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990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury internal Revenue Service

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

For	cai	endar	year 2008, or tax year begin	ning		, 2008, and	enaing		,20
GC	hec	k all th	at apply.	n 🔲 Fınal returi	n Amende	d return	✓ Add	ress change	Name change
Us	e th	e IRS	Name of foundation				A Empl	oyer Identification nur	nber
	lab		Nancy B Chappelear-Weldon Fou	ndation			77-0	0559952	
0	ther	vise,	Number and street (or P O box num		to street address)	Room/suite	B Teleph	none number (see page 1	0 of the instructions)
print 2100 Ross Avenue, Suite 1000					,		(44)	0) 239-8900	
	or ty	•	City or town, state and ZIP code					nption application is pend	ling check here
		ecific	Dallas, Texas 75201				1	reign organizations, che	
		tions.		1 501(c)(3) exempt p	rivato foundation		-	eign organizations mee	_
			of organization ✓ Sectior 47(a)(1) nonexempt charitable		taxable private fo	undation		eck here and attach con	
			,,,,	· · · · · · · · · · · · · · · · · · ·	<u>-</u>		E If priv	ate foundation status w	as terminated
-			value of all assets at end	J Accounting metho	d ✓ Cash	Accrual		section 507(b)(1)(A), o	
0	f yea	ar <i>(fror</i>	n Part II, col (c),	Other (specify)			F If the	foundation is in a 60-m	onth termination
h	ne 1	<i>6)</i> ▶ \$	34,859 76	(Part I, column (d) mus	st be on cash basis)		under	section 507(b)(1)(B), o	heck here
Pa	ti	Ana	alysis of Revenue and Ex	penses (The total of	(a) Revenue and		•		(d) Disbursements
			unts in columns (b), (c), and (d) may		expenses per	(b) Net inv		(c) Adjusted net	for charitable purposes
			mounts in column (a) (see page 11 o	• •	books	incor	iie	income	(cash basis only)
	1		butions, gifts, grants, etc., receive		15,000 00) 853-47-7	,		
	2	Check			15,000 00	da kaka G			
	3		st on savings and temporary cash		57: 6		05 1 C	TATE 2-1	
	4			investinents	457 47	,	457 47	-	7000000
	-		ends and interest from securities		4374		73/7/		
-		Gross							Z
enuae			ental income or (loss)	-	H	1	1000000		
7 9	_	-	ain or (loss) from sale of assets no			_		1.00	
₹			sales price for all assets on line 6		3 32		**************************************		
Revenue	7		al gain net income (from Part IV, lii	ne 2)	2,732				
∠ Œ	8		nort-term capital gain		Y. Price	1 2	(6)		**************************************
⊆ Œ	9		e modifications	1	17.2	72	54		
	10a	Gross	sales less returns and allowances	·	1	1	207	Sec. 18 18 (2015)	
j	b	Less	Cost of goods sold		2.71.2.48	47, 72	31044.4	40.4	444
; ;)	C	Gross	profit or (loss) (attach schedule)						2000
•	11	Other	income (attach schedule)						
;	12	Total.	Add lines 1 through 11		15,457 47	7	457 47		***************************************
ري (13	Comp	ensation of officers, directors, trus	tees, etc					
Expenses	14	Other	employee salaries and wages						
Ë	15	Pensi	on plans, employee benefits						
Ř	16a	ı Legal	fees (attach schedule)						
	b	Accou	ıntıng fees (attach schedule)						_
<u>ĕ</u> .	C	Other	professional fees (attach schedule))	500 00)			
strative	17	Intere	st						_
	18	Taxes	(attach schedule) (see page 14 o	f the instructions)					
.⊑	19	Depre	eciation (attach schedule) and depl	etion , see ======	7-				
틍	20	Occur	pancy	PE	CEIVEN		•		
Ă	21	Trave	l, conferences, and meetings		7.1	.1			
힏	22		ng and publications	 		7.			
Operating and Admin	23		expenses (attach schedule)	Z ADP	A E SOIO I	ai			
يَّ	24		operating and administrative ex			41			
<u>a</u>			nes 13 through 23		500 00 DEN, U100 00				
þ	25		ibutions, gifts, grants paid	i OGI	JEN, UTioo o)	*	19 19 19 19 19 19 19 19 19 19 19 19 19 1	100 00
0	26		expenses and disbursements.		600,0	4	u#_	7 17 18 18 18 18 18 18 18 18 18 18 18 18 18	100 00
_	27		act line 26 from line 12		1/2/19/19/19/19/19/19/19/19/19/19/19/19/19/				5 20 20 27 8
			ss of revenue over expenses an	d dishiirsemente	14,857 4	, (3.00)	1		
	l.		ivestment income (if negative, er		14,0374	· · · · · · · · · · · · · · · · · · ·	457 47		TANCAS
			, -	•			43747	F13727715 03	
	ட்	Adjus	sted net income (if negative, ente	ı -u-)	(A. 100 (A. 10		2.53.5.75		

