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

FEB 11 2010

2008

Department of the Treasury
Internal Revenue Service (77)

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

For calendar year 2008, or tax year beginning 7/01, 2008, and ending 6/30, 2009

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

Use the
IRS label.
Otherwise,
print
or type.
See Specific
Instructions.Charity Randall Foundation
127 Anderson Street, Suite 127
Pittsburgh, PA 15212-5803

A Employer identification number

25-1329778

B Telephone number (see the instructions)

412-321-9433

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here. ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here. ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐H Check type of organization. ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end of year
(from Part II, column (c), line 16)

\$ 3,529,881.

J Accounting method. ☐ Cash ☒ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

REVENUE

- 1 Contributions, gifts, grants, etc., received (att sch)
- 2 Ck ☒ if the foundn is not req to att Sch B
- 3 Interest on savings and temporary cash investments
- 4 Dividends and interest from securities.
- 5a Gross rents
- b Net rental income or (loss)
- 6a Net gain/(loss) from sale of assets not on line 10
- b Gross sales price for all assets on line 6a 1,309,277.
- 7 Capital gain net income (from Part IV, line 2)
- 8 Net short-term capital gain
- 9 Income modifications
- 10a Gross sales less returns and allowances
- b Less: Cost of goods sold
- c Gross profit/(loss) (att sch)
- 11 Other income (attach schedule)

137,418.

137,418.

N/A

-468,759.

0.

-331,341.

137,418.

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ADMINISTRATIVE EXPENSES

- 12 Total. Add lines 1 through 11
- 13 Compensation of officers, directors, trustees, etc
- 14 Other employee salaries and wages
- 15 Pension plans, employee benefits
- 16a Legal fees (attach schedule)
- b Accounting fees (attach sch) See St 1
- c Other prof fees (attach sch) See St 2
- 17 Interest
- 18 Taxes (attach schedule) See Stmt 3
- 19 Depreciation (attach sch) and depletion
- 20 Occupancy
- 21 Travel, conferences, and meetings
- 22 Printing and publications
- 23 Other expenses (attach schedule) See Statement 4

0.

3,460.

3,460.

22,374.

22,374.

1,837.

729.

41.

41.

27,712.

26,604.

254,050.

254,050.

281,762.

26,604.

254,050.

- 24 Total operating and administrative expenses. Add lines 13 through 23
- 25 Contributions, gifts, grants paid Part XV
- 26 Total expenses and disbursements. Add lines 24 and 25
- 27 Subtract line 26 from line 12:
- a Excess of revenue over expenses and disbursements
- b Net investment income (if negative, enter 0)
- c Adjusted net income (if negative, enter 0)

-613,103.

110,814.

Part 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	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1 Cash — non-interest-bearing	15,281.	2,166.	34,953.
	2 Savings and temporary cash investments	58,145.		12,213.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch.)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	5,752.	4,644.	4,644.
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) Statement 5	1,611,157.	1,292,658.	944,673.
	c Investments — corporate bonds (attach schedule) Statement 6	400,219.	201,581.	215,886.
	11 Investments — land, buildings, and equipment: basis			
LIABILITIES	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule) Statement 7	2,493,198.	2,486,600.	2,317,512.
	14 Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe)			
	16 Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	4,583,752.	3,987,649.	3,529,881.
	17 Accounts payable and accrued expenses	6,000.	23,000.	
	18 Grants payable			
	19 Deferred revenue			
NET ASSETS OR FUND BALANCES	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	6,000.	23,000.	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>			
	24 Unrestricted	4,577,752.	3,964,649.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see the instructions)	4,577,752.	3,964,649.	
	31 Total liabilities and net assets/fund balances (see the instructions)	4,583,752.	3,987,649.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,577,752.
2 Enter amount from Part I, line 27a	2	-613,103.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	3,964,649.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	3,964,649.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a Capital Gains Distribution	P	Various	Various
b Schedule Attached (10)	P	Various	Various
c Williams Securities Settlement Fund	P	Various	9/25/08
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 7,846.			7,846.
b 1,299,788.		1,778,036.	-478,248.
c 1,643.			1,643.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			7,846.
b			-478,248.
c			1,643.
d			
e			

