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Amendul

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Form - 590

Department of the Treasury

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)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2008 Open to Public

	.,	The organization that have to use a copy of and federal to satisfy state	spoining roden		mapachon
<u>A</u>		lendar year, or tax year beginning , and ending			
В	Check if applicable	Please C Name of organization use IRS TECACY CLOBAT FOLDAR TON THE		D Emplo	yer identification number
닏	Address change	label or LEGACI GLOBAL FOUNDATION, II	NC.		1 1 1 0 6 0 0
Ш	Name change	print or Dolng Business As			1440662
	Initial return	type. Number and street (or PO box if mail is not delivered to street address) See 1423 S. HIGLEY RD. #127	Room/suite		ione number -505-6248
	Termination	Specific			C 100 0==
一	Amended return	Instructions. City of town, state or country, and ZIP + 4 tions. MESA AZ 85206	ŀ	G Gross rece	ms 0,432,337
\vdash		F Name and address of principal officer		LI/o) to this	a assum when for
Ш	Application pending	RICHARD E. DURFEE, JR.			a group return for
		1423 S. HIGLEY ROAD, SUITE 127		affiliate H(b) Are all	affiliates
		MESA AZ 85206		Include	id? Yes No attach a list. (see instructions)
	Tax-exempt statu			ii NO,	attach a usc (see instructions)
<u>;</u>		EGACYGLOBAL . ORG		H(c) Govern	exemption number
ĸ	Type of organization		Year of formation, 20	-	M State of legal domicile: AZ
		immary	rea or ennauen.	, , ,	MI Class of logal conficie, 222
	Υ····	scribe the organization's mission or most significant activities			
•	-	MISSION OF LEGACY GLOBAL FOUNDATION, INC. IS TO BL	ESS THE WH	OLE WO	RLD
Š	BY D	ELIVERING THE PROMISE THAT INSPIRES CHARITABLE GIV	ÎNG.		
/ 14 Activities & Governance		In the second se	10		
Š	2 Check th	is box if the organization discontinued its operations or disposed of more than of voting members of the governing body (Part VI, line 1a)	25% of its asset		
<u>ن</u>	3 Number	of voting members of the governing body (Part VI, line 1a)		3	3
88	4 Number	of independent voting members of the governing body (Part VI_line 1b)	<u></u>	4	2
^¥ ¥	5 Total nur	nber of employees (Part V, line 2a)	T	5	3
=₹	6 Total nur	nber of volunteers (estimate if necessary)	No.	6	6
	7a Total gro	ss unrelated business revenue from Part VIII, line 12, column (C)		7a	
20	1	ated business taxable income from Form 990-T, line 34		7b	0
<u>-</u>		STATUTE LINIT	Prior Yea		Current Year
Revenue	1	ions and grants (Part VIII, line 1h)	6,142	,941	3,064,465
≍ ह	i .	conice revenue (Part VIII line 2a)	····		
∌્	10 Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)		,991	100,561
L.	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 114 PR BRANCH		,102	
	12 Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), (DESIZEN	6,322		3,165,026
L'.]	nd similar amounts paid (Part IX, column (A), lines 1-3)	310	,690	1,719,676
کِ ا		paid to or for members (Part IX, column (A), line 4)			
Sxpenses		other compensation, employee benefits (Part IX, column (A), lines 5–10)	188	,234	276,923
90.9		nal fundraising fees (Part IX, column (A), line 11e)			
,X	1	draising expenses (Part IX, column (D), line 25)			<u>. `` </u>
ر س		penses (Part IX, column (A), lines 11a-11d, 11f-24f)		,890	150,666
•	1	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		,814	2,147,265
- 5	19 Revenue	less expenses Subtract line 18 from line 12	5,633 Beginning of		1,017,761
Net Assets or Fund Balances	20 Total see	ets (Part X, line 16)	10,485		End of Year 9,116,555
Ass	21 Total liab	ilities (Part X, line 26)	2,349		2,458,124
E S	22 Net asse	is or fund balances. Subtract line 21 from line 20	8,136		6,658,431
P		gnature Block	0/250	73.4	0,030,431
		er penalties of penury-declare that I have examined this return, including accompanying schedules	and statements of	nd to the hor	t of my knowledge
	and	belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all info	ormation of which p	reparer has	any knowledge.
Sig	ın 🖡			4	4.29.2014
Hei		Signature of officer		Date	
		Kithard E. Durfee Jv., President	-	44.0	
		Type or print name and title			
	Pre	parer's Date	Check it	,	Preparer's identifying number
Pai		ature frum Parking CPA 1015		. \square	(see instructions) P01304892
	parer's	BOEDICER HORY PLC	- ampoye	T	► 27-3630023
Use		o's name (or yours 3060 N SWAN RD		EIN	<u> </u>
		ress, and ZIP + 4 TUCSON, AZ 85712-1225		Phone	520-323-3060
Mav	the IRS discus	s this return with the preparer shown above? (see instructions)		no P	
		Act and Paperwork Reduction Act Notice, see the separate instructions.		•••	Form 990 (2008)
					· (*****)

Part # Statement of Program Service Accomplishments (see instructions)	e 2
Briefly describe the organization's mission:	
THE MISSION OF LEGACY GLOBAL FOUNDATION, INC. IS TO BLESS THE WHOLE WORLD BY DELIVERING THE PROMISE THAT INSPIRES CHARITABLE GIVING.	
	•
	_
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X N	
If "Yes," describe these new services on Schedule O.	0
Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	
If "Yes," describe these changes on Schedule O.	•
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
allocations to others, the total expenses, and revenue, if any, for each program service reported.	
	_
a (Code.) (Expenses \$ 1,835,429 including grants of \$ 1,719,676) (Revenue \$)
LEGACY AWARDS FUNDING IN GRANTS AND DISTRIBUTIONS TO	
NONPROFIT ORGANIZATIONS, GOVERNMENT AGENCIES, EDUCATIONAL	
INSTITUTIONS, RELIGIOUS ORGANIZATIONS, FOREIGN NONPROFIT	٠.
ORGANIZATIONS AND QUALIFIED INDIVIDUALS. GRANTS AND	
DISTRIBUTIONS COVER A WIDE RANGE OF FOCUS AREAS INCLUDING	
ARTS, RELIGION, EDUCATION AND SCHOLARSHIPS, SOCIAL WELFARE, SCIENTIFIC RESEARCH, CULTURE AND HUMANITIES,	
HEALTH AND HUMAN SERVICES, ENVIRONMENT AND SPECIES	٠.
PROTECTION, COMMUNITY DEVELOPMENT, ANIMAL WELFARE, JUSTICE	•
AND PUBLIC SAFETY, COUNSELING, ADDICTION RECOVERY,	•
GEOLOGICAL RESEARCH, TECHNOLOGY DEVELOPMENT, MEDICAL	٠
	٠
b (Code:) (Expenses \$ Including grants of \$) (Revenue \$	_
· · · · · · · · · · · · · · · · · · ·	
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c (Code:) (Expenses \$ including grants of \$) (Revenue \$	
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c (Code:) (Expenses \$ including grants of \$) (Revenue \$	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
d Other program services (Describe in Schedule O.)	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

Form 990 (2008) LEGACY GLOBAL FOUNDATION, INC. 37-1440662 Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete X Schedule C, Part II Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C. Part III 5 ĸ Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, complete Schedule D. Part III X Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257 If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable X 11 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII X 12 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E X 13 13 14a Did the organization maintain an office, employees, or agents outside of the U.S.? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any X organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 18 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 21 X Did the organization report more than \$5,000 on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete X Schedule J 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K If "No," go to question 25. X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I X 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

			Yes	N.
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.	1.		
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or		,	
	employee), or an indirect business relationship through ownership of more than 35% in another entity		1	ľ.
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,	: ?	``	
	Part IV	28a		7
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b	X	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			П
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		3
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			Г
	Part I	31		2
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		2
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		2
4	Was the organization related to any tex-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			Г
	III, IV, and V, line 1	34	х	
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35	х	
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		K
7	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		l x
_		Form	990	(20

