

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





orm 990-PF

Department of the Treasury nternal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052
2006

<u>:</u> 01	calendar year 2006, or tax year beginning JAN	16, 2006	, and ending	DEC 31, 2006	_
3	Check all that apply: X Initial return F	inal return	Amended return	Address change	Name change
Us	te the IRS label.			A Employer identification	number
01	therwise, THE PSALM 25:10 FOUND		20-4128717		
	print Number and street (or P O box number if mail is not del		Room/suite	B Telephone number	
	P.O BOX 6808			817-991-88	88
	e Specific City or town, state, and ZIP code			C If exemption application is po	ending, check here
	FORT WORTH, TX 76110	D 1. Foreign organizations	, , , , , , , , , , , , , , , , , , , ,		
1_	Check type of organization: X Section 501(c)(3) exe	Foreign organizations me check here and attach co.	eting the 85% test, mputation		
<u> </u>	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	E If private foundation state	us was terminated
	Fair market value of all assets at end of year J Accountin	•	Accrual	under section 507(b)(1)	
		ner (specify)		F If the foundation is in a 6	
		nn (d) must be on cash		under section 507(b)(1)	· · · · · · · · · · · · · · · · · · ·
<u> </u>	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)
	1 Contributions, gifts, grants, etc., received	70,335.			
	2 Check If the foundation is not required to attach Sch B Interest on savings and temporary	<u> </u>		STATUTE	
2016	3 cash investments	94,629.	94,629.	CEIVE	MATEMENT 1
7,7	4 Dividends and interest from securities			Nov a	<u>U</u>
-53	5a Gross rents			2010	
•	b Net rental income or (loss)	2 202 020		TPR BRANCH	
	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 3,274,164.	3,203,828.		ORBANRE	CEIVED
DE(D assets on line 6a		3,203,828.	JOEN	70
<u> </u>	8 Net short-term capital gain		3,203,020		-
	9 Income modifications			- H	ا ا ع ا ۱ ع ا ۱ ع ا ۱ ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا ا ع ا
3	Gross sales less returns 10a and allowances	10			
SCANNED DE	b Less Cost of goods sold			OG	DEN, UT
F)	c Gross profit or (loss)				
	11 Other income				
_	12 Total Add lines 1 through 11	3,368,792.	3,298,457.	0.	·····
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14 Other employee salaries and wages				
ş	15 Pension plans, employee benefits 2 16a Legal fees STMT 2	1,000.	1 000		
Š	16a Legal fees STMT 2 b Accounting fees	1,000.	1,000.	0.	0.
	c Other professional fees				
u			-		
; ?	18 Taxes				
	2 19 Depreciation and depletion	· · · · · · · · · · · · · · · · · · ·			
<u>.</u>	20 Occupancy				
3	21 Travel, conferences, and meetings				
2	22 Printing and publications				
5	23 Other expenses				
Ç	24 Total operating and administrative				
Onerating and Administrative	expenses. Add lines 13 through 23	1,000.	1,000.	0.	0.
	25 Contributions, gifts, grants paid	51,500.			51,500.
	26 Total expenses and disbursements	F0 F00	4 000		F4 F4
	Add lines 24 and 25	52,500.	1,000.	0.	51,500.
	27 Subtract line 26 from line 12:	3,316,292.			
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	3,310,434.	3,297,457.		
	c Adjusted net income (if negative, enter -0-)		<u> </u>	0.	
				U •	l

P

Form **990-PF** (2006)

20-4128717

Page 2

Form 990-PF (2006)

PSALM 25:10 FOUNDATION

7

7 Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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.