2 Capital gain net income or (net capital loss).	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	-468,759.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):			
If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8 </div>	3	0.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2007	255,978.	5,192,259.	0.049300
2006	236,000.	5,288,649.	0.044624
2005	223,509.	4,846,162.	0.046121
2004	184,791.	4,614,400.	0.040047
2003	190,000.	4,385,560.	0.043324

2 Total of line 1, column (d)	2	0.223416
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.	3	0.044683
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5	4	3,676,775.
5 Multiply line 4 by line 3.	5	164,289.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,108.
7 Add lines 5 and 6	7	165,397.
8 Enter qualifying distributions from Part XII, line 4	8	254,050.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling letter. _____ (attach copy of ruling letter if necessary – see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b.		1	1,108.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2.		3	1,108.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,108.
6 Credits/Payments:			
a 2008 estimated tax pmts and 2007 overpayment credited to 2008	6a	5,752.	
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	5,752.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	4,644.	
11 Enter the amount of line 10 to be: Credited to 2009 estimated tax. 4,644. Refunded	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>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.</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities.</i>		X
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? <i>If 'Yes,' attach a conformed copy of the changes.</i>		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T.</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV.</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) N/A		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation.</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses.</i>		X

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Part 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 instructions)	11		X
12. Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13. Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14. The books are in care of <u>Robert G. Panagulias</u> Telephone no. <u>412-321-9433</u> Located at <u>127 Anderson Street, Suite 127</u> ZIP + 4 <u>15212-5803</u>			
15. Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -- Check here <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> <u>N/A</u>			

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

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	N/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
b 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) to all years listed, answer 'No' and attach statement -- see the instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If 'Yes,' did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008.)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4b	X

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here

☐

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b X

If you answered 'Yes' to 6b, also file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Robert P. Randall 71 Progress Avenue Cranberry Township, PA 16066	President 1.00	0.	0.	0.
Brett R. Randall 71 Progress Avenue Cranberry Township, PA 16066	Treasurer 1.00	0.	0.	0.
Robin S. Randall 71 Progress Avenue Cranberry Township, PA 16066	Secretary 1.00	0.	0.	0.
Robert G. Panagulias 127 Timber Court Pittsburgh, PA 15212	Asst. Treas. 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				

Total number of other employees paid over \$50,000

0

Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 Grants were provided to 21 public charities, educational institutions, and civic organizations (see statement).	244,050.
2 Five educational scholarships were granted.	10,000.
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

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

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a	Average monthly fair market value of securities	1a	3,635,290.
b	Average of monthly cash balances	1b	97,476.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,732,766.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,732,766.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	55,991.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,676,775.
6	Minimum investment return. Enter 5% of line 5	6	183,839.

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

1	Minimum investment return from Part X, line 6.	1	183,839.
2a	Tax on investment income for 2008 from Part VI, line 5	2a	1,108.
b	Income tax for 2008. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,108.
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	182,731.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	182,731.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	182,731.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	254,050.
b	Program-related investments — total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	254,050.
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 instructions)	5	1,108.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	252,942.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				182,731.
2 Undistributed income, if any, as of the end of 2007:				
a Enter amount for 2007 only			252,384.	
b Total for prior years: 20__, 20__, 20__		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003				
b From 2004				
c From 2005				
d From 2006				
e From 2007				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from Part XII, line 4. \blacktriangleright \$ 254,050.				
a Applied to 2007, but not more than line 2a			252,384.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2008 distributable amount				1,666.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2007. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2009				181,065.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2004				
b Excess from 2005				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008				

BAA

Form 990-PF (2008)

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i> See Statement 9				
Total			3a	254,050.
<i>b Approved for future payment</i>				
Total			3b	

(e)
Related or exempt
function income
(see the instructions)

Form 990-PF (2008)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash		X
(2) Other assets		X
b Other transactions:		
(1) Sales of assets to a noncharitable exempt organization		X
(2) Purchases of assets from a noncharitable exempt organization		X
(3) Rental of facilities, equipment, or other assets		X
(4) Reimbursement arrangements		X
(5) Loans or loan guarantees		X
(6) Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

b If 'Yes,' complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

SIGN HERE

Signature of officer or trustee <u>[Signature]</u>		Date <u>2/12/10</u>	President	
Paid Preparer's Use Only	Preparer's signature <u>[Signature]</u>	Date <u>2/07/10</u>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See Signature in the instrs) <u>P00285799</u>
	Firm's name (or yours if self-employed), address, and ZIP code <u>C. J. Panagoulas & Co.</u>	EIN <u>25-1252908</u>		Phone no <u>(412) 321-9428</u>
	<u>127 Anderson Street, Ste 127</u>			
	<u>Pittsburgh, PA 15212</u>			