P	Statements Regarding Other IRS Filings and Tax Compliance		, .	
			Yes	No
1a				
_	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 10			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		. ·	† ``
20	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	X	
Za			•	1
ь		ا م	X	•
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	2b	^	-
	instructions)	· 1		
32	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		, :	ľ
-	this return?			x
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b	 	<u> </u>
4a		30		
_	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
ь	If "Yes," enter the name of the foreign country: ▶			-
_	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	. ` -	x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than		•	
	\$75?	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 1			
8	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	· `	1	<u> </u>
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
^	required?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section		, ;	
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	·~ '	```	
9	organization, have excess business holdings at any time during the year?	8		, X
a	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	,	` `	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		X
0	Section 601(c)(7) organizations. Enter.	9b		X
a		\$33		.:
b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	()		
1	Section 501(c)(12) organizations. Enter.	1 1	٠,	
a	Gross income from members or shareholders	.		1
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1 1		İ
	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128		1
b	ff "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		, , , , , , , , , , , , , , , , , , ,	منتنم
				

must describe in Schedule O the process, if any, the organization uses to review the Form 990 11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's malling address? If "Yes," provide the names and addresses in Schedule O 12 Section B. Policies 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b Are officers, directors or trustees, and key employees required to disclose annually interests that could give use to conflict? 12b Coes the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 Does the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: a The organization's CEO, Executive Director, or top management official? b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16c List the states with which a copy of this Form 990 is required to be filed PAZ	_	m 990 (2008) INCACT GLOBAL FOUNDATION, INC. 3/-144062	. (: - : - :		Page 6
Section A. Governing Body and Management For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the direct contents, processes, or Annages in Schedule O. See instructions. 1a. Enter the number of voting members of the governing body below in the property of the company of the original state of the governing body and principle of the company of the original state of the governing body and principle of the company of the original state of the company of the original state of original state of or states or the governing body and the company of the original state of the company of the company of the original state of the company of the original state of the company of	Ρ.		olicies	s not	
For each "Yes" response to lines 2-75 below, and for a "No" response to lines 8 of 8b below, describe the communications, processes, or changes in Schedulo O. See instructions. 18 Entire the number of voting members of the governing body 19 Entire the number of voting members of the governing body 20 Did any officer, director, trustee, or key employeer? 30 Did any officer, director, trustee, or key employeer? 31 Did the organization delegate control over management duties automanly performed by or under the effect 32 supervision of officers, directors or trustees, or key employeers or a management company or other pressor? 32 X 33 Did the organization delegate control over management duties automanly performed by or under the effect 34 Section 18 Did the organization have members or stockholders? 35 Did the organization have members or stockholders? 36 Did the organization have members or stockholders? 37 Did the governing body? 38 Did the organization have members or stockholders? 39 Did the organization have members, stockholders? 40 Did the governing body? 41 Did the governing body subject to approval by members, attacholders or other persons? 42 Did the organization have members, stockholders? 43 Did the organization have members, stockholders? 44 Did the organization have members, stockholders? 45 Did the organization have members, stockholders? 46 Did the organization have members, stockholders? 47 Did the organization have been stockholders? 48 Did the organization have been stockholders? 49 Did the organization have been stockholders? 40 Did the organization have been stockholders? 40 Did the organization have been stockholders? 41 Did the organization have been stockholders? 42 Did the organization stockholders and procedures governing the activities of such chapters, affaiters, and branches to ensure their operations are consistent with those of the organization in the stockholders. 45 Did the organization have a written process of stockholders. 46 Did the organization st	<u></u>				
For each "Yes" response to lines 2—79 betw, and for a "Not response to lines 8 or 8b below, describe the circumstances, processes, or Annages in Schedule O. See instructions. 18 Enter the number of vioring members of the governing body between the commendation of the process of the commendation of officers, direction or studies, or key employees 1 and a business instancishor with any other officers, direction or studies, or key employees 1 and a business instancishor with any other officers, direction or studies, or key employees 1 and amaginement commendation of officers, direction or studies, or key employees 1 and amaginement commendation of the organization have members or stuckholders, or other persons who may elect one or more members of the governing body? 5 but the cognization have members a stockholders, or other persons who may elect one or more members of the governing body? 5 but the cognization have members as tockholders, or other persons who may elect one or more members of the governing body? 5 but the cognization have members as tockholders, or other persons who may elect one or more members of the governing body? 6 but the cognization have been been personally the persons who may elect one or more members of the governing body? 7 but the commendation of the governing body with the personal	<u> </u>	tion A. Governing Body and Management			
a circumstances, processes, or changes in Schedule O. See metructions. Eater the number of voting members of the governing body be finer the number of voting members of the governing body can other officer, director, trustee, or key employee? 2		Franch Direct research to the Co. 7th below and from third research the Co. On the below the control to	F	Yes	No
1a Eater the number of voting members of the governing body Eiter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director to the complex of the organization delegate control over management duties customanly performed by or under the direct any other officer, director are trustees, or key employees to a management company or under the direct any other officer, director are trustees, or key employees to a management company or other person? 3 X 4 Did the organization have members or attachfolders? 5 Did the organization become aware during the year of a material diversion of the organization assests? 6 Does the organization have members or attachfolders? 7 Did the organization have members or attachfolders. 7 Did the organization contemporaneously document the meetings held or written actions or more members of the governing body? 7 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7 Did the organization have written policities and procedures governing the activities of such chapters, 10 Did the organization have written policities and procedures governing the activities of such chapters, 11 Section B, Policities 10 Dess the organization have written policities and procedures governing the activities of such chapters, 11 Section B, Policities 11 Did Vas a copy of the Form 990 provides to the organization with those of the organizations 12 Dess the organization have a written policities and procedures governing bedy before it was filled? All organizations 13 Dess the organization have a written policities and procedures governing bedy before it was filled? All organizations 14 Dess the organization of the organization of the organization of the organization of the organization or trustee, o		·			
b Enter the number of voting members that are independent. 2	4				
2 Did any officer, director, trustees, or key employees have a family relationship or a business relationship with any other officer, director, toutes, or key employees? 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or brustees, or key employees to a management company or other person? 4 Did the organization have expending the specific production of the company of their person? 5 Did the organization become sware during the year of a material diversion of the organization in 950 was filed? 6 Does the organization have members or stockholders, or other persons who may elect one or more members or of the operation by the person of the organization have members and the person of the organization of the organization have members and the person of the organization of the organization have members and the person of the organization of the organization of the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 5 Did the organization have members as to the person of the organization of the portion of			-		
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Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: The organization's CEO, Executive Director, or top management official? b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) Iba It the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure Its the states with which a copy of this Form 990 is required to be filed ▶ AZ Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. □ Own website □ Another's website ▼ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ RICHARD E. DURFEE JR. 1423 S HIGLEY RD., SUITE 127	14	Does the organization have a written document retention and destruction policy?	14	х	
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Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Dupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: RICHARD E. DURFEE JR. 1423 S HIGLEY RD., SUITE 127		Describe the process in Schedule O. (see instructions)		.,.	
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available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: RICHARD E. DURFEE JR. 1423 S HIGLEY RD., SUITE 127	18		• •		•
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State the name, physical address, and telephone number of the person who possesses the books and records of the organization: PRICHARD E. DURFEE JR. 1423 S HIGLEY RD., SUITE 127	-				
organization: ► RICHARD E. DURFEE JR. 1423 S HIGLEY RD., SUITE 127	20	·			
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
 List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons

· · ·		ensat	e an			direc	tor,	trustee, or key employee				
(A) Name and Title	(B) Average	Pos	ıbon (() checi	C) kalli	that ap	(עומי	(D) Reportable	(E) Reportable	(F) Estimated		
	hours per week	or director	·	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
RICHARD E. D						11				<u> </u>		
PRESIDENT	40	X		X				122,400	0	13,038		
PAUL PETERSO		1	ŀ									
DIRECTOR	44	X	<u> </u>			\sqcup		2,400	0	<u> </u>		
THOMAS BROWN DIRECTOR	1	$ \mathbf{x} $						2 400		_		
BRENDA PROSS		┿	-		├	\vdash		2,400	0	0		
TREASURER	4			x				3,600	o	C		
JANEL DURFER		+		-		\vdash		3,000				
VICE-PRES	2			x				0	o	C		
					-		•					
										 		
						•						

	ACY GLOBAL FO							. 37-144		Page				
(A)	(B)			(C)			(D)	(E)	(F)				
Name and title	Average hours per week	or director		_	Key employee	Highest compensated a employee		Reportable compensation from the organization (W-2/1089-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations				
									,					
•														
1b Total							<u> </u>	130,800		13,038				
2 Total number of indi- organization ▶ 1	viduals (including those in	1a) v	who	rece	ived	more	e tha	an \$100,000 in reportable o	compensation from the					
employee on line 1a 4 For any individual list the organization and individual	? If "Yes," complete Sched ted on line 1a, is the sum of related organizations great don line 1a receive or acci	of reater t	J for porta than comp	suci able \$150 ens	com 0,000	lividu pens D? If 	al ation Yes	n and other compensation s,* complete Schedule J for y unrelated organization fo such person	from r such	yes No 3 X 4 X 5 X				
Section B. Independent			!					- A Ab - A 1						
Complete this table compensation from the complete this table to compensation from the compensation f	the organization.	ensa	tea i	naer	ena	ent c	ontr	actors that received more						
	(A) Name and business address	-		-				Descrip	(B) tion of services	(C) Compensation				
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DAA										Form 990 (2005				