6.0	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End	of year
Fe	rt u	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cashnon-interest-bearing			
	2	Savings and temporary cash investments	20,002 29	34,859 76	34,859 76
•	3	Accounts receivable ▶			
	l	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	*	¥ \$5.5	· 🔏.
	•	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the			
	ĺ	instructions)			
	7	Other notes and loans receivable (attach schedule)			
	'	Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
ŠŠ	9	Prepaid expenses and deferred charges			
ğ	· -	InvestmentsU.S and state government obligations (attach schedule)			
		Investmentscorporate stock (attach schedule)			
					ļ <u></u>
	1			7.2	
	11		<u> </u>		
	۱.,	Less: accumulated depreciation (attach schedule) ▶			<u> </u>
	12	Investmentsmortgage loans			ļ
	13	Investmentsother (attach schedule)		₩ • : , 30 57*2	1000
	14	Land, buildings, and equipment basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filerssee the			
		ınstructions Also, see page 1, item I)	20,002 29	34,859 76	34,859 76
	17	Accounts payable and accrued expenses			
S	18	Grants payable			,
≝	19	Deferred revenue			()
Liabilitie	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here ▶✓			
nces		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted	20,002 29	34,859 76	
	25	Temporarily restricted			******
ä	26	Permanently restricted			*
or Fund Bala	Ì	Foundations that do not follow SFAS 117, check here ▶			1.
5		and complete lines 27 through 31.			**.
Ž	27	Capital stock, trust principal, or current funds			
S	28	Paid-in or capital surplus, or land, bldg., and equipment fund			- 13. 4.
Assets	29	Retained earnings, accumulated income, endowment, or other funds.			-[.
Š	30	Total net assets or fund balances (see page 17 of the			-
4	30		20,002 29	34,859 76	. A. "¥"
Net	31	Total liabilities and net assets/fund balances (see page 17		34,639 70	
	31		20,002 29	34,859 76	
	us (1)	of the instructions)		34,639 70	
	rt III			.h	
1		net assets or fund balances at beginning of yearPart II, column (a),	iiile 30 (must agree wit	_	20,002,20
^		of-year figure reported on prior year's return)		1	20,002 29
		r amount from Part I, line 27a			14,857 47
		r increases not included in line 2 (itemize) ▶		3-	24.050.51
		ines 1, 2, and 3		4	34,859 76
		eases not included in line 2 (itemize) ▶		5	<u> </u>
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)Part	II, column (b), line 30.	6	34,859 76

	(a) List and describe	d Losses for Tax on Investment I the the kind(s) of property sold (e.g., real estate, house, or common stock, 200 shs MLC Co.)		(b) How acquired PPurchase DDonation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a							
b							
С							
d							
е	· · · · · · · · · · · · · · · · · · ·						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expense				or (loss)) minus (g)
a				0 00			0 00
b				0 00			0 00
C				0 00			0 00
<u>d</u>				0 00			0 00
е		wing gain in column (h) and award by	the foundation	0 00			0 00
	(I) F M V as of 12/31/69	owing gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of over col (j)	of col (ı)	col (k), but not	(h) gain minus less than -0-) or om col (h))
		23 01 123 1/03		, u,			
<u>а</u> ь							
c							
ď							
e							
2	Capital gain net income o	r inat canital loce) i	enter in Part		2		0 00
3	Net short-term capital gain of	or (loss) as defined in sections 1222(5)		,,			
•		ine 8, column (c) (see pages 13 and 17		ctions).			
	If (loss), enter -0- in Part I, li				3		
Pa		ler Section 4940(e) for Reduced	Tax on Net I	nvestment Inc	come		
If se	ection 4940(d)(2) applies, lea s the foundation liable for the	section 4942 tax on the distributable a	amount of any	year in the base	·		.□ Yes ☑ No
		qualify under section 4940(e). Do not					
1		nt in each column for each year; see p	age 18 of the	instructions befo	ore making	any entr	
C	(a) Base period years alendar year (or tax year beginning i	(b) Adjusted qualifying distributions	Net value of n	(c) oncharitable-use as:	sets		(d) ribution ratio fivided by col (c))
	2007	0 00		1,6	41 86		0 0000
	2006	0 00			0 00		0 0000
	2005	0 00			0 00		0 0000
	2004	0 00			0 00		
	2003	0 00			0 00	,	0 0000
	Total of line 1, column (d) Average distribution ratio fol	r the 5-year base perioddivide the tot			2		0 0000
	_	tion has been in existence if less than	•		3	-	0 0000
4	Enter the net value of nonch	naritable-use assets for 2008 from Part	X, line 5 .		. 4		21,144 81
5	Multiply line 4 by line 3 .		•		. 5		0 00
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6		4 57
7	Add lines 5 and 6				7	· · ·-	4 57
8	Enter qualifying distributions	from Part XII, line 4	 Part VI line 1	 b—and_complet	8	usipa :	100 00
_	the Part VI instructions on p		C. C VI,-11110-1	o, and complet	o anat part	asing-t	. 170 tax-rato-000