_	n 990-PF (2006) THE PSALM 25:10 FOUNDATION		<u>4128</u>			age 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see i	nstru	ctior	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 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 🕨 🔲 and enter 1%	1		6	5,9	<u>49.</u>
	of Part I, line 27b					
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		6	5,9	49.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		6	5,9	49.
6	Credits/Payments:					
а	2006 estimated tax payments and 2005 overpayment credited to 2006 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	: Tax paid with application for extension of time to file (Form 8868)]				
d	I Backup withholding erroneously withheld 6d		i			
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 5	9		6	5,9	49.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2007 estimated tax	11				
Pa	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven-	e in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$	_				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		_X_
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u>X</u>
b	olf "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		_X_
	If "Yes," attach the statement required by General Instruction T.					
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	e law				
	remain in the governing instrument?			_6		<u> X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	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)						
TX						
b	o 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	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
	year 2006 or the taxable year beginning in 2006 (see instructions for Part XIV)? If "Yes," complete Part XIV		_	9		<u>X</u>
10	Did any nersons become substantial contributors during the tay year? it "you " attach a cabadula listing they appeal and addresses.	יייאייי	h	1 10	Y	1

had not been removed from jeopardy before the first day of the tax year beginning in 2006?

THE PSALM 25:10 FOUNDATION 20-4128717 Pag					age 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required Continu	ued		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?	Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or t	for			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the exceptions described i	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ıned			
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	<u>X</u>
If you answered "Yes" to 6b, also file Form 8870.			Ì		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attribut	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	/		
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) Expe account, o allowand	nse other ces
DAVID SHANKS	PRESIDENT				
P.O. BOX 6808					
FORT WORTH, TX 76110	1.00	0.	ο.		0.
DEREK HOLMES	BOARD OF DIRE				
P.O. BOX 6808					
FORT WORTH, TX 76110	1.00	0.	0.	İ	0.
GLENN HODGE	BOARD OF DIRE		-		
P.O. BOX 6808					
FORT WORTH, TX 76110	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	cluded 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) Expe account, o allowand	other
NONE			- Component		
	1				
	1				
]				
	1				
Total number of other employees paid over \$50,000					0

THE PSALM 25:10 FOUNDATION 20-4	128717 Page /
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
NONE	(0)
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 N/A	·
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	701104111
2	
All other program-related investments. See instructions.	
3	

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T	
•	Average monthly fair market value of securities	1a	1,936,150.
-	Average of monthly cash balances	1b	1,349,692.
	Fair market value of all other assets	1c	1,313,032.
_	Total (add lines 1a, b, and c)	1d	3,285,842.
	Reduction claimed for blockage or other factors reported on lines 1a and	-,,	3/203/0121
·	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,285,842.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	49,288.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,236,554.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	155,177.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certair	
1	Minimum investment return from Part X, line 6	1	155,177.
2a	Tax on investment income for 2006 from Part VI, line 5 2a 65, 949.		
b	Income tax for 2006. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	65,949.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	89,228.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	89,228.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	89,228.
P	art XII Qualifying Distributions (see instructions)	-	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		54 500
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	51,500.
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:		
	Suitability test (prior IRS approval required)	3a	-
	Cash distribution test (attach the required schedule)	3Ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	51,500.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	founda	ation qualifies for the section

Form **990-PF** (2006)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2005	(c) 2005	(d) 2006
1 Distributable amount for 2006 from Part XI, line 7				89,228.
2 Undistributed income, if any, as of the end of 2005				
a Enter amount for 2005 only			0.	
b Total for prior years:		0.		·
3 Excess distributions carryover, if any, to 2006:				
a From 2001				
b From 2002				
c From 2003				
d From 2004				
e From 2005				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2006 from				•
Part XII, line 4: ► \$ 51,500.				
a Applied to 2005, 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 2006 distributable amount				51,500.
e Remaining amount distributed out of corpus	0.			-
5 Excess distributions carryover applied to 2006 (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	0.			
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 2005. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2006. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2007				37,728.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(E) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2001				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2007.				
Subtract lines 7 and 8 from line 6a	0.		74.04	· · · · · · · · · · · · · · · · · · ·
10 Analysis of line 9:				
a Excess from 2002				
b Excess from 2003				
c Excess from 2004				
d Excess from 2005				
e Excess from 2006				