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<u>. P.</u>	art \	in State	ment of Re	venue	• (Tot	(A) al revenue	(B) Related exemp function	t 1	(C) Unrelate busines revenue	\$	(D) Revenue excluded from tex under sections
23 4	1,5	Federated ca	moalons	1a			1	· · · · · · · · · · · · · · · · · · ·	revenue	•	 -,		512, 513, or 514
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9		Fundraising e		1c			1						. 1
#		Related organ	•	1d					l			;	
8 E		Government grants		10			ļ			^]		,
5.5		All other contribute		-	-		 	· 2.		, `			·
bit			ns, gilis, grans, s not included above	15	3 0	64,465			} .			``	'
		Noncash contribute				704,403					` '	: `	` .*`
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Program Service Revenue Contributions, gifts, grants	- '	TOMI. Add III	es 1a-11 .			O. d.	***************************************	,004,463	() ()	·····			
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	۔ ا	other similar a		· ·				281,374			-		281,374
	1		nvestment of ta	ax-exen	ipt bong p	roceeds >							
	5	Royalties		<u> </u>	·· ···	<u></u>						,	
	_		(i) Real		(11) 1	Personal							` ′
	6a	Gross Rents								:		()	
	þ	Less: rental exps.			<u> </u>			•					
	С				<u> </u>		į	•	· ·		` `	`	
	d 7a	Net rental inco Gross amount from		•	,	<u></u>							
		sales of assets	(i) Securit		+	Other	()		· · · · /		, ^ · · .	. `]	
		other than inventory	3,145	5,89 <u>5</u>	ļ	1,223		"		× 1		,	
	b	Less: cost or other	_				·	(;		3	* - *-		•
		basis & sales expe	3,327		ļ <u>.</u>		<u>}</u>		() () ()	```;.		, 14	
	C	Gain or (loss)	-182	2,036	<u> </u>	1,223		· · · · · ·	! ``, '`		1	~	
	đ					<u> </u>		-180,813					-180,813
	8a	Gross income fro	om fundraising ev	vents			.		為為			~]	`.
97		(not including \$							120 T	` '	1. 1.		
V		of contributions	reported on line 1	c).				` // `		\$ 7.	, , , , , , ,	ė	
Other Revenue		See Part IV, line	18	, a				,		,		· }	
ě		Less: direct ex		. b			w. /			· .			
8	C	Net income or	(loss) from fur	ndraisin	events	<u> </u>							
	9a	Gross income fro		ies.			., :,.	` .	(, () , ()	.,,,	Ĺ		
Ì		See Part IV, line	19	a			, `	(3 ¹)	\$10.7Q			· · · · · · · · · · · · · · · · · · ·	
	b	Less: direct ex	penses	b								1	;; , ;; ,
	¢	Net income or	(loss) from ga	ming ac	tivities .	▶							<u></u>
İ	10a	Gross sales of	finventory, less	3			,,,	· '^	7.1				,
		returns and all	owances	a				•	'	: `		1	
	b	Less. cost of g	oods sold	ь				, 4,50				1	· 28 (62)
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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must o not include amounts reported on lines 6b, o, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			. `	. 1 : .
	organizations in the U.S. See Part IV, line 21	1,624,350	1,624,350	7 × 7 × 7	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	30,913	30,913	35, 35, 32	
3					
•	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16	64,413	64,413		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		****		<u> </u>
	trustees, and key employees	143,838	50,000	73,838	20,000
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	102,417	50,000	52,417	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	14,349		14,349	
10	Payroll taxes	16,319		16,319	
11	Fees for services (non-employees):				
a	•			· · · · · · · · · · · · · · · · · · ·	
b	•	0.744			
¢		3,744		3,744	
d			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<u> </u>	
9		53,383	·····		
f	Investment management fees	731		53,383	
9		2,221	1,971	731	250
12 13	Advertising and promotion	20,990	11,594	9,396	250
14	Office expenses Information technology	20,330	11,034	9,390	
15	Royalties				
16	Occupancy	38,270		38,270	
17	Travel	5,835	1,123	624	4,088
18	Payments of travel or entertainment expenses				1,000
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	199		199	
20	Interest			· · · · · · · · · · · · · · · · · · ·	
21	Payments to affiliates		- "		
22	Depreciation, depletion, and amortization	6,618		6,618	
23	Insurance	13,320		13,320	(
		(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
24	Other expenses. Itemize expenses not				• • • • •
	covered above. (Expenses grouped together	, " *			, ,
	and labeled miscellaneous may not exceed				,
	5% of total expenses shown on line 25 below.)				
а	MISCELLANEOUS EXPENSE	2,527		2,527	
b	BANK CHARGES	1,143		1,143	
C	FEES & LICENSES	1,065	1,065		
d	PROPERTY TAX	380		380	·
9	CREDIT CARD FEES	240		240	<u> </u>
f	• • • • • • • • • • • • • • • • • • • •	0 145 055	4 005 455		
25	Total functional expenses. Add lines 1 through 24f	2,147,265	1,835,429	287,498	24,338
26	Joint Costs. Check here if following SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and			•	
	fundraising solicitation	<u> </u>			Form 990 (2009)

P	art)	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			71,508	1	42
	2	Savings and temporary cash investments	•	· · · · · · · · · · · · · · · · · · ·	541,920	2	420,197
	3	Pledges and grants receivable, net	••	·· ··· · · · · · · · · · · · · · · · ·		3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, t	rustee	s. kev			
	-	employees, or other related parties. Complete Part II of S		•		5	
	6	Receivables from other disqualified persons (as defined					
	-	4958(f)(1)) and persons described in section 4958(c)(3)(I		h	.,	l	
		Part II of Schedule L	-,		•	6	1'''
80	7	Notes and loans receivable, net	• •			7	
Asseta	В	Inventories for sale or use	• • • •			8	
155	9	Prepaid expenses and deferred charges	٠			9	
•	10a	Land, buildings, and equipment: cost basis	10a	356,712		3	() () () 4 **
		Less: accumulated depreciation. Complete	iva	330,112	,	<i>`</i> ``.	
	ם ו	D-AM of D-badula D	10ь	12,999	530,466	40-	242 712
		*** * *** * ** * * * * * * * * * * * * *			6,012,575		
	11	Investments—publicly traded securities				4,846,887	
	12	Investments—other securities. See Part IV, line 11		· · · · · · · · · · · · · · · · · · ·	290,000	_	185,294
	13	Investments—program-related See Part IV, line 11	13				
	14	Intangible assets	2 222 422	14	2 202 400		
	15	Other assets. See Part IV, line 11			3,039,482		3,320,422
	16	Total assets. Add lines 1 through 15 (must equal line 34	<u> </u>		10,485,951		9,116,555
	17	Accounts payable and accrued expenses	-	. -	 	17	
	18	Grants payable				18	
Liabilities	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow account liability. Complete Part IV of Schedule D	٠		······································	21	
	22	Payables to current and former officers, directors, trustee	es, key	· [
		employees, highest compensated employees, and disqui	alified		: .	, "	
ニ		persons. Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third		23			
	24	Unsecured notes and loans payable		24			
	25	Other liabilities. Complete Part X of Schedule D			2,349,580	25	2,458,124
	26	Total liabilities. Add lines 17 through 25			2,349,580	26	2,458,124
88		Organizations that follow SFAS 117, check here	and				, , , , , , , , , , , , , , , , , , , ,
alances		complete lines 27 through 29, and lines 33 and 34.	-				
ia	27	Unrestricted net assets			8,136,371	27	6,658,431
8	28	Temporanly restricted net assets	, ,	` `		28	
b	29	Permanently restricted net assets	•	· · · · · · · · · · · · · · · · · · ·		29	
٦		Organizations that do not follow SFAS 117, check here	e ▶	1 / ` [٠.	: 33	35 5 5 5 5
Net Assets or Fund		and complete lines 30 through 34.	-	-		1	
8	30	Capital stock or trust principal, or current funds			*	30	
힐	31	Paid-in or capital surplus, or land, building, or equipment	fund			31	· · · · · · · · · · · · · · · · · · ·
88	32	Retained earnings, endowment, accumulated income, or		funds		32	
it p	33	Total net assets or fund balances			8,136,371		6,658,431
Ž	34	Total liabilities and net assets/fund balances	• • •	• • • • • •	10,485,951		9,116,555
	Ht X		<u>·</u>	<u></u>	10,400,331	34	3,110,333
	##X# ZX	i maneiai otatements and reporting					Tu. Tu.
	Λ	counting mathed used to armom the Earn 000 😾 Co	aah	П латан П оч	L		Yes No
1		counting method used to prepare the Form 990. X Co			her		
2a		re the organization's financial statements compiled or rev	•		., ,		. 2a X
b		re the organization's financial statements audited by an in				2b X	
C		fes" to lines 2a or 2b, does the organization have a comm		•			
_		audit, review, or compilation of its financial statements a		•	•		2c
3a		a result of a federal award, was the organization required	to und	ergo an audit or audits as s	set forth in		
		Single Audit Act and OMB Circular A-133?					3a X
b	If =`	fes," did the organization undergo the required audit or au	udits?	<u></u>	 		. 3b

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

nonexempt charitable trusts.