_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	instr	ıction	١٥١						
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			-						
ı ê	Date of ruling letter (attach copy of ruling letter if necessary-see instructions)									
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check									
L										
,	a All other democtic foundations enter 2% of line 27h. Exempt foreign organizations enter 4%									
•	of Part I, line 12, col. (b)		· 	1						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)									
3	Add lines 1 and 2			4 57						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4									
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			4 57						
6	Credits/Payments:	7.								
_	2008 estimated tax payments and 2007 overpayment credited to 2008 6a		785							
	Exempt foreign organizationstax withheld at source 6b	2								
	Tax paid with application for extension of time to file (Form 8868) 6c	ř.	,0.0,000 5,000	. 4						
	Backup withholding erroneously withheld 6d		*							
7	Total credits and payments. Add lines 6a through 6d									
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8									
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			4 57						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10									
11	Enter the amount of line 10 to be: Credited to 2009 estimated tax ▶ Refunded ▶ 11									
Pa	rt VII-A Statements Regarding Activities									
-	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	*	Yes	No						
	participate or intervene in any political campaign?	1a		✓						
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19									
	of the instructions for definition)?	1b		✓						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	💖	\$							
	published or distributed by the foundation in connection with the activities.			()						
C	Did the foundation file Form 1120-POL for this year?	1c		✓						
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	3		*						
	(1) On the foundation. ▶ \$(2) On the foundation managers. ▶ \$.	,							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	200	~`;/{{\bar{\psi}}	~\$?						
	foundation managers. > \$	<i>)</i>								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓						
	If "Yes," attach a detailed description of the activities.	*		豫:						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of									
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		✓						
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		√						
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b								
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓						
_	If "Yes," attach the statement required by General Instruction T.		1							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	2.3	1	,, ,,*						
	By language in the governing instrument, or By language in the governing instrument, or			, ,						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that The state legislation that effectively amends the governing instruments.		7							
7	conflict with the state law remain in the governing instrument?	6 7								
7 8-	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. Enter the states to which the foundation reports or with which it is registered (see page 19 of the		<u>*</u>	270						
02		I								
L	Instructions) ▶ If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		, W.	×						
C		8b	7							
Δ	(or designate) of each state as required by General Instruction G? If "No," attach explanation	90	<u> </u>							
9	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on	 								
	page 27)? If "Yes," complete Part XIV	_9_								
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		\exists							
	names and addresses	10		✓						
		1								

Page	5
, ago	•

	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		1
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			-
	August 17, 2008?	12		1
13		13	1	
	Website address ▶			٠
14	The books are in care of ▶ CTAC Telephone no. ▶ (440) 23	9-8900)	
17	Located at ▶ 6801 Engle Road, Suite L, Cleveland, Ohio ZIP+4 ▶ 44130			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041Check here			
15	and enter the amount of tax-exempt interest received or accrued during the year	٠.		
Da	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
га		<u> </u>	Van	No
4	File Form 4720 if any item is checked in the "Yes" column, unless and exception applies.	<u>*</u>	Yes	No
ıa	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disgualified person? (2) Yes Vo	₹,	,	
	(1) = 1949		į	, ě .
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	X	4	
	disqualified person?		`	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ✓ No	عظادا	(m)	ν.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Vo	500000	,	·
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	. 300		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	- W.	,4	
	the foundation agreed to make a grant to or to employ the official for a period after		4	
	termination of government service, if terminating within 90 days.)	, Sidax		
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			365" 15.
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here		, ž	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	7		, x2
	were not corrected before the first day of the tax year beginning in 2008?	1c		✓
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	#X80)-7;	9
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			*
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2008?		*	5 45 5 24
	If "Yes," list the years ▶ 20 , 20 , 20	*		*
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	,		
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	K.K	300	3
	to all years listed, answer "No" and attach statementsee page 20 of the instructions.)	2b		-
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	,		
_	▶ 20, 20, 20, 20	13.		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	N/	, '	
-	enterprise at any time during the year?	,		
ь	of "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or		~950}	- A
U	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		1016	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	,		
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			ax
	foundation had excess business holdings in 2008.)	3b		
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable		585° -57	1
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4b		1
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2006:	713		

