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Notice 2008-6 status change

Department of the Treasury Internal Revenue Service

SCANNED AUG 1 8 2010

(HTA)

## **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 requi

For	calenda	r year 2008, or tax year begi	nning	, ar	nd ending					
		that apply		nal return 🔲 An	nended return	[	Address change	☐ Name change		
Use the IRS Name of foundation FLOR			A Emplo			• •	ployer identification number			
Otherwise, Number and street (or PO t		BURGESS, F & R. T/U/A					84-6187127			
		· 1	number if mail is not delivered to street address) Room/suite			B Telephone number (see page 10 of the instructions)				
or type. WELLS FARGO BANK N.A P.O Box 534			56, MAC S4035-014		800-352-3705					
	e Specific	City or town, state, and ZIP code				C If exemption application is pending, check here				
Ins	structions	Phoenix		AZ 85072		D 1. Foreign organizations, check here ►				
H	Check type	pe of organization: X Sectio	n 501(c)(3) exe	mpt private foundation			Foreign organizations meeting the 85% lest, check here and attach computation			
<u>ليا</u>	Section 4	4947(a)(1) nonexempt chantal	ole trust	other taxable private				as terminated		
1 Fair market value of all assets at end   J Accounting r						under section 507(b)(1)(A), check here ►				
of year (from Part II, col. (c), Other (sp		ecify)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here						
	line 16)	50015001		d) must be on cash bas	IS.)	un	der section 507(b)(1)(b), c			
Part I Analysis of Revenue and Expenses (The total of			(a) Revenue and	(b) Net investm	en) (c) Adjusted ne	(c) Adjusted net	(d) Disbursements for chantable			
		ounts in columns (b), (c), and (d) may no		expenses per	income		income	purposes		
	the a	the amounts in column (a) (see page 11 of the instruction		books				(cash basis only)		
	1 Con	tributions, gifts, grants, etc., received (a	attach schedule)			٠.,				
1		ck 💌 if the foundation is not require				7	TARRELLE.			
		erest on savings and temporary ca		0		0				
		4 Dividends and interest from secunties		54,687	54	1,687	0° èco	10		
	5 a Gro	oss rents		and the second second	·	0				
بو		rental income or (loss)	0							
리		gain or (loss) from sale of assets		-33,430 Erroma Walasana		4 F T ( r l	Tree tree to the tree to the tree to	A CONTRACTOR OF THE STATE OF		
Revenue		ss sales price for all assets on line 6a			Francis (Francis	0				
æ	1	pital gain net income (from Part IV	, line 2)			0 				
		t short-term capital gain				2 1 24 L				
		ome modifications	· · · · · · ·							
		ss sales less returns and allowances	- 0			17 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	1	ss: Cost of goods sold .	<u> </u>			23. 21".h	et mei e tale le merce e presente e presente			
		oss profit or (loss) (attach schedule	=)	<u> </u>	re- an important areas for	0	0	1.		
		ner income (attach schedule) tal. Add lines 1 through 11 .		24.057		<u>_</u>				
	10 0			21,257		4,687		<u> </u>		
Expenses	13 Cor 14 Oth	mpensation of officers, directors, to ter employee salaries and wages		<del></del>						
SU.	15 001			<u> </u>			<del></del>			
ğ,	16 2 1 00	15 Pension plans, employee benefits 16 a Legal fees (attach schedule)		13	3 3		0	10		
		counting fees (attach schedule)		803		0				
Ş	6 OIF	ner professional fees (attach sched		0	<del></del>	0	0			
inistrati	17 Inte	erest		<u> </u>						
	18 Tax	es (attach schedule) (see page 14 of the	instructions)	310		310	0	0		
	19 De	preciation (attach schedule) and d		0		0	0	N = 1		
튝	20 Oc	cupancy								
¥	21 Tra	avel, conferences, and meetings								
pu	22 Pni	nting and publications .								
a	23 OII	ner expenses (attach schedule)		14,781	1	1,086	0	3,695		
Operating and Administrative	24 Tot	tal operating and administrative	expenses.	<b>\</b>	f					
	Add	d lines 13 through 23		15,907		<u> 1,399</u>	0			
	25 Co	ntributions, gifts, grants paid		81,852				81,852		
0	20 100	al expenses and disbursements. Add	lines 24 and 25	97,759	1	1,399		86,360		
		btract line 26 from line 12:	<del></del>		Part Tan	:- }. ^ .				
		cess of revenue over expenses and c		-76,502		0.000	\$ - · · ·			
		t investment income (if negative		3,5	4	3,288		<del> </del>		
	C Ad	Justed net income (if negative, e	nter -0-)				<u> </u>			
For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.								Form <b>990-PF</b> (2008)		