Dies to Public

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Department of the Treasury Internal Revenue Service Name of the organization

TEGACY GLOBAL FOINDATTON THE

Employer Identification number 37-1440662

OMB No 1545-0047

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				_											ic ii	13	part.	(SCC I	i i Sti u C	uons	<i>L</i>		
	orga	nization is not	•				-			_		•											
1	Н	A church, co										in 5 80	nou	170(0)	(A)(F)	1).							
2	Н	A school des									-					.							
3	Н	A hospital or																					
4	Ш	A medical re	_	janization	operate	d in (conjun	ection v	with a	B hos	pital	descn	bed	in secti	on 17	0(b))(1)(A)(i	ii). Ente	er the ho	ospital	s name	•	
		city, and stat																					
5	Ш	An organizat	-				college	e or un	ivers	sity or	wned	or op	erate	ed by a	gover	nme	ental uni	t descri	bed in				
	_	section 170	(b)(1)(A)(iv). (Comple	ete Part	II.)																	
6	Ш	A federal, sta	ate, or loca	ıl governm	ent or g	over	mment	tal unit	t des	cribe	d in s	ectio	n 17	0(b)(1)(A)(v).								
7	X	An organizat	ion that no	mally rec	eives a	subs	stantia	i part c	of its	supp	ort fro	om a g	Bove	mment	al unit	or f	rom the	genera	al public	;			
		described in	section 17	70(Ь)(1)(А)	(vi). (C	ompl	iete Pa	art II.)															
8	Ш	A community	trust desc	a ni bedin:	ection 1	170(E	b)(1)(A	l)(vi). ((Com	plete	Part	ii)											
9	An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross																						
		receipts from	activities	related to	ıts exen	npt fu	unction	ns—su	ıbjeci	t to c	ertain	exce	ptior	ns, and	(2) no	mo	re than	33 1/3	% of its				
		support from	gross inve	stment ind	come ar	nd ur	nrelate	ad busi	iness	taxe	ıble ın	come	(les	is sectio	n 511	tax) from t	ousines	ses				
	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)																						
10	Ш	An organizat	ion organiz	ed and op	erated	exclu	usively	/ to tes	st for	publi	c safe	ety Se	se s	ection 5	509(a)	(4).	(see in:	structio	ns)				
11		An organizati	on organiz	ed and op	erated (exclu	ısıvely	for the	e ber	nefit (of, to	perfor	m th	e functi	ons o	f, or	to carr	y out the	e				
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section																						
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h																						
	a Type I b Type II c Type III-Functionally Integrated d Type III-Other																						
е	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified																						
	persons other than foundation managers and other than one or more publicly supported organizations described in section																						
	509(a)(1) or section 509(a)(2).																						
f		If the organiz	ation recei	wed a writt	ten dete	min	ation f	from th	he IR	S tha	at it is	а Тур	oe I,	Type II,	or Ty	pe l	il supp	orting					
		organization,	check this	box																			
g		Since Augus	t 17, 2006,	, has the o	rganiza	tion	accept	ted an	y gift	or c	ontrib	ution 1	from	any of	the	•	*****	., .	. ,	•			
		following per	sons?																				
		(i) A persor	n who direc	ctly or indir	rectly co	ontro	ls, eitr	ner alo	ne or	r toge	ether :	with p	erso	ns desc	nbed	ın (i	i)					Yes	No
		and (III)	below, the	governing	body o	f the	suppo	orted o	organ	izatio	n?										11g(i)		-
		(II) A family	member o	of a person	describ	bed i	in (i) al	bove?				••	,			• •	• • •	• • • •	•		11g(ii)		
		(iii) A 35% c	ontrolled e	entity of a p	person o	desc	ribed i	in (i) or	r (ii) e	above	e?	• •		••••		•	•			• • • •	11g(III)		
h		Provide the	following in	nformation	about t	he o	rganiz	ations	the c	omar	nzatic	n sup	port	S .		•	• • • •			• • • • •		<u> </u>	
(i)	Name	of supported	l	(ii) EIN		Ι		ype of c				,	<u> </u>	rgenization	6/1	nid v	ou notify	6db	s the		(vil) Ame	ount of	
٧٠,		anization	İ	(,				cribed o				1 ' '		ted in your		-	dzation in	organizat			anbb		
			İ					ve or IR				gove	ming c	locument?	α		of your	1	zed in the				
			1				(se	e instri	ucuo	ns))		V-	_	Na		supp			S?				
						┢						Ye	28	No	Ye	8	No	Yes	No				
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	edule A (Form 990 or 990-EZ) 2008	ACY GLOBA	T FOUNDA	PION, INC		-1440662	Page 2					
P	art Support Schedule for O)(1)(A)(iv) and	170(b)(1)(A)(vi)					
	(Complete only if you che	ecked the box	on line 5, 7, o	r 8 of Part I.)								
	tion A. Public Support	·		,		, <u></u>						
Ca	lendar year (or fiscal year beginning In) 🕨 👚	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	874,108	1,643,951	701,725	6,142,941	3,064,465	12,427,190					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf											
3	The value of services or facilities furnished by a governmental unit to the organization without charge											
4	Total. Add lines 1-3	874,108	1,643,951	701,725	6,142,941	3,064,465	12,427,190					
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount											
	shown on line 11, column (f)		******	2 (2)		7.	6,238,124					
6	Public support. Subtract line 5 from line 4		/ /		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		6,189,066					
	tion B. Total Support	···		·								
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total					
7	Amounts from line 4 874,108 1,643,951 701,725 6,142,941 3,064,465											
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,002	19,174	108,448	169,143	281,375	582,142					
9	Net income from unrelated business activities, whether or not the business is regularly carned on											
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)											
11	Total support. Add lines 7 through 10					7.55	13,009,332					
12	Gross receipts from related activities, etc.	(see instructions)				12						
13	First five years. If the Form 990 is for the	organization's first,	second, third, for	irth, or fifth tax yea	ar as a section 501	(c)(3)						
	organization, check this box and stop her			<u> </u>	<u></u>		. ▶ 📗					
Sec	tion C. Computation of Public Su	ipport Percent	age									
14	Public support percentage for 2008 (line 6	, column (f) divided	by line 11, colum	n (f))		14	47.5740 %					
15	Public support percentage from 2007 Scho	•				15	53.2289 %					
16a	33 1/3 % support test—2008. If the organ	ization did not ched	k the box on line	13, and line 14 is :	33 1/3 % or more,	check this box						
	and stop here. The organization qualifies	as a publicly suppo	rted organization				▶ 🗵					
ь	33 1/3 % support test—2007. If the organ	ization did not ched	k a box on line 13	or 16a, and line 1	15 is 33 1/3 % or m	nore, check this						
	box and stop here. The organization quali	fies as a publicly st	pported organiza	tion			▶□					
17a	a 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or											
	more, and if the organization meets the "fa	acts-and-circumstar	nces" test, check t	this box and stop l	here. Explain in Pa	art IV how the						
	organization meets the "facts-and-circums						▶ 🗌					
b	10%-facts-and-circumstances test-200	7. If the organization	n did not check a	box on line 13, 16	a, 16b, or 17a, and	d line 15 is 10% or						
	more, and if the organization meets the "fa											
	organization meets the "facts-and-circums	tances" test. The o	rganization qualifi	es as a publicly su	ipported organizati	ion	▶ 🗆					
18	Private foundation. If the organization did	not check a box or	n line 13, 16a, 16i	o, 17a, or 17b, che	ck this box and se	e instructions	``` ▶□					

	edule A (Form 990 or 990-EZ) 2008					<u>-1440662</u>	Page 3
	act 順 Support Schedule for O				2)		
	(Complete only if you ch	ecked the box	on line 9 of P	art I)			
Sec	ction A. Public Support						
Ca	ilendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5						·
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)			<u> </u>			
	tion B. Total Support			<u> </u>			
	lendar year (or fiscal year beginning In) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		·				
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	, , ,	, , , , , , , , , , , , , , , , , , , ,	4.	1 12 m		
14	First five years. If the Form 990 is for the organization, check this box and stop here		, second, third, fo	urth, or fifth tax yea	ar as a section 50°	(c)(3)	. □
Sec	tion C. Computation of Public Su		tage	····		• •• • • • • • • • • • • • • • • • • • •	
15	Public support percentage for 2008 (line 8			nn (fl)		15	%
16	Public support percentage from 2007 Scho	• •	h 07-			16	
	tion D. Computation of Investme				·	1 10 1	
17	Investment income percentage for 2008 (I			Column (f))		17	~~~~
18	Investment income percentage from 2007			•		18	%
19a	33 1/3 % support tests—2008. If the orga			e 14 and line 15 is			%_
	17 is not more than 33 1/3 %, check this b						▶ □
b	33 1/3 % support tests—2007. If the orga						
-	line 18 is not more than 33 1/3 %, check to						▶ □
20	Private foundation. If the organization did						· · · [H
				,	out mondell		<u>-</u>

Schedule A (F	orm 990 or 990-EZ) 2008	LEGACY	GLOBAL	FOUNDA	TION,	INC.	37-1440662	Page 4
Part IV	Supplemental Info	ormation. Co	omplete this	s part to pro	ovide the	explanat	ion required by Part II, line 10; information. (see instructions)	<u> </u>
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public Inspection