Page	6

Part VII-B Statements Regarding Activities	es for	Which Fo	rm 4	720 May B	e Rec	uired (co	ntinue	ed)		
5a During the year did the foundation pay or incur	any an	nount to:								
' (1) Carry on propaganda, or otherwise attempt	to influ	ence legislat	ion (s	ection 4945((e))?	. 🗌 Yes	✓ No	>		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
directly or indirectly, any voter registration drive?										
(3) Provide a grant to an individual for travel, study, or other similar purposes?										
(4) Provide a grant to an organization other than a charitable, etc., organization described in										
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) Yes										
(5) Provide for any purpose other than religious, charitable, scientific, literary, or										
educational purposes, or for the prevention of cruelty to children or animals?										
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in										
Regulations section 53 4945 or in a current notice							ions)?			
Organizations relying on a current notice regard							▶□		وُرُدُونِي	
c If the answer is "Yes" to question 5a(4), does the								1 '7		
because it maintained expenditure responsibilit	-	-				. LYes	No			
If "Yes," attach the statement required by Regu										
6a Did the foundation, during the year, receive any		-			emium			/ / ·		
on a personal benefit contract?						.∐ Yes	✓ No			
b Did the foundation, during the year, pay premiu		ectly or indire	ectly, o	on a persona	al bene	tit contract?	•	6b		
If you answered "Yes" to 6b, also file Form 887			.t.ad ta	v oboltor tran		2 🗆 Vaa	✓ No			
7a At any time during the tax year, was the foundation							V INC			
b If yes, did the foundation receive any proceeds)_:d	7b		
Part VIII Information About Officers, Dire	ctors,	irustees,	roun	dation Mai	nagers	s, Hignly F	'aid E	mpioy	ees,	
and Contractors					/		f tha I		iono)	
1 List all officers, directors, trustees, foundation		e, and average		Compensation		Contributions t				
(a) Name and address		ırs per week	,	ot pald, enter		oyee benefit pla		(e) Expense account other allowances		
	devo	ted to position		-0-)	and de	ferred compens	ation			
Nancy Weldon										
2100 Ross Avenue, Suite 1000, Dallas, TX 75201	Preside	nt								
John Calandro 2100 Ross Avenue, Suite 1000, Dallas, TX 75201	Sacrata	ry, Treasurer								
William A Conway	Secreta	ry, rieasulei								
2100 Ross Avenue, Suite 1000, Dallas, TX 75201	Directo	AT.								
2100 Ross Avenue, June 1000, Dunias, 17, 75201	Directo	·•								
2 Compensation of five highest-paid employee	s (oth	er than thos	e incl	uded on lin	e 1se	e page 23	of the	Instruc	tions).	
If none, enter "NONE."						- F3			,.	
		(b) Title, and a	'omae			(d) Contribution	ons to			
(a) Name and address of each employee paid more than \$50,0	00	hours per w		(c) Compen	sation	employee be			nse account,	
		devoted to po	sition			plans and def compensat	,	Ollier a	llowances	
NONE										
					-					
						1				
						L				
Total number of other employees paid over \$50,000	<u> </u>	· · · ·	•	· · · · · ·	<u>· · · · · · · · · · · · · · · · · · · </u>	· · · ·	!			
							For	m 990-	PF (2008)	

Form	90-PF (2008)	Page 7
Part	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai	id Employees,
	and Contractors (continued)	
3	ive highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONI		
Tota	number of others receiving over \$50,000 for professional services	▶
Part	IX-A Summary of Direct Charitable Activities	
	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number janizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	one	
-		
2		
_		
a -		
3		
-		
4 _		
-		
Part	IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
	nbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 .		
-		
2		
-		
	ner program-related investments. See page 24 of the instructions	<u> </u>
3		

Total. Add lines 1 through 3

Pai	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign to	oundations,
	see page 24 of the instructions.)		
1-	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0 00
	Average of monthly cash balances	1b	21,466 81
C	Fair market value of all other assets (see page 24 of the instructions)	1c	
	Total (add lines 1a, b, and c)	1d	21,466 81
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	21,466 81
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	322 00
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	21,144 81
_6	Minimum Investment return. Enter 5% of line 5	6	1,057 24
Pa	Table Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) page 25.		
	foundations and certain foreign organizations check here I and do not complete this	part.)
1	Mınımum investment return from Part X, line 6	1	1,057 24
2a	Tax on investment income for 2008 from Part VI, line 5	* * *	
b	Income tax for 2008. (This does not include the tax from Part VI)	***	
С	Add lines 2a and 2b	2c	4 57
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,052 67
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,052 67
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
_	line 1	7	1,052 67
Da	rt XII Qualifying Distributions (see page 25 of the instructions)		
Γa			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	v	
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	100 00
	Program-related investmentstotal from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	ļ	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	4.A	
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100 00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100 00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	the fo	undation
	qualifies for the section 4940(e) reduction of tax in those years		