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Int A B

epartment of the Treasury ternal Revenue Service		► The organization may have to use a copy of this return to satisfy st	quirements Inspection			
For the 2007 calendar year, or tax year beginning $02/01$ , 2007, and ending $01/31$				2008		
Check if applicable Address change	Please use IRS label or	C Name of organization FLORENCE R. & RALPH L. BURGESS C/O WELLS FARGO BANK, N.A. 0101585100	D Employer identification number 84-6187127			
Name change	print or type See	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 53456, MAC S4035-014	Room/suite	E Telephone number (720) 947-6730		
Termination Amended	Specific Instruc- tions	City or town, state or country, and ZIP + 4 PHOENIX, AZ 85072		Accrual Other (specify)		
Application pending		4.1.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4	H and I are not applicable to section 527 organizations  H(a) Is this a group return for affiliates?  Yes X No.			

-	Name cha	I type /	oom/suite	(720)94		
_	Initial retu	Specific			7-6730 Cash	
$\vdash$	Termination Amended	instruction only of town, did to or obtainly, and and				Accrual
$\vdash$	return Application	PROENTA, AZ 05072			pecify)	
L	pending			licable to section		X No
		1,44		return for affiliate		
	Vebsite			number of affiliati	Yes	∏ No
			Are all affiliate ( (If "No," attach	n a list. See instruc		
	heck he	- Inta		return filed by an	na? Yes	X No
	-	re normally not more than \$25,000 A return is not required, but if the organization chooses		vered by a group rulii	ng/    Yes	X NO
t	o file a re	urn, be sure to file a complete return	1	X If the organi		
		005 045		B (Form 990, 99		
Par		upts: Add lines 6b, 8b, 9b, and 10b to line 12 235, 917. ] evenue, Expenses, and Changes in Net Assets or Fund Balances (See the instru		B (FORM 930, 33	J-LZ, 01 330-1 1	<del>'</del>
rai	1		ctions./	T. I		
	l l	Contributions, gifts, grants, and similar amounts received  Contributions to donor advised funds				
				-		
	b	Direct public support (not included on line 1a)		<b>┤</b>		
	c	Indirect public support (not included on line 1a)		-		
	d	(g		1e		
	2 e	Total (add lines 1a through 1d) (cash \$	<i>'</i>	2		
	3	Program service revenue including government fees and contracts (from Part VII, line 93)		3	,	
	4	Membership dues and assessments		1 - 1		
	5	Interest on savings and temporary cash investments		5	5.8	537.
	i i	1 <b>1</b>				<u> </u>
	1 -			-		
	b	Less. rental expenses		ا م		
ø				6c 7		
Revenue	7	Other investment income (describe  Gross amount from sales of assets other  (A) Securities  (B) Other		<del>  '                                     </del>		
ě	0 4	455 200	31	┥ ┃		
·		405 404		-		
		Less cost or other basis and sales expenses		┥		
	C	Net gain or (loss). Combine line 8c, columns (A) and (B)		8d	30	899.
	9 "	Special events and activities (attach schedule). If any amount is from gaming, check here	1	Bu		099.
	İ	Gross revenue (not including \$ of				
	, a	contributions reported on line 1b)		1		
		Less. direct expenses other than fundraising expenses		-		
		Net income or (loss) from special events. Subtract line 9b from line 9a · · · · · · · · ·		9c		
	i i	Gross sales of inventory, less returns and allowances		30		
	Ь	Less cost of goods sold		1		
		Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 1	 ∩a	10c		
	11	Other revenue (from Part VII, line 103)		11		
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d <sub>rt</sub> 8c, 10c, and 11			98	436.
	13	Program services (from line 44, column (B))		13		730.
S	14	Program services (from line 44, column (B))  Management and general (from line 44, column (C))  Fundraising (from line 44, column (D))	14		158.	
s Expenses	15	Fundraising (from line 44, column (D))	15		<u> </u>	
	16	Payments to affiliates (attach schedule)	16	<del>-</del>		
	17	Total expenses . Add lines 16 and 44, column (A)			100	888.
	18	Excess or (deficit) for the year. Subtract line 17 from line 12				452.
Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))			1,133,	
i As	20	Other changes in net assets or fund balances (attach explanation)			465.	
Š	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20		1,115,		
	<u> </u>				_,,	•

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Form 990 (2007)