1401116	of the organization		Linkloye	er roeman cation n	(d) (i De)
L	EGACY GLOBAL FOUNDATION, INC.		37-1	440662	
	Organizations Maintaining Donor Advised Fu	ands or Other Similar Funds or			if
•	the organization answered "Yes" to Form 990,				
		(a) Donor advised funds	(b)	Funds and other a	coounts
1	Total number at end of year	41			1
2	Aggregate contributions to (during year)	3,064,465			
3	Aggregate grants from (during year)	1,658,263			61,413
4	Aggregate value at end of year	5,370,145			8,185
5	Did the organization inform all donors and donor advisors in writing th	at the assets held in donor advised			
	funds are the organization's property, subject to the organization's exc	clusive legal control?		X Yes	☐ No
6	Did the organization inform all grantees, donors, and donor advisors ii		•		
	used only for charitable purposes and not for the benefit of the donor	or donor advisor or other			_
	impermissible private benefit?			X Yes	☐ No
Pa	Conservation Easements. Complete if the org	anization answered "Yes" to For	m 990, F	art IV, line	7.
1	Purpose(s) of conservation easements held by the organization (chec	k all that apply)			
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically im	portant lan	nd area	
	Protection of natural habitat	Preservation of certified historic s	structure		
	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conservation	contribution in the form of a conservation	easement	:	
	on the last day of the tax year				
			2.52	Held at the En	d of the Year
8	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2 b		
C	Number of conservation easements on a certified historic structure inc		2c		
d	Number of conservation easements included in (c) acquired after 8/17	7/06	2d		
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the organiza	tion during	j	
	the taxable year ▶				
4	Number of states where property subject to conservation easement is	located			
5	Does the organization have a written policy regarding the periodic model.	nitoring, inspection, violations, and			
	enforcement of the conservation easements it holds?			Yes	∐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforce	ing easements during the year $ riangle$ _ $$ $$			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	easements during the year ▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section			—
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			∐ Yes	∐ No
9	In Part XIV, describe how the organization reports conservation easer				
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that d	escribes		
	the organization's accounting for conservation easements.	111 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>		
 2	食田 Organizations Maintaining Collections of Art		Similar A	Assets.	
	Complete if the organization answered "Yes" to	o Form 990, Fart IV, line 6.		· · · · · · · · · · · · · · · · · · ·	
1a	If the organization elected, as permitted under SFAS 116, not to repoi				
	art, historical treasures, or other similar assets held for public exhibition		f public sei	rvice,	
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items.			
	Make a management of the second and the second and the second in	War and the state of the state			
b	If the organization elected, as permitted under SFAS 116, to report in			•	
	historical treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pul	DIIC SERVICE	∌ ,	
	provide the following amounts relating to these items.			•	
	(I) Revenues included in Form 990, Part VIII, line 1		•	5 — — —	
_	(ii) Assets included in Form 990, Part X		▶	\$	
	If the organization received or held works of art, historical treasures, of	• • • • • • • • • • • • • • • • • • • •	ovide the		
	following amounts required to be reported under SFAS 116 relating to	these items:			
			▶	*	
þ	Assets included in Form 990, Part X		▶	\$	

Past ## Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assate (continued) Juding the organization's accessable and other records, check any of the following that are a significant use of its collection terms (check all that apply) Past Public description of the organization's collections and explain how they further the organization's exempt purpose in Part XV	Sche		OBAL FOUNDATION			140662	Page 2
3 Using the organization's accession and other records, check any of the following that are a significant use of its collection flams (clock at lint at ptyl): Public exhibition	P	rt	Collections of Art, H	listorical Treas	sures, or Other	Similar Ass	sets (continued)
Public exhibition d	3	Using the organization's accession and other	records, check any of the f	ollowing that are a	significant use of its	collection	
Scholarly research Other	•	Public exhibition	d D Loan or	evchenne nmamn	ne		
Preservation for Nuture generations			[:-]	excitatige program	115		
4 Provide a description of the organization's collections and explain how they further the organization's exampt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar is assets to be soid to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XIV Inte 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodial arrangements. Complete if organization answered "Yes" to Form 990, Part XIV line 9, or reported an amount on Form 990, Part X, line 21. 1b If Yes, explain the arrangement in Part XIV and complete the following table. 1c Beginning balance 1d Additions during the year 1e Distributions during the year 1e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 217 2b If Yes, explain the arrangement in Part XIV. Part Y: Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 1b Contributions 1c Investment earnings or losses 1d Grants or scholarships 1d Orther expenditures for facilities and programs 1 f Administrative expenses 2 Provide the estimated percentage of the year end balance held as a Board designated or qual-standoment \(\bar{} = \bar{} \) Sa(0) 2 Provide the estimated percentage of the year end balance held as a Board designated or qual-standoment \(\bar{} = \bar{} \) Sa(0) 3 Are there endowment \(\bar{} = \bar{} \) Sa(0) 4 Describe in Part XIV the intended uses of the organization that are held and administered for the organization by: (1) unrelated organizations (2) Investment (1) (3) (3) (3) (3) (4) (4) (6) (6) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	_	[]			- -	:	_
So During the year, did the organization solict or receive donations of art, historical treasures, or other similar assesses to be sold to raise funds rather than to be meintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X/ III or to find the organization and the second of the organization of the organization of the following table. c Beginning balance d Additions during the year c Beginning balance d Beginning balance 1	L	•					
Administrative expenses Solar designate the five for panization in the organization's collection's office street endowment Yes No No Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7 Yes No No Management No Yes No No Management No Yes No No Management No Yes No No Management No No No No No No No N	4		lections and explain how th	ey further the orga	nization's exempt p	urpose in	
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X7 b If Yes, 'explain the arrangement in Part XIV and complete the following table. C Beginning balance d Additions during the year 1		assets to be sold to raise funds rather than to	be maintained as part of th	e organization's co	oilection?		
1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b if Yes, explain the arrangement in Part XIV and complete the following table. c Beginning balance d Additions during the year e Distributions during the year e Distributions during the year 1 Ending balance 12a Did the organization include an amount on Form 990, Part X, line 21? 1 Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. b Contributions 1 Beginning of year balance 2 Distributions 2 Contributions 3 Contributions 4 Contributions 5 Contributions 6 Cherry explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. c Investment earrings or losses d Grents or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment	Pa					red "Yes" to	Form 990,
included on Form 990, Part X/ b If Yes,* explain the arrangement in Part XIV and complete the following table. C							
b If "Yes," explain the arrangement in Part XIV and complete the following table. Amount	18	is the organization an agent, trustee, custodia	n or other intermediary for	contributions or oth	ner assets not		
b If Yes, explain the arrangement in Parl XIV and complete the following table. C Beginning balance 1d 1d 1d 1d 1d 1d 1d 1		included on Form 990, Part X?					Yes No
c Beginning balance d Additions during the year e Distributions during the year 1 te 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? bit Yes	ь						
d Additions during the year Distributions during the year 1td 1e 1e 1e 1e 1e 1e 1e 1							Amount
d Additions during the year 16 19 19 19 19 19 19 19	c	Beginning balance	- .			1c	
e Distributions during the year felding balance felding balanc	d					1d	
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?	е	Distributions during the year				19	7
2a Did the organization include an amount on Form 990, Part X, line 21? Yes, "explain the arrangement in Part XIV." Part Y Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior years (c) Two years back (d) Three years back (e) Four years back (e) Contributions (e) Current year (e) Current y	f				,	1f	
b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year	2a	Did the organization include an amount on For	rm 990, Part X, line 21?		• • • •		Yes No
Beginning of year balance			••			•••	00
Beginning of year balance	Pa	Endowment Funds. Comple	ete if organization an	swered "Yes" t	o Form 990. Pa	art IV. line 1	0.
1a Beginning of year balance b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶							
b Contributions c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment	1a	Beginning of year balance		/	(* 2/2)	1.58	3 7 38 7 5 7 7 8 1
c Investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% c Term endowment India not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) inelated organizations (iii) nelated organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part I Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (investment) basis (b) Coet or other basis (b) Coet or other basis (c) Coepreciation (d) Book value basis (cher) 1a Land 325,000 325,000 b Buildings c Leasehold improvements d Equipment 31,712 12,999 18,713 e Other			·	· · · · · · · · · · · · · · · · · · ·	1.80 W. 1.10 W.		133 77 5 35 88 75 7
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment	_					41.0	
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment				***			
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment	_						
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ % c Term endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	٠						
g End of year balance Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment % Permanent endowment	£			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	* 355 LV		
Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment						·	
a Board designated or quasi-endowment	_	Conside the estimated persections of the year	and belease bald as	<u></u>		<u> </u>	
b Permanent endowment	4						
c Term endowment	a	- · · · · · · · · · · · · ·	⁷⁶				
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Coet or other (c) Depreciation (d) Book value (investment)							
organization by: (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of Investment (a) Cost or other basis (b) Cost or other basis (cinvestment) (investment) 1a Land 325,000 5 Buildings c Leasehold improvements d Equipment 9 Cost or other asis (a) Cost or other basis (cinvestment) 1a Land 325,000 5 Buildings c Leasehold improvements d Equipment 9 Other							
(ii) unrelated organizations (iii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Coet or other basis (cither) 1a Land 325,000 5 Buildings c Leasehold improvements d Equipment 9 S1,712 12,999 18,713 e Other	3 a		sion of the organization tha	t are held and adm	ninistered for the		
(ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (other) (investment) 1a Land 325,000 5 Buildings c Leasehold improvements d Equipment e Other		-					
b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part XI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (other) (investment) 1a Land 325,000 5 Buildings c Leasehold improvements d Equipment Other 31,712 12,999 18,713		(i) unrelated organizations			,		3a(i)
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (other) 1a Land 325,000 325,000 b Buildings 325,000 c Leasehold improvements 4 Equipment 31,712 12,999 18,713 e Other							3a(ii)
Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (c) Depreciation (investment) 325,000 Buildings C Leasehold improvements d Equipment Other Other			· ·				3b
Description of Investment							
(Investment) basis (other) 1a Land 325,000 325,000 b Buildings C Leasehold improvements d Equipment 31,712 12,999 18,713 e Other	Pa		· · · · · · · · · · · · · · · · · · ·	See Form 99	<u>0, Part X, line 1</u>	0.	
b Buildings c Leasehold improvements d Equipment 31,712 12,999 18,713 e Other		Description of investment	1 ''		} '	preclation	(d) Book value
b Buildings c Leasehold improvements d Equipment 31,712 12,999 18,713 e Other	1a	Land	325,000		7.5		325.000
c Leasehold improvements 31,712 12,999 18,713 e Other 31,712 12,999 18,713	ь	Buildings	, , , ,				===,,,,,,
d Equipment 31,712 12,999 18,713 e Other							·
e Other				31	712	12 999	18 712
				31	,	,_,	10,113
			orm 990. Part X. column (B) line 10(c))			343 713