Form 990-PF (2006) THE PSA	LM 25:10 FO	UNDATION		20-41	28717 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	·	-	▶		
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0005	Prior 3 years	1	
income from Part I or the minimum	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
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					
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 Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during		e 28 of the instru	ctions.)		
1 Information Regarding Foundation	•				
a List any managers of the foundation where year (but only if they have contributed in the contributed in	io have contributed more	than 2% of the total cont	ributions received by thi	e foundation before the clo	se of any tax
	nore man wo,000). (Occ s	(d)(2).)			
NONE	an own 100/ or more of th	on atack of a community	/		
 b List any managers of the foundation who other entity) of which the foundation ha 	is a 10% or greater intere	st.	or an equally large port	ion of the ownership of a p	artnersnip or
NONE					·
2 Information Regarding Contribut Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.				complete items 2a, b, c, and	1 d.
a The name, address, and telephone num	iber of the person to who	m applications should be	addressed;		
b The form in which applications should be	be submitted and informa	tion and materials they sl	nould include;	•••	
c Any submission deadlines:		·			
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields.	kinds of institutions, or	other factors:	
-	22 0				
623601/01-29-07					Form 990-PF (2006)

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	Purpose o	of grant or	Amount	
Name and address (home or business)	or substantial contributor	recipient	Contin			
a Paid during the year						
MACEDONIA BAPTIST CHURCH, 2712 SOUTH FREEWAY, FORT WORTH, TX 76104 Route 4 Columbus, Kangas 66723	NONE	501(C)(3)	GENERAL	FUND	1,500.	
FIRST BAPTIST CHURCH OF						
CROWLEY, 400 SOUTH EAGLE DRIVE, CROWLEY, TX 76036	NONE	501(C)(3)	GENERAL	FUND	50,000.	
Total				▶ 3a	51,500.	
b Approved for future payment NONE						
Tatal						
Total				▶ 3b	0.	

Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)
•	Business Amount s		(c) Exclu- sion code Amount		Related or exempt function income
1 Program service revenue:	code		code	7 11100111	
a					
b					
c				.,	····-
d					
e		<u></u>			
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			اما		
investments			14	94,629.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property			-		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	3,203,828.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					· · · · · · · · · · · · · · · · · · ·
e					
12 Subtotal. Add columns (b), (d), and (e)	L	0.		3,298,457.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	3,298,457.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Lie No.					
Explain below how each activity for which incon the foundation's exempt purposes (other than be			contric	outed importantly to the accom	ipiisnment of
the foundation's exempt purposes (other than c	y providing it	mas for such purposes).			
		·			
		· · · · ·			
					
		···		·····	
					
					
		· · · · · · · · · · · · · · · · · · ·			- 1811
		-			
		 -			
		· · · · · · · · · · · · · · · · · · ·			····
				· · · · · · · · · · · · · · · · · · ·	- 2
		· · · - · · ·	·	· · · · · · · · · · · · · · · · · · ·	
-		*-			
		· · · · · · · · · · · · · · · · · · ·			
		 			
623621 01-29-07					Form 990-PF (2006)

		LM 25:10 FOUNDATION		20-412			ge 13
Р	Part XVII Information Regar Exempt Organizati	_	sactions an	d Relationships With Noncha	ritable		
1	Did the organization directly or indirectly	engage in any of the following with any o	ther organization	described in section 501(c) of	7-7	Yes	No
	the Code (other than section 501(c)(3) or		-	ations?			
ŧ	a Transfers from the reporting foundation to	o a noncharitable exempt organization of	•		1		
	(1) Cash				1a(1)		<u>X</u>
	(2) Other assets b Other transactions:				1a(2)		<u>X</u> _
١	(1) Sales of assets to a noncharitable exi	empt organization			16(1)		Х
	(2) Purchases of assets from a nonchari	• =			1b(2)		X
	(3) Rental of facilities, equipment, or oth	· -			1b(3)		X
(4) Reimbursement arrangements							Х
	(5) Loans or loan guarantees				1b(5)		Х
	(6) Performance of services or members	•			1b(6)		X
	c Sharing of facilities, equipment, mailing li				1c	1	X
(d If the answer to any of the above is "Yes,"			- ·		ets,	
	column (d) the value of the goods, other		iaii iliaiket value	in any transaction or sharing arrangement, s	SHOW III		
(a)	1) Line no (b) Amount involved	(c) Name of noncharitable exempt org	anızatıon	(d) Description of transfers, transactions, and	sharing arra	ngeme	nts
		N/A					
					_		
			···				
			····				
_							
_		Askad with a substitute of the same of the					
2	2a Is the foundation directly or indirectly affi in section 501(c) of the Code (other than		-exempt organiza	itions described	Yes	TV	٦.,,
1	b If "Yes," complete the following schedule.			L	Yes	L] ИО
	(a) Name of organizat		forganization	(c) Description of relations	hip		
	N/A						
	Under penalties of person, I declare that I have ex	amined this return, including accompanying each	adulas and statemer	nts, and to the best of my knowledge and belief, it is	true garras		
	and complete Declaration of preparer (other than				true, correc	λ,	
	V Dand a Sharks	IV	11-11-10	PRESIDENT			
ere	Signature of officer or trustee	Dat		Title			
Sign Here	Preparer's	. 1	Da		er's SSN or	PTIN	
Š			v	Self- employed ▶ □			
	Firm's name (or yours RYLANDE	• •		EIN ►			
	if self-employed), 3200 R3	IVERFRONT DRIVE, SU	JITE 200				
	address, and ZIP code FORT WC	ORTH, TEXAS 76107		Phone no. 817 –	<u> 332-2</u>	<u>230</u>	<u>1</u>