Par	t XIII Undistri	buted in	ncome (see page	26 c	f the	instruct	tions)								
					(a)			(b)			(c)			(d)	
1.	Distributable amou	nt for 200	8 from Part XI,		Corp	us	Years	s prior t	o 2007		200	7		2008	l
	line 7							, ,	· · · · · · · · · · · · · · · · · · ·	-8×					1,052 67
2	Undistributed incom	e, if any, a	s of the end of 2007:	- 7%		,	×ÿ		*!:		*		,		*
а	Enter amount for 2	007 only		,,,								82 09	ĺ		
	Total for prior years.	-	,20 ,20			. 8					4,				/ % /
3	Excess distribution		er, if any, to 2008:						*						
а			0 00		2	^ +	\$.	/ /		100		» ?	^ر.	*	
b	From 2004		0 00	1	, siko,			v-1	à		盐、	48 0	nail.	â.	×6. 3h
С	From 2005 .		0 00	1	W.	15		€.	3		% 2	,,	*	श्र	~ *
d	From 2006		0 00	À		A W		à	. , {	,	4				4 .
е	From 2007		0 00					,	\$. 		`,	(T)			
f	Total of lines 3a th	rough e				0 00	, ,	*.		4	Ž.	***			
4	Qualifying distribut	ions for 20	008 from Part XII,			````	alia:		Ž.	£		Á	.285.5m.		40.
	line 4: ▶\$ 100 0	0		Allery St.	ξ *	? <i>\$</i> \$\$77 -	*	,		***	-			3	* * * * * * * * * * * * * * * * * * *
а	Applied to 2007, bi	ut not mor	e than line 2a .		. altiler	¿.	, ,	y-				82 09	- A :	4	
b	Applied to undistributed	Income of p	orior years (Election		*									ć	
	requiredsee page 26	of the instruc	ctions)		¥.,	4				* * .		. D	w		κ,
C	Treated as distribu	tions out o	of corpus (Election					٠	- Sá	. 684	-	A	39		. ii.
	requiredsee page	26 of the	instructions)					**	· · · · · ·	. 🖫	`	2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1
d	Applied to 2008 dis	stributable	amount	Ja. 1			3 00		X	p + 100 s		40			17 91
е	Remaining amount	t distribute	ed out of corpus .			0 00		7.2	ì	-	Ž		7,844	\$ \$26.4	
5	Excess distribution	s carryov	er applied to 2008			0 00	žim)	« {	\$.J.,	ķ *		aj.			0 00
	(If an amount appe	ars ın col	umn (d), the same			54.	A	į	. /	-2.		. B	.753	.,2	
	amount must be sl	nown in co	olumn (a).)	. *	*	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	200	` ` `	* *	11.4				. , ., ,	
6	Enter the net to	otal of e	each column as	zi	1	20 50 300		så.	v 4- ž		, (Å),	被		1	2. 1
	indicated below:			*	84.				` ^ {		4	42	İ	92	
а	Corpus. Add lines 3	f, 4c, and 4	4e Subtract line 5 .			0 00	- 1	* ·	* it 18	i jog	\$^ *	₩. ∮ ?	* · ·		- 1
b	Prior years' undi	stributed	ıncome. Subtract	906.		A -				- 1		ž, (š	[***	٠,
	line 4b from line 2b			· · ·		'À `			0 00	- 🔊	G.	÷	* `	1999	* \$
C	Enter the amount	of prior y	years' undistributed	J.Ž		Siller.				. 45	Α.	ili me.		ė.	
	income for which a	notice of o	deficiency has been	79							Š.	***		*****	
	issued, or on which	the section	on 4942(a) tax has	ÿc×	AÑ S	۶,				% 3		gi a		2	
	been previously ass	essed .		ļ	₩.									· · · · · · · · · · · · · · · · · · ·	
d	Subtract line 60	from 1	ine 6b. Taxable	2	3	*				* *		\$4.00 J)	Ť	4
	amountsee page								0 00	. **		45		<u> </u>	
е	Undistributed inco	me for 2	007. Subtract line	Ì	4,	77 -			Y. Ø.				r	3	
	4a from line 2a.	Taxable a	amountsee page	- W		مخ	į							å	
	27 of the instructio			*								0 00		<u> </u>	
f			008 Subtract lines		^ 19		<i>'</i> 3'	*.	734	٠,	4	* **			
			amount must be	۶ ش.		. ,		4 <u>1</u>		.					
	distributed in 2009			, (3.5)	; 	'a. j.se 125	**	<u> </u>			***				1,034 76
7			tions out of corpus					À	**		Á	4			
			posed by section					4.			;				_
			see page 27 of the				* 🖠		. (10)	>:	44	(-	4 .'	47 Y
	instructions)								· · · · · · · · · · · · · · · · · · ·			······································			
8		-	ver from 2003 not					· **	, ,	* * *	'\$. }			. ***)
		f line 7 (s	ee page 27 of the	ĺ			· 🔉		r 🎎 🗸 s 🥈				Å.	₩ 0-	Ž.
_	•					0 00			* · * · · · · · · · · · · · · · · · · ·		-Æ.	- X.		\$57	
9	Excess distribut		-				\$	}	24.0	-	w 4	44.Z.,	Řς	4	Z,
	Subtract lines 7 an	d 8 from I	ıne 6a			0 00	ļ			<u> </u>					
	Analysis of line 9:		ſ]	🌞	3	/ p	À	*				,		ás.
	Excess from 2004		0.00			*Y	·.	*				.2			
	Excess from 2005		0 00	1	2	Ŋř.	,7%,	ş	1/4	(%)		**	Ì	•	
	Excess from 2006		0 00	\ \s	,	·**^ *#	. A.		.	*		\$	š		
	Excess from 2007		0 00	•		~	· ·			Ů					
e	Excess from 2008		0 00	!	žà.		1	z	× .			_ ;	/		