Schedule D (Form 990) 2008 LEGACY GLOBAL FOUNDAY		37-1440662	Page 3
Part VII Investments—Other Securities. See Form 99	90, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-year	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
<u> </u>			
	•		
	·		
	·	<u> </u>	
Total. (Column (b) should equal Form 990, Part X, col. (B) fine 12.)		75.72.877 XW	·
Part VIII Investments—Program Related. See Form 9	90 Part X line 13	<u> </u>	·····
(a) Description of Investment type	(b) Book value	(c) Method of	valuation
(a) Bookington of arroad none type	(5) 500% 14,45	Cost or end-of-year	
		, , ,	
			
	 		
			
			
		 	
			
	-		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	.	· · · · · · · · · · · · · · · · · · ·	······································
Part IX Other Assets. See Form 990, Part X, line 15.		b	
(a) Description			(b) Book value
SPLIT INTEREST AGREEME	NTS		2,814,503
LIFE INSURANCE			505,919
			
	 		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)	······································	>	3,320,422
Part X Other Liabilities. See Form 990, Part X, line 2	25.	· · · · · · · · · · · · · · · · · · ·	
(a) Description of liability	(b) Amount	1. 1.7 E 76. "	.10 10 25 4 26 7 11 11
Federal income taxes	<u> </u>	[1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (
ANNUITIES PAYABLE	2,331,466		
CHARITABLE REMAINDER TRUST	123,019		
DUE TO DALLAS MEMORIAL HOPE FON	3,639		
			Y face
			
			and the second
			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.)	2,458,124		
In Part XIV, provide the text of the footnote to the organization's financial st			
uncertain tax positions under FIN 48.		Semenan a lidelist int	

Sch	dule D (Form 990) 2008 LEGACY GLOBAL FOUNDATION, INC.	37-14406	62	Page 4
P	Reconciliation of Change in Net Assets from Form 990 to	Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4-8		9	
10		<u> </u>	10	
P	成义 Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•	1 %	
а	Net unrealized gains on investments	_2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c	-1	
d	Other (Describe in Part XIV)	2d	-	
9	Add lines 2a through 2d		20	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
8	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-l . § l	
Ь	Other (Describe in Part XIV)	4b	43.1	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.)	4 38 5148 -	5	
_ P3	Reconciliation of Expenses per Audited Financial Stateme	nts with Expenses per		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	- 1		
a	Donated services and use of facilities	28	-{	
b	Prior year adjustments	2b	- ^\.	
C	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d	- 1	
9	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-	1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	48	- 1	
b	Other (Describe in Part XIV) Add lines 4a and 4b	_4b	+ 1	
C E	Total expenses, Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		4c 5	
-	Supplemental information		1.3.1	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, line	se 1a and 4: Part IV lines 1h		
	b, Part V, line 4, Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d a			
a 1 (0)	o, tates, into 4, tatex, tatex, into 5, tatexii, into 20 and 40, and tatexiii, into 20 a			
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Schedu	le D	(For	m 990	200	8	LE	GA	CY	G:	LOI	BA	L :	FO	UN	DA	TI	ON	١,	IN	IC.				37	-1	44	106	662	2					F	age 5
Schedu Part	XIV	,	Supp	lem	ent	al Ir	ıfoı	rma	tio	n (co	ontir	nued)																						
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	_	_			_	_	_	_	_					_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	
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	_	_		- –	_	_	_	_	_		_	_	_	_	_	_	_	_	_	_	_	_	_	_		_	_	_	_	_	_		_	_	
	_	_			_	_	_	_	_	_	_	_	_	_	_	_	_	-	_	_	_	_	_	_	_	_	_	-	_	_	_	_	_	_	
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									•																										

Schedule F (Form 990)

Department of the Treasury Internal Revenue Service_

Statement of Activities Outside the United States

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

2008

Open to Public Inspection

Name of the organization LEGACY GLOBAL FOUNDATION, INC.

Employer identification number 37-1440662

37-1440662 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award X Yes No the grants or assistance? 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (c) Number of (a) Region (b) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees or region (by type) (i.e., a program service. expenditures in region agents in fundraising, program services, describe specific type of region region grants to recipients located in service(s) in region the region) SUB-SAHARAN AFRICA PROGRAM SERVICES BUILD SCHOOL 5,000 SUB-SAHARAN AFRICA PROGRAM SERVICES MISSIONARY SERVICE 29,280 RUSSIA PROGRAM SERVICES ORPHAN EDUCATION 17,560 EAST ASIA AND THE PACIFIC PROGRAM SERVICES MEDICAL TRAINING 12,573

64,413

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Schedule F (Form 990) 2008	LEGACY GL	OBAL FOUND	LEGACY GLOBAL FOUNDATION, INC.	37-1440662				Page 2
Part it Grants and Part IV, line Use Schedu	Other Assistan : 15, for any reci ule F-1 (Form 99	Grants and Other Assistance to Organizatic Part IV, line 15, for any recipient who receive Use Schedule F-1 (Form 990) if additional sc	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed.	e United States. ck this box if no o	Complete if the ne recipient re	organization ans seived more than	swered "Yes" to \$5,000	Form 990, ▼ □
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV,
								appraisal, other)
	1. A							
A TO THE PROPERTY OF THE PARTY								
		1						

Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F-1 (Form 990) 2008

+ 38 PM 12921 10/02. Schedule F (Form 990) 2008

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2008 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. (g) Description of non-cash essistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 37-1440662 CHECK CHECK CHECK 17,560 29,280 12,573 (d) Amount of cash grant LEGACY GLOBAL FOUNDATION, INC. Use Schedule F-1 (Form 990) if additional space is needed. EAST ASIA AND THE PACIFIC (c) Number of recipients SUBSAHARAN AFRICA N (b) Region RUSSIA GRANT - LIVING EXPENSES GRANT - TRANSPORTATION GRANT - TRANSPORTATION (a) Type of grant or assistance Part III

1 38 PM 12921 10/02

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S. ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990.

INC

General Information on Grants and Assistance

LEGACY GLOBAL FOUNDATION

OMB No 1545-0047

Open to Public

nspection

Employer identification number

37-1440662

2 COMMUNITY DEVELOPMENT TECHNOLOGY DEVELOPMY COMMUNITY DEVELOPMNT COMMUNITY DEVELOPMENT HUMANITARIAN RELIEF Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed MEDICAL RESEARCH GENERAL PURPOSES (h) Purpose of grant YOUTH PROGRAMS YOUTH PROGRAMS or assistance Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on 18 X non-cash assistance (g) Description of Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Nethod of valuation (book, FMV, appraisal, other) (d) Amount of cash grant (e) Amount of non-cash assistance 25,000 10,000 50,000 11,000 13,000 19,500 the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 125,000 641,400 32,000 (c) IRC section if applicable (3) (3) $\widehat{\mathfrak{S}}$ $\widehat{\mathbb{C}}$ (3) (3) (3) (3) 87-0304654 20-3855102 2 Enter total number of section 501(c)(3) and government organizations 22-1576300 43-6061673 86-1001113 55-0644643 04-2203836 86-0139651 86-0531132 (b) EIN AZ 85016 GIRLS CLUB OF SO VALLEY 85224 MO 65483 85022 02215 UT 84157 85007 25045 CANYON COUNCIL AZ 85373 (a) Name and address of organization Enter total number of other organizations DREAM CENTER/CITY HELP INC ğ AZ #2055 DAVID GOURLEY MINISTRIES INTL MISSIONS OUTREACH JOSLIN DIABETES CENTER PHOENIX WORLD OUTREACH PHOENIX FIRST ASSEMBLY 13613 N CAVE CREEK RD 13613 N CAVE CREEK RD 2969 N GREENFIELD RD 1570 W MAGGIO WAY 1601 GRAND AVENUE BOY SCOUTS GRAND 1 JOSLIN PLACE P.O. BOX 57071 CULTURE SHOCK P.O. BOX 1145 P.O. BOX 380 BOYS AND CLENDENIN CHANDLER HOUSTON PHOENIX PHOENIX PHOENIX PHOENIX Part MURRAY BOSTON