BAA

Form 990-PF (2008)

2008

Federal Statements

Page 1

Client 1802

Charity Randall Foundation

25-1329778

2/07/10

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Statement 1
Form 990-PF, Part I, Line 16b
Accounting Fees

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Prepare Financial Statements & Form 990	\$ 3,460.	\$ 3,460.		
Total	\$ 3,460.	\$ 3,460.		\$ 0.

Statement 2
Form 990-PF, Part I, Line 16c
Other Professional Fees

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Investment Management Fees	\$ 22,374.	\$ 22,374.		
Total	\$ 22,374.	\$ 22,374.		\$ 0.

Statement 3
Form 990-PF, Part I, Line 18
Taxes

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Excise tax (Form 990-PF)	\$ 1,108.			
Foreign Income Taxes	729.	\$ 729.		
Total	\$ 1,837.	\$ 729.		\$ 0.

Statement 4
Form 990-PF, Part I, Line 23
Other Expenses

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Office Expense	\$ 41.	\$ 41.		
Total	\$ 41.	\$ 41.		\$ 0.

Client 1802

Charity Randall Foundation

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Statement 5
Form 990-PF, Part II, Line 10b
Investments - Corporate Stocks

<u>Corporate Stocks</u>	<u>Valuation Method</u>	<u>Book Value</u>	<u>Fair Market Value</u>
Alcoa, Inc.	Cost	\$ 95,251.	\$ 36,242.
Altria Group, Inc.	Cost	31,832.	41,050.
Masco Corp.	Cost	55,660.	19,030.
Royal Dutch Shell, PLC Class A (ADR)	Cost	61,577.	75,413.
Coca Cola Co.	Cost	61,443.	72,045.
Pinnacle West Capital	Cost	83,114.	59,840.
Pfizer, Inc.	Cost	165,120.	105,175.
Tyco International, Ltd.	Cost	147,974.	104,920.
Marshall & Ilsley Corp.	Cost	154,163.	28,740.
3M Company	Cost	127,291.	101,915.
Harman International Industries., Inc.	Cost	134,932.	85,838.
Philip Morris International, Inc.	Cost	91,324.	129,345.
Zimmer Holdings, Inc.	Cost	82,977.	85,120.
	Total	\$ 1,292,658.	\$ 944,673.

Statement 6
Form 990-PF, Part II, Line 10c
Investments - Corporate Bonds

<u>Corporate Bonds</u>	<u>Valuation Method</u>	<u>Book Value</u>	<u>Fair Market Value</u>
Federal Home Loan Bank Note due 7/18/11	Cost	\$ 201,581.	\$ 215,886.
	Total	\$ 201,581.	\$ 215,886.

Statement 7
Form 990-PF, Part II, Line 13
Investments - Other

<u>Other Publicly Traded Securities</u>	<u>Valuation Method</u>	<u>Book Value</u>	<u>Fair Market Value</u>
DFA US Small Cap Value Portfolio	Cost	\$ 136,503.	\$ 100,384.
DFA US Large Cap Value Portfolio	Cost	434,352.	350,365.
iShares Russell 1000 Index Fund	Cost	579,057.	411,500.
Harbor International Fund	Cost	126,838.	147,056.
iShares Lehman Aggregate Bond Fund	Cost	100,071.	102,110.
SPDR Gold Trust	Cost	91,511.	136,868.
Federated Total Return Fund	Cost	170,713.	167,426.
DFA Emerging Markets Small Cap Portfolio	Cost	97,335.	87,548.
DFA International Value Portfolio	Cost	75,520.	92,024.
iShares iBoxx Investop	Cost	353,343.	380,000.
iShares Oil Equip & Svc Index Fund	Cost	115,953.	83,825.
iShares Tr DJ US Bas Mat Sect Index Fund	Cost	74,379.	87,370.
Matthews China Fund	Cost	61,000.	88,269.
Pimco High Yield Fund Inst Cl	Cost	70,025.	82,767.
	Total	\$ 2,486,600.	\$ 2,317,512.