Dogo	1	c
Page		u

Pai	Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)								
1a	If the foundation has received a ruling foundation, and the ruling is effective	g or determination	letter that it is a p	rivate operating	,				
	Check box to indicate whether the found				4942(j)(3	3) or 4942(J)(5)			
٥-	Enter the lesser of the adjusted net		perating loundation) U4342()(3)			
2 a	income from Part I or the minimum	Tax Year		Prior 3 Years		(e) Total			
	investment return from Part X for	(a) 2008	(b) 2007	(c) 2006	(d) 2005				
	each year listed								
	85% of line 2a								
С	Qualifying distributions from Part XII,				i				
_	line 4 for each year listed								
d	Amounts included in line 2c not used directly			!					
	for active conduct of exempt activities								
е	Qualifying distributions made directly								
	for active conduct of exempt activities				1				
	Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the								
	alternative test relied upon:								
а	"Assets" alternative testenter:]		-				
	(1) Value of all assets								
	(2) Value of assets qualifying								
	under section 4942(j)(3)(B)(i) .								
b	"Endowment" alternative testenter 2/3 of								
	minimum investment return shown in Part			1	1				
	X, line 6 for each year listed								
С	"Support" alternative testenter:		-						
	(1) Total support other than gross				Í				
	investment income (interest,								
	dividends, rents, payments on								
	securities loans (section								
	512(a)(5)), or royalties								
	(2) Support from general public								
	and 5 or more exempt								
	organizations as provided in								
	section 4942(j)(3)(B)(III)								
	(3) Largest amount of support from								
	an exempt organization								
	(4) Gross investment income		<u> </u>						
Pai	t XV Supplementary Informa	tion (Complete	this part only i	f the foundation I	had \$5,000 or i	more in assets			
	at any time during the ye	earsee page 2	7 of the instruct	tions.)					
1	Information Regarding Foundation	Managers:							
a	List any managers of the foundation		outed more than 2	% of the total contrib	outions received l	by the foundation			
	before the close of any tax year (but					-,			
	control and choose of any tank year (con-	,,		, . , , . (
h	List any managers of the foundation	who own 10% o	r more of the stor	ck of a corporation	for an equally lar	ge portion of the			
	ownership of a partnership or other e					go portion of the			
	omicionip of a partitioninp of other e	y, or willow the	Touridation has a	or greater intere	,,,				
	Index and the second se	0	Osbalanski	-4- Dua					
2	Information Regarding Contribution			_					
	Check here ▶ ✓ if the foundation								
	unsolicited requests for funds. If the			c. (see page 28 of	tne instructions)	to individuals or			
	organizations under other conditions,	complete items 2	a, b, c, and d.						
а	The name, address, and telephone n	umber of the pers	on to whom applic	ations should be add	lressed:				
		•	. ,						
					· · · · · · · · · · · · · · · · · · ·				
b	The form in which applications should	l be submitted an	d information and i	materials they should	d include:				
				-					
									
C	Any submission deadlines:								
d	Any restrictions or limitations on av	wards, such as t	y geographical a	reas, charitable field	ds, kinds of inst	itutions, or other			
	factors.								

Form 990-PF	(2008)	Page 1
Part XV	Supplementary Information (continued)	
3 Grant	ts and Contributions Paid During the Year or Approved for Future Payment	

Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Name and address (home or business) a Paid during the year ASG Scholarship Fund	or substantial contributor	501(c)(3)	General	100 00
Total			▶ 3 a	100 00
b Approved for future payment				
Total	<u></u>	<u></u>	<u>.</u> ▶ 3b	

Enter o	gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by sect	ion 512, 513, or 514	(e)
1 Pro	ogram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
a			<u> </u>			the instructions)
b		ļ <u> </u>				
c						
d						
е						
f						
g	Fees and contracts from government agencies					
2 Me	embership dues and assessments					
	erest on savings and temporary cash investments					
	vidends and interest from securities			14	457 47	
5 Net	t rental income or (loss) from real estate:		\$	· · · · ·	.	
	Debt-financed property					
	Not debt-financed property					
	t rental income or (loss) from personal property					
	ner investment income					
	n or (loss) from sales of assets other than inventory					
	t income or (loss) from special events					
	oss profit or (loss) from sales of inventory					
11 Oth	ner revenue: a					
b						
-						
С						
d						
c d e 2 Sub 3 Tot See w	btotal. Add columns (b), (d), and (e)	rify calculation	 ns.)		13 <u> </u>	457 47
c d e 2 Sub 3 Tot See w	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w Part X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w Part X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w Part X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w Part X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sub 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sut 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sub 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sub 3 Tot See w art X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to
c d e 2 Sub 3 Tot See w Part X	tal. Add columns (b), (d), and (e)	erify calculation Accomplis In the income is	ns.)	empt Purpos	es t XVI-A contribut	ed importantly to