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2008

Schedule (Form 980) 2008 LEGACY GLOBAL FOUNDATION, INC. 37-1440662 Part its Grants and Other Assistance to Individuals In the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed.	AL FOUNDATION, to Individuals in the if additional space is	I, INC. 3' ne United States. Com s needed.	37-1440662 omplete if the organizate	lion answered "Yes" on Fo	Page 2.
(a) Type of grant or assistance		(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
MEDICAL EXPENSE	Ħ	21,713			
EDUCATIONAL SCHOLARSHIPS	4	2,000			
MISSIONARY WORK	8	7,200			
Part IV Supplemental Information. Complete this part to		rovide the information	in required in Part I,	provide the information required in Part I, line 2, and any other additional information	onal information.
PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS	ES FOR MONITOR	KING THE USE (OF GRANT FUND		
THE MAJORITY OF GRANTS ISSUED BY LEGACY GLOBAL FOUNDATION, INC. ARE FOR	SUED BY LEGACY	CELOBAL FOUND	DATION, INC.	ARE FOR	
GENERAL OPERATIONS FOR THE PERIOD OF ONE YEAR WHEN THE FOUNDATION ISSUES	PERIOD OF ON	WE YEAR WHEN	THE FOUNDATION	N ISSUES A	
MULTI-YEAR GRANT FOR A SPECIFIED PURPOSE. ORGANIZATIONS RECEIVING GRANT	SCIFIED PURPOS	SE. ORGANIZAT	IONS RECEIVIN	G GRANT	
FUNDING FROM LEGACY GLOBAL ARE, IN MOST CASES, REQUIRED TO SUBMIT A FINAL	LARE, IN MOST	r cases, requi	IRED TO SUBMI	T A FINAL	: : : : : : : : : : : : : : : : : : : :
REPORT DESCRIBING THE RESULTS OF THEIR FUNDED PROGRAM OR UPDATE LEGACY	MIS OF THEIR	FUNDED PROGRA	AM OR UPDATE	LEGACY	
GLOBAL ON THEIR PROGRESS TO DATE. GRANT AGREEMENTS ARE PREPARED BETWEEN	TO DATE. GRANT	T AGREEMENTS 1	ARE PREPARED	BETWEEN	
LEGACY GLOBAL AND THE GRANTEE DETAILING DOCUMENTED BENCHMARKS THAT MUST BE	TEE DETAILING	DOCUMENTED	SENCHMARKS TH	AT MUST BE	:
ACHIEVED BY THE GRANTEE PRIOR TO RECEIVING THE NEXT GRANT INSTALLMENT.	LIOR TO RECEIV	TING THE NEXT	GRANT INSTAL	LMENT.	
THESE REPORTS OUTLINE THE RETURN ON INVESTMENT FOR THE GRANTEE, THE DONOR,	RETURN ON INV	ESTMENT FOR 1	THE GRANTEE,	THE DONOR,	

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Schedule (Form 990) 2008 LEGACY GLOBAL FOUNDATION, INC. 37-1440662 Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.	LEGACY GLOBAL FOUNDATION, I Other Assistance to Individuals in the	INC. 3	37-1440662 omplete if the organiza	tion answered "Yes" on Fo	Page 2 rm 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed	if additional space is i	needed.			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
				init, applaisat, ottel	
	-				
Part IV Supplemental Information. Complete this part		ovide the information	on required in Part I,	to provide the information required in Part I, line 2, and any other additional information	onal information.
THE FOUNDATION, THE COMMUNITY AND	ANY	OTHER STAKEHO	STAKEHOLDERS INVOLVED		:
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Schedule I (Form 990) 2008

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OMB No. 1545-0047 Open to Public inspection CULTURE & HUMANITIES COMMUNITY DEVELOPMENT 2008 HUMANITARIAN RELIEF HUMANITARIAN RELIEF Employer identification number GENERAL OPERATIONS ADDICTION RECOVERY (h) Purpose of grant or assistance GENERAL PURPOSES YOUTH PROGRAMS YOUTH PROGRAMS 37-1440662 (Schedule I (Form 990), Part II.) non-cash assistance (g) Description of (f) Method of valuation (book, FMV, eppressal, other) Continuation Sheet for Schedule I (Form 990) Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash Attach to Form 990 to list additional information for assistance Part II and Part III, Schedule I (Form 990) 432,600 6,000 84,000 15,000 37,500 500 25,000 10,000 33,000 37, 3 Enter total number of other organizations
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
DAA if applicable <u>e</u> 3 ê 9 3 ପ୍ର 6 (3) 9 INC. LEGACY GLOBAL FOUNDATION, Enter total number of Section 501(c)(3) and government organizations 86-0255257 20-8099462 87-0212465 87-0212453 13~1624067 26-0499689 84-0385934 20-0455737 23-7300405 (b) EIN I Į j 1 ı ١ ŧ ١ ı 50 RAST NORTH TEMPLE ST, 22ND FLOOR 85703 10023 _ _ 85202 84070 84119 84104 90057 80901 84150 ı (a) Name and address of organization Ī 1 CHURCH OF JESUS CHRIST OF LDS ۱۶ 2 ı Ž 15 18 15 ၂ ႘ 1 ar government STR A ١ 60 LINCOLN CENTER PLAZA 1 1 THE CHARITY FOUNDATION AVE. YOUNG LIFE OF PRESCOT 3150 SOUTH 900 WEST 440 EAST 8680 SOUTH İ 1 8464 N ORACLE ND l 1919 BEVERLY BLVD ١ UNITED IN CEARLIY Department of the Treasury Internal Revenue Service COLORADO SPRINGS 1651 W LINDNER 210 S RIO GRAND JULLIARD SCHOOL Name of the organization TREN CHALLENGE SALT LAKE CITY THE SANDY CLUB UTAH FOOD BANK SALT LAKE CITY SALT LAKE CITY SCHEDULE 1-1 THE ROAD HOME P.O. BOX 520 1 LOS ANCELES (Form 990) 1 NEW YORK I SANDY ı

Schedule I-1 (Form 990) 2008

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SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

OMB No. 1545-0047 2008

Internal Revenu	ue Service		or Fo	m 99	90-EZ, I	Part Ý, lìi	ne 38a or	40b.				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SPORT	08	HC .
Name of the o	rganization								Emplo	ployer Identification number				19C	
		LEGACY GLOBAL FOU								144	106	<u>62</u>			
Part		Benefit Transactions (secti													
	To be comp	pleted by organizations that answ	ered "Y	es" o	n Form	990, Pai	rt IV, line 2	25a or 25b, o	r Form 990-E	<u>z, Par</u>	t V, li	ne 40			
1		(a) Name of disqualified person						(b) Description	on of transaction	iction				опес	
							··	<u> </u>					Yes	_ _'	No.
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		ax imposed on the organization in								▶ s	i				
3 Enter th	ne amount of ta	ax, if any, on line 2, above, reimb	ursed t	ov the	organi	zation	•••			▶ s					
Part II		and/or From Interested I				<u> </u>	<u>. ,</u>		· · · · · · · · · · · · · · · · · · ·					===	
, 424 11		pleted by organizations that answ			n Form	990. Pai	rt IV. line 2	26. or Form 9	90-EZ. Part V	. line	38a.				
			Т.					T				(5.		/->··	
ď	a) Name of Intere	ested person and purpose		oan to i	pi	c) Origin) Incipal am		(a) Bai	ance due	(e) in default? (f) Ap by bo					vilben ment?
			organi	zation?	•	•							nittee?	•	
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Total	Cronto o	r Assistance Benefitting	Intor	·	d Down		<u>. ▶</u> \$	\$		L			1		<u> </u>
Part III		r Assistance Denementing bleted by organizations that answ					rt IV line 1	77							
			CIOU I	0 3 0											.
	(a)	Name of interested person			'	o) Relation		en interested p anization	erson and the	(6)	Amo		grant o	гтурв	CIT
									 						
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Part IV		Transactions Involving													
	To be comp	leted by organizations that answ	ered "Y	/es" o	n Form	990, Pa	rt IV, line 2	28a, 28b, or	28c.						
	(a) Name of	Interested person			onship be		(c) A	mount of	(d) Descr	iption c	of trans	saction	1		haring org
			Inte		person a		tran	saction						reve	nues?
			<u> </u>		anization				ļ					Yes	No
WELODIE	DURFEE		FAN	IILY	MEM	BER	<u> </u>	32,000	COMPENS	ATIC	<u> </u>			<u> </u>	X
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SCHEDULE O

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional Information for responses to specific questions for the Form 990 or to provide any additional Information. OMB No. 1545-0047

2008

Open to Public inspection

Name of the organization LEGACY GLOBAL FOUNDATION, INC.	Employer Identification number 37-1440662
FORM 990, PART III, LINE 4A - FIRST ACHIEVEMENT	
RESEARCH, MEDICAL ASSISTANCE, HUMANITARIAN RELIEF,	
COMMUNITY SERVICE AND YOUTH PROGRAMS. GRANTS ARE MA	DE
WITHIN THE UNITED STATES AND INTERNATIONALLY FOR THE	E
BENEFIT OF MANKIND.	
FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATI	ON AMONG OFFICERS
JANEL DURFEE RICHARD DUF	UFEE
VICE-PRES PRESIDENT	
FAMILY RELATIONSHIP	
BRENDA PROSSER RICHARD DUF	VFEE
TREASURER PRESIDENT	
BUSINESS RELATIONSHIP	
FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS	
	COMMITTEE FOR REVIEW
PRIOR TO APPROVING AND FILING FORM 990. THE FINANCE	
THE ORGANIZATION'S SECRETARY, TREASURER, CONTROLLER	R AND KEY FINANCE
PERSONNEL.	
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLI	CTS POLICY
THE ORGANIZATION HAS A WRITTEN CONFLICT OF INTEREST	POLICY THAT REQUIRES
OFFICERS, TRUSTEES, COMMITTEE MEMBERS AND EMPLOYEES	TO DISCLOSE ON AN
ON-GOING BASIS POTENTIAL CONFLICTS OF THEMSELVES AN	THEIR FAMILY MEMBERS.