Client 1802

Charity Randall Foundation

25-1329778

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Statement 8
Form 990-PF, Part XV, Line 2a-d
Application Submission Information

Name of Grant Program:

Name: Robert P. Randall

Care Of:

Street Address: 71 Progress Avenue

City, State, Zip Code: Cranberry Township, PA 16066

Telephone: 724-776-7015

Form and Content:

Individuals should submit a brief resume of academic qualifications and, in the case of research grants, an outline of the proposed investigation and a proposed budget. Organizations that apply should use the Foundation's standard grant application.

Submission Deadlines: April 30th

Restrictions on Awards: See Statement 11

Statement 9
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

<u>Name and Address</u>	<u>Donee Relationship</u>	<u>Found- ation Status</u>	<u>Purpose of Grant</u>	<u>Amount</u>
Amimal Friends 562 Camp Horne Road Pittsburgh, PA 15237	None		Public Charity- Operating Support	\$ 3,000.
Extra Mile Educ. Foundation 111 Boulevard of the Allies Pittsburgh, PA 15222	None		Public Charity- Educational Purposes	1,750.
Gateway to the Arts 6101 Penn Ave, Ste 301 Pittsburgh, PA 15206	None		Public charity - Professional Development for Educators	10,000.
International Poetry Forum 3333 Fifth Avenue Pittsburgh, PA 15213	None		History of the Forum publication	5,000.
Pittsburgh Civic Light Opera 719 Liberty Center Pittsburgh, PA 15222	None		Cabaret Theater	25,000.
Pittsburgh Zoo & PPG Aquarium One Wild Place Pittsburgh, PA 15206	None		Waterfall in Water's Edge	50,000.
University of Pittsburgh P.O. Box 7436 Pittsburgh, PA 15213	None		Pitt Panther Club Scholarship Fund	11,800.

Client 1802

Charity Randall Foundation

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Statement 9 (continued)
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

<u>Name and Address</u>	<u>Donee Relationship</u>	<u>Found- ation Status</u>	<u>Purpose of Grant</u>	<u>Amount</u>
Contact Pittsburgh P.O. Box 111294 Pittsburgh, PA 15238	None		Public Charity - Maintain & expand services	\$ 2,000.
Pittsburgh Parks Conservancy 2000 Technologh Drivr, Suite 300 Pittsburgh, PA 15219	None		Public Charity-General Purposes	2,500.
Family Resources 141 South Highland Avenue Pittsburgh, PA 15206	None		Camperships	2,500.
Senator John Heinz History Center 1212 Smallman Street Pittsburgh, PA 15222	None		TRACO Sports Theater	50,000.
LaRoche College 9000 Babcock Blvd. Pittsburgh, PA 15237	None		Public Charity-Educatio nal Purposes	25,000.
Allegheny Valley School 1996 Ewings Mill Road Coraopolis, PA 15108	None		Fund Raiser	5,000.
Cranberry Township Community Chest 2525 Rochester Road #450 Cranberry Twp, PA 16066	None		Support Junior Achievement	500.
Nicole Kukieza Zelienople, PA 16063	None		Pittsburgh CLO Scholarship	4,000.
RiverQuest 1501 Reesdale St, Ste 2001 Pittsburgh, PA 15233	None		General operating expenses	5,000.
University of Pittsburgh IEEE 1800 Posvar Hall Pittsburgh, PA 15260	None		Big Idea Competition	25,000.
Dana Cerminara & Penn State University Cranberry Twp, PA 16066	None		College Scholarship	1,500.
Emily Whipple & Thiel College Rochester, PA 15074	None		College Scholarship	1,500.