Form **990-PF** (2006)

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors Supplementary Information for

OMB No 1545-0047

Name of organization

line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

Employer identification number THE PSALM 25:10 FOUNDATION 20-4128717

Organization type (check one):						
Filers of	:	Section:				
Form 990	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
orm 990	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes d a Special Rule-see instructions.)				
General	Rule-					
X	For organizations for contributor (Comp	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one lete 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)					
	some contributions \$1,000 (If this box charitable, etc., pu	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, is for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than is checked, enter here the total contributions that were received during the year for an exclusively religious, rpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received gious, 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) (2006)

Name of organization .

Employer identification number

THE PSALM 25:10 FOUNDATION

20-4128717

Part I	Contributors (See Specific Instructions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CELLULAR CITY, LTD. P.O. BOX 6450 FORT WORTH, TX 76115	3,274,250 \$_ 70,335 .	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution

Name of organization

Employer identification number

THE PSALM 25:10 FOUNDATION

20-4128717

Part II	Noncash Property (See Specific Instructions.)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	175,000 SHARES ALAMOSA HLDGS, INC. 175,000 Shares @ 18.71 p/share Recd AND Sold The NEXT DAY@18,71	3,274,250 \$ <u>-70,335.</u>	01-19-06
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 _ _ _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			90, 990-EZ, or 990-PF) (2006

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT
SOURCE				AMOUNT
CITIGROUP FIRST NATIONAL BANK OTHER INTEREST	87,500. 5,764. 1,365. 94,629.			
TOTAL TO FORM 990-PF, PART I				
FORM 990-PF	LEGAL	FEES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
LEGAL EXPENSES	1,000.	1,000),	0. 0
TO FM 990-PF, PG 1, LN 16A	1,000.	1,000).	0. 0
FORM 990-PF	CORPORAT	E STOCK		STATEMENT
DESCRIPTION		F	BOOK VALUE	FAIR MARKET VALUE
1663.2022 SH SMITH BARNEY WA	1,733,617.	1,857,348.		
TOTAL TO FORM 990-PF, PART I	1,857,348			
FORM 990-PF	CORPORAT	E BONDS		STATEMENT
DESCRIPTION		F	BOOK VALUE	FAIR MARKET VALUE
5000 SH FORD MOTOR COMPANY 6		168,712.	171,000	
TOTAL TO FORM 990-PF, PART I		168,712.	171,000	

THE PSALM 25:10 FO	JNDATION		•	20-4128717
FORM 990-PF	INTEREST	AND PENALTIES		STATEMENT 5
TAX DUE FROM FORM 9 LATE PAYMENT INTE	-			65,949. 16,641.
TOTAL AMOUNT DUE				82,590
FORM 990-PF		ANTIAL CONTRIBUTORS I-A, LINE 10		STATEMENT 6
NAME OF CONTRIBUTOR		ADDRESS		
CELLULAR CITY, LTD		P.O BOX 6450, FORT	WORTH, TX	76115
CELLULAR CITY, LTD		P.O BOX 6450, FORT	WORTH, TY	(76115