.
DAVE REICHENBAUM 11 LINDEN DRIVE PURCHASE, NY 10577	BOARD MEMBER 1.00	0.	0.	0.
STEPHEN SOLEYMANI 15 WEST 63RD ST NEW YORK, NY 10023	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF GRANTS AND CONTRIBUTIONS STATEMENT 9  
PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
LYME INDUCED AUTISM FOUNDATION 1771 HONORS LANE, CORONA, CA 92883	NONE RESEARCH		40,000.
DOUG HALBELL 25 MAIN STREET, MT KISCO, NY 10549	NONE RESEARCH		10,350.
DR. JOSEPH J BURRASCANO (VSR TEAM MEMBER) 68 OLD TRAIL ROAD, WATERMILL, NY 11976	NONE RESEARCH		100,700.

INTERNATIONAL LYME ASSOCIATION OF NONE DISEASE SOCIETY PO BOX 34161, BETHESDA, MD 20827 RESEARCH	126,090.
ST CATHERINE OF SIENNA MEDICAL NONE CENTER 50 ROUTE 25A, SMITHTOWN, NY 11781 RESEARCH	
JEFF BORCHERT NONE 10122 NE FRONTGATE ROAD, RESEARCH WELLINGTON, CO 80549	20,636.
OPEN EYE PICTURES 2656 BRIDGEWAY, SUITE 202, RESEARCH SAUSALITO, CA 94965	75,000.
MINNESOTA LYME ACTION SUPPORT 25493 WEST COMFORT DRIVE, FOREST RESEARCH LAKE, MN 55025	750.
CALIFORNIA LYME DISEASE ASSOCIATION RESEARCH	90.
G POINT BUSINESS SOLUTIONS RESEARCH	915.
OTHER RESEARCH	1,600.
TOTAL TO FORM 990-PF, PART XV, LINE 3A	<u>376,131.</u>