Schedule O (Form 990) 2008

Name of the on	nolteriner

LEGACY GLOBAL FOUNDATION, INC.

Employer identification number 37-1440662

ALL DOMESTMENT CONTELLED ADE CHENTEMED NO MILE DOND HOD DWITTELL IN MILE DURING
ALL POTENTIAL CONFLICTS ARE SUBMITTED TO THE BOARD FOR REVIEW. IN THE EVENT
OF A POTENTIAL CONFLICT, PROSPECTIVE ACTIONS INCLUDE THE CONFLICTED PARTY
ABSTAINING FROM VOTING ON THE MATTER, AND RECORDEEPING IN ACCORDANCE WITH
THE ORGANIZATION'S WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY.
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
COMPENSATION OF EMPLOYEES, INCLUDING THE EXECUTIVE MANAGEMENT TEAM, IS SET
AND APPROVED BY INDEPENDENT BOARD MEMBERS. COMPENSATION IS SET USING DATA
OF COMPARABLE POSITIONS AND THE PROCESS IS DOCUMENTED. THE INDEPENDENT
BOARD MEMBERS FORM THE COMPENSATION COMMITTEE AND EVALUATE EXECUTIVE
PERFORMANCE AGAINST GOALS FOR THE YEAR AND APPROVE COMPENSATION BASED ON
PERFORMANCE.
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S ARTICLES OF INCORPORATION, BYLAWS, CONFLICT OF INTEREST
POLICY, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON
REQUEST.

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Schedule R (Form 990) 2008 OMB No 1545-0047. Open to Public Inspection (F)
Direct controlling
entity (F)
Direct controlling
entry 2008 Employer Identification number 37-1440662 (E)
Public charity status
(if section 501(c)(3)) (E) End-of-year assets Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. H (D) Exempt Code section (D) Total income (C) (3) Related Organizations and Unrelated Partnerships (C) Legal domicile (state or foreign country) (C) Legal domicile (state or foreign country) Z See separate instructions. FUND ADMIN (B) Primary activity (B) Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990. DAA Identification of Related Tax-Exempt Organizations 74-2416546 LEGACY GLOBAL FOUNDATION, INC. : :: : : : : Identification of Disregarded Entities : (A)Name, address, and EiN of related organization (A) Name, address, and EIN of disregarded entity 85206 : 1423 S. HIGLEY ROAD, SUITE 127 : Z AMERIFIRST FOUNDATION INC. . : : : : Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Part II : Part MESA :

37-1440662 Schedule R (Form 990) 2008 LEGACY GLOBAL FOUNDATION, INC.

Page 2

Identification of Related Organizations Taxable as a Partnership

Part III

(J) General or managing partner?	Ves No		
Gena	, ke		
(1) Code V—UB! Ge manage amount in box 20 of mass schedule K1 px (Form 1065)			
(H) Dispro- portionate alloc ?	S.		
E portog	V ea No		
(G) Share of end-of-year assets			
(F) Share of total income			
(E) Predominant income (related, unrelated)			
(D) Direct controlling entity			
(C) Legal domicile (state or foreign			
(B) Primary activity			
(A) Name, address, and EIN of related organization			

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Identificatio
Part IV

(A) Name, address, and EiN of related organization	related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp., S corp., or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
	:							
:	:							
:								
DAA							Schedule	Schedule R (Form 990) 2008

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Page 3

Yes

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2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds Transaction type (a-1) 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Lease of facilities, equipment, or other assets from other organization(s).

Performance of services or membership or fundraising solicitations for other organization(s). 37-1440662 Performance of services or membership or fundraising solicitations by other organization(s) Sale of assets to other organization(s)

Purchase of assets from other organization(s) Exchange of assets
Lease of facilities, equipment, or other assets to other organization(s) Name of other organization(s) Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity INC. Lease of facilities, equipment, or other assets from other organization(s) Reimbursement paid to other organization for expenses
Reimbursement paid by other organization for expenses LEGACY GLOBAL FOUNDALION, Transactions With Related Organizations Other transfer of cash or property from other organization(s)... m Shanng of facilities, equipment, mailing lists, or other assets q Other transfer of cash or property to other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV b Gift, grant, or capital contribution to other organization(s) d Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Sale of assets to other organization(s) Sharing of paid employees Schedule R (Form 990) 2008 Exchange of assets Part 0 0 € ල € 9 9 (2)

Amount involved

Schedule R (Form 990) 2008

Depreciation and Amortization

(Including Information on Listed Property)

See separate instructions. Attach to your tax return.

OMB No. 1545-0172 Attachment Sequence No 67

Nam	e(s) shown on return LEGACY	GLOBAL FOU	NDATION, IN	1C					10662
Busin	ness or activity to which this form relates					· -			
_I	NDIRECT DEPRECIAT								
P	Election To Expe								
	Note: If you have						art I.		
1	Maximum amount. See the instru			s				1	250,000
2	Total cost of section 179 property							2	000 000
3	Threshold cost of section 179 pro			uctions) , ,				3	800,000
4	Reduction in limitation, Subtract		· ·	Character 1				4	
_5	Dollar limitation for tax year. Subtract I	on of property		niing separately, s Cost (business use			lected cost	5	3 7.7
	(a) Description	on or property	(5)	Soat (Duamesa use	s Orliy)	(6)	ilected Cost		
					_				
7	Listed property. Enter the amoun	t from line 29			7				\$ 5 4 6 7 74 1.
8	Total elected cost of section 179			and 7	L	L		8	<u> </u>
9	Tentative deduction Enter the sn				• •		• • •	9	
10	Carryover of disallowed deduction		• • • • • • • • • • • • • • • • • • • •		•			10	
11	Business income limitation. Ente	_	• • • •	an zero) or line	 5 (see	instruction	ns)	11	
12	Section 179 expense deduction.	Add lines 9 and 10, bu	it do not enter more tha	an line 11	•			12	
13_	Carryover of disallowed deduction	n to 2009. Add lines 9	and 10, less line 12		13				
Note	: Do not use Part II or Part III belo	w for listed property. It	nstead, use Part V.						
P	ert [[: Special Deprecia	tion Allowance a	nd Other Depreci	ation (Do no	ot inc	lude list	ed prop	erty.)	(See instructions.)
14	Special depreciation allowance for	or qualified property (o	ther than listed propert	y) placed in ser	vice				
	during the tax year (see instruction							14	
15	Property subject to section 168(f)							15	
16	Other depreciation (including AC		-1- 1' 4 1		<u> </u>	- · · · · ·	··-	16	6,618
	MACRS Deprecia	tion (Do not incil			uctio	ns.)			
	MACES deductions for access of		Section A			······································			
17	MACRS deductions for assets pla		• •					17	
18_	If you are electing to group any assets Section B—	-Assets Placed in Ser	vice During 2008 Tax	Year Using the	Gene	eral Denne	ciation Sy		4.7.403
		(b) Month and	(c) Basis for depreciati		1		,		
	(a) Classification of property	year placed in service	(business/investment u only-see instructions)	Be ` '	(e)	Convention	(f) Mar	thod	(g) Depreciation deduction
19a	3-year property	- 1/461/46/19					_		
b	5-year property								
c	7-year property								
d	10-year property	よい (信息的)					·		
	15-year property								
9_	25-year property	3.4 . 180 X 10 M		25 yrs.			S/L		
ħ	Residential rental			27.5 yrs.		MM	S/L		
	property	 		27.5 yrs.		MM	S/L		
i	Nonresidential real property			39 угз		MM	S/L		
	<u> </u>	Placed in Son	ice During 2008 Tax Y	landina dha	<u> </u>	MM	S/L		
		Sels Flaced in Serv	ice During 2008 Tax 1	ear Using the	Aitern	anve nebi		system	<u>n</u>
20a	Class life	- ``		12	├─-		S/L		ļ
_ <u>b</u>				12 yrs.	 	1414	S/L		
C De	40-year Summary (See in	structions \	<u> </u>	40 yrs	Ц	MM	S/L	·	
21	Listed property Enter amount fro							21	<u> </u>
22	Total. Add amounts from line 12,		ines 19 and 20 in colum	nn (a) and line	 21			-41	
	Enter here and on the appropriate	- ·		107.				22	6,618
23	For assets shown above and place		-	p01410116500	11.501.	T			<u> </u>
	enter the portion of the basis attri	_			23				

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Legacy Global Foundation, Inc. 1423 S. Higley Rd. #127 Mesa, AZ 85206

Electing out of the 50% Bonus Depreciation Allowance for 7-Year Property

The taxpayer elects out of the 50% first-year bonus depreciation allowance under IRC Section 168(k) for 7-year depreciable property acquired after December 31, 2007. This election applies to all such qualified 50% bonus depreciation property placed in service after December 31, 2007.