Form 9	90-PF	(2008)												Pag	₉₀ 13
Part	XVII	Information Exempt Org	_	_	nsfers To	and Tra	ansaction	s and Re	elations	hips W	ith No	oncharit	able		
`1	ın org	the organization section 501(c) of ganizations?	the Cod	de (other t	han sectio	n 501(c)(3) organiza	tions) or i						Yes	No
6		ansfers from the rep			a nonchar	ritable exer	mpt organiz	ation of:					10/1		-
	٠,,	Cash Other assets .											1a(1 1a(2	' 	1
		her transactions:		• •			•	•		•		•	14(2)	1	
•		Sales of assets to	a nonch	arıtable exe	mpt organ	zation							1b(1) <u> </u>	1
	٠,	Purchases of asse					ition						. 1b(2	_	1
	(3)	Rental of facilities,	equipmi	ent, or othe	r assets								. 1b(3)	1
	(4)	Reimbursement ar	rangeme	ents .									1b(4		1
	٠,	Loans or loan guar											1b(5	_	√
	٠,	Performance of se			•	-				•	•	•	. 1b(6	<u>}</u>	✓
		aring of facilities, ed the answer to an								 o /h\ o			. 1c	four o	oorkot
•		ue of the goods,	-					_				-			
		ue in any transac				-		_							
(a) Line	-	(b) Amount involved		c) Name of no								ctions, and s			
	\perp														
		,													
	_														
		· · · · · · · · · · · · · · · · · · ·													
	+	- 					.								
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	-		 					 							
-								-				·			
	_											-			
					 .			1			-				
				·		·									
							<u> </u>								
2a I	s the	foundation directly	or indire	ectly affiliate	ed with, or i	related to,	one or more	tax-exem	pt organiza	ations					,
		ibed in section 501		•	er than sec	tion 501(c)(3)) or in s	ection 527?	·				□ ′	∕es 🗹	No
D 1		s," complete the fol (a) Name of organ			Т.	(h) Tuno o	d evenous attention		Т) Dogge	ption of relat	honobin		
		(a) Name or organ	ization			(b) Type c	of organization) Descri	pilon or relai	ionsnip		
		-			 				-			_		-	
					 				1						
					 										
		,													
	Inder	penalties of perjury,	declare	that I have	examined th	is return, in	cluding accor	npanying sch	nedules and	stateme	ents, and	to the be	st of my k	nowledg	ge and
	ollet,	it is true, conece, and	Timpiere	Deciaration	гогрівраны	(Other than	i iaxpayer oi	iducially) is	based on a	231 111101111	_		_	ily Kilov	neuge
	·			L				11/10	12000	1).	<i>ltea</i>	surce			
Sign Here	Sigr	nature of officer or trust	99					Date			Title				
Ĭ							Date		0			Preparer:	-	•	
igi	ž Š		-	-					Check i		▶ □	(See Signal Instructions		ige 30 o	i the
Si	reparer's Use Only	Preparer's	2~	5.0				1 0 2000			۔ ب		·		
	Preparer's Use Only	Firm's name (or you	rs if	Cha sali	T 1 1			nber 9, 2009			24	292-76-6	706		——
İ	_	self-employed), add			Trust Admi			20		EIN		-1817981 (440) 220 9	900		
L_		and ZIP code	·	UOUI ENGI	e_rcoad, Sulf	e L, Cievelai	nd, Ohio 441	JU		Phor	i o IIO	(440) 239-8	JUU		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2008

Name o	f organization	Employer identification number					
Nancy	B Chappelear-Weldon I	77-0559952					
Organi	zation type (check o	ne):					
Filers	of:	Section:					
Form 9	90 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated a	as a private foundation				
		527 political organization					
Form 9	90-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trusttreated as a p	private foundation				
		501(c)(3) taxable private foundation					
	•	covered by the General Rule or a Special Rule. (Note:					
organiz	ation can check boxe	s for both the General Rule and a Special Rule. See inst	ructions.)				
Genera	il Rule						
V	-	ng Form 990, 990-EZ, or 990-PF that received, during the contributor. (Complete Parts I and II.)	e year, \$5,000 or more (in money or				
Specia	l Rules						
	under sections 509(3) organization filing Form 990, or Form 990-EZ, that me (i)(1)/170(b)(1)(A)(vi), and received from any one contributions of the amount on line 1 of these forms. (Complete Pa	utor, during the year, a contribution of the				
	during the year, agg	7), (8), or (10) organization filing Form 990, or Form 990 egate contributions or bequests of more than \$1,000 for educational purposes, or the prevention of cruelty to chil	use exclusively for religious, charitable,				
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)							
990-EZ	Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

Schedule B ((Form 990.	990-EZ.	or 990-PF)	(2008)

age 1 of 1 of Part I

Name of organization **Employer Identification number** Nancy B Chappelear-Weldon Foundation 77-0559952 Contributors (See Specific Instructions.) Part I (c) (a) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. 1 Mr John Calandro - Treasurer Person **Payroll** 2100 Ross Avenue, Suite 1000 \$ 15,000 00 Noncash (Complete Part II if there is a noncash contribution.) Dallas, Texas 75201 (b) (c) (a) Νo. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Pavroll** Noncash \$ (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (b) (c) (a) Νo. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (c) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (c) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.)

2008 Form 990-PF Supplementary Statements

Form 990-PF Part I, Line 1, Column a

Name and Address	<u>FMV</u>						
Mr John Calandro - Treasurer 2100 Ross Avenue, Suite	15,000 00						
Total (Part I, Line 1, Column a)	\$15,000.00						
Form 990-PF Part I, Line 16c, Column a							
<u>Date</u>	Description of Other professional fees	<u>Amount</u>					
March 26, 2008	Q1 Administration Fee	125 00					
June 24, 2008	Q2 Administration Fee	125 00					
September 22, 2008	Q3 Administration Fee	125 00					
December 6, 2008	Q4 Administration Fee	125 00					
Total (Part I, Line 16c, Column a)		\$500.00					

(Rev April 2008)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

OMB No 1545-1709

• If y	ou are	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on part II)	ge 2 o	f this form).
Par		blete Part II unless you have already been granted an automatic 3-month extension on a previous Automatic 3-Month Extension of Time. Only submit original (no copies needed).		ed Form 8868.
A co		n required to file Form 990-T and requesting an automatic 6-month extension—check this	box ar	nd complete
All ot time	ther cor to file ii	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 income tax returns	to requ	uest an extension of
one o electr return	of the r ronically ns, or a	iling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automate turns noted below (6 months for a corporation required to file Form 990-T). However, you file (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990 composite or consolidated Form 990-T Instead, you must submit the fully completed and signore details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Ch	ou car -BL, 60 ned pa	nnot file Form 8868 069, or 8870, group ge 2 (Part II) of Form
Туре	or		loyer ic	dentification number
print			7	0559952
File by due da filing y	ate for our	Number, street, and room or suite no If a P O box, see instructions 3500 Maple Suite 1120, LB-34		
return		City, town or post office, state, and ZIP code For a foreign address, see instructions Dallas, Texas 75219		
Chec	k type	of return to be filed (file a separate application for each return)		-
☐ F	orm 990	Form 990-T (corporation)		Form 4720
	orm 990	<u> </u>		Form 5227
☐ F	orm 990	D-EZ Form 990-T (trust other than above)		Form 6069
☑ F	orm 990	D-PF		Form 8870
Tele If the lift the	ephone he orga his is fo ne whole	No ► (440) 239-8900 FAX No ► (440) 239-8600 rization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box ► ☐ If it is for part of the group, check this box . e names and EINs of all members the extension will cover	•	F ☐ If this is and attach
1	I requiuntil for the	est an automatic 3-month (6 months for a corporation required to file Form 9 August 15 , 20 09 , to file the exempt organization return for the organization name organization's return for. calendar year 20 08 or	ed abo	ve The extension is
2		tax year beginning, 20, and endingax year is for less than 12 months, check reason. Initial return Final return C		
3a		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, y nonrefundable credits. See instructions	3a	\$
b		application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax	1 -	
		nts made. Include any prior year overpayment allowed as a credit	3b	\$
С	deposi	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, twith FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment See instructions	3c	
	-	rou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-E instructions		

Form	8868 (Rev	4-2008)				Page 2			
Note	. Only c	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part omplete Part II if you have already been granted an automatic 3-month extension on a filing for an Automatic 3-Month Extension, complete only Part I (on page 1)				▶ ☑			
Par	Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.								
Туре	or	Name of Exempt Organization	Emp	oloyer ide	ntification	number			
print		Nancy B. Chappelear-Weldon Foundation	7	7	0559952	<u>.</u>			
File by		Number, street, and room or suite no. If a PO box, see instructions	For	IRS use o	only				
extend due da	ded ate for	2100 Ross Avenue, Suite 1000	·1.	_					
filing t return		City, town or post office, state, and ZIP code. For a foreign address, see instructions		<u></u>	had aug han				
instruc		Dallas, Texas 75201		, "., ", <u>", ", ", ", ", ", ", ", ", ", ", ", ", "</u>		}			
Chec	ck type	of return to be filed (File a separate application for each return)							
□ F	orm 990	D	Ą	□F	orm 6069				
□ F	orm 990	0-BL		□ F	orm 8870				
	orm 99	D-EZ Form 990-T (trust other than above)							
STO	P! Do no	t complete Part II if you were not already granted an automatic 3-month extension	nonap	oreviousl	y filed Fori	m 8868.			
• The	e books	are in the care of ▶ CTAC							
	ephone		-8600						
• If t	he orga	nization does not have an office or place of business in the United States, check t	his box			▶ 🗌			
		r a Group Return, enter the organization's four digit Group Exemption Number (GE			If this	is			
for th	ne whole	group, check this box > If it is for part of the group, check this b	ox	. ▶ 🔲	and attach	ı a			
list w	vith the	names and EINs of all members the extension is for							
4	I reque	st an additional 3-month extension of time until November 15	, 20_	09					
5	For cal	endar year, or other tax year beginning, 20, and en	ding			20			
6		ax year is for less than 12 months, check reason: 🔲 Initial return 🔲 Final retur							
7									
	Additio	n detail why you need the extension							
8a	If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative	tax,						
	less an	y nonrefundable credits. See instructions		8a !	\$				
b	If this a	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits	and						
	estimat	ed tax payments made. Include any prior year overpayment allowed as a credit and	lany	学 /查					
	amoun	paid previously with Form 8868		8b :	\$				
С	Balance	Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, de	posit						
	with FT[Ocoupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instruc	tions	8c	\$				
	Signature and Verification								
		of perjury, I declare that I have examined this form, including accompanying schedules and statements, it, and complete, and that I am authorized to prepare this form	and to the	best of my	y knowledge a	and belief,			
		OL. N		Date 5	01.	60			
Signat	ture >	Title ► Trust Administrator		Date ►	<u> </u>	707			