Client 1802

Charity Randall Foundation

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Statement 9 (continued)
Form 990-PF, Part XV, Line 3a
Recipient Paid During the Year

<u>Name and Address</u>	<u>Donee Relationship</u>	<u>Found- ation Status</u>	<u>Purpose of Grant</u>	<u>Amount</u>
William Felton & Robert Morris Univ. Allison Park, PA 15101	None		College Scholarship	\$ 1,500.
Steve Derbish and Edinboro University Pittsburgh, PA 15212	None		College Scholarship	1,500.
Duquesne University 600 Forbes Avenue Pittsburgh, PA 15219	None			5,000.
American Red Cross 225 Boulevard of Allies Pittsburgh , PA 15222	None			15,000.
Total				\$ <u>254,050.</u>

Charity Randall Foundation 25-1329778
Capital Gains (Losses) on Investment Income
Tax Year 2008

Shares	Description	1(b) How Acquired	1(c) Date Acquired	1(d) Date Sold	1(e) Sales Price	1(g) Cost Basis	1(h) Gain (Loss)
1,000.0000	Ishares Tr Barclays Bd Fd	P	Various	7/7/2008	99,858.59	100,070.00	(211.41)
833.0000	Metavante Technologies	P	11/1/2007	8/5/2008	18,824.82	24,171.40	(5,346.58)
2,000.0000	Marshall & Ilsley Cp New	P	Various	9/24/2008	52,031.15	51,380.00	651.15
4,020.1010	Federated Total Return Bond	P	Various	11/5/2008	39,975.00	42,934.68	(2,959.68)
4,000.0000	American Int'l Group, Inc.	P	Various	11/6/2008	8,399.40	177,144.15	(168,744.75)
2,000.0000	Ishares Tr Lehman Bd Fd	P	Various	11/6/2008	188,146.19	200,120.00	(11,973.81)
200,000.0000	Fed Natl Mtg 4.875%	P	5/22/2007	12/9/2008	213,968.00	198,637.73	15,330.27
10,743.1060	Longleaf Partners Intl Fund	P	Various	12/4/2008	105,794.59	141,886.31	(36,091.72)
0.4243	Ishares Tr Lehman Bd Fd	P	Various	12/24/2008	42.53	43.79	(1.26)
1,817.0000	Ishares Tr Lehman Bd Fd	P	Various	12/24/2008	181,937.14	187,530.64	(5,593.50)
4,741.4890	DFA Japanese Small Co Fd	P	Various	1/12/2009	60,760.89	82,510.30	(21,749.41)
1,500.0000	Pinnacle West Capital CP	P	5/5/2005	2/12/2009	51,328.26	62,340.00	(11,011.74)
1,800.0000	General Electric Company	P	Various	3/24/2009	19,927.73	54,954.00	(35,026.27)
4,200.0000	General Electric Company	P	Various	3/30/2009	45,851.85	128,210.60	(82,358.75)
8,000.0000	CitiGroup, Inc.	P	Various	4/21/2009	32,150.22	161,725.45	(129,575.23)
1,500.0000	General Dynamics Corp.	P	4/1/2009	6/10/2009	90,841.16	64,450.00	26,391.16
2,859.1850	DFA Intl Value Portfolio	P	Various	6/30/2009	39,975.00	32,537.53	7,437.47
3,287.3110	DFA US Small Cap Value	P	Various	6/30/2009	49,975.00	67,389.88	(17,414.88)
						<u>1,778,036.46</u>	<u>(478,248.94)</u>
Capital Gain Distributions							<u>7,846.05</u>
							<u>(470,402.89)</u>

Organization's Application for Grant From Private Foundation

To:

Charity Randall Foundation

71 Progress Avenue

Cranberry Township, PA 16066

From:

(Name of Applicant)

(Street Address)

(City, State and Zip Code)

Part I. Information about the Applicant

1. Is the applicant organized as a nonprofit organization under State laws governing charitable organizations? () Yes () No

If yes, what State or Commonwealth governs? _____
If no, please explain:

2. Has the applicant received a ruling or determination letter from the Internal Revenue Service about any of the following:

- (a) Exempt status () Yes () No
(b) Private foundation status () Yes () No
(c) Grant-making procedures () Yes () No

Attach a photocopy of each such letter.
If any item is marked no, explain (b) and (c).

3. (a) Attach a copy of the applicant's proposed budget for the year in which the grant funds are to be used.
- (b) If this grant will be a substantial and material part of the total budget, attach a copy of the latest information return (Form 990 or 990PF) filed by the applicant with the Internal Revenue Service.
- (c) Describe the applicant's purposes and activities in general.

4. Is the applicant controlled by, related to, connected with, or sponsored by another organization. () Yes () No

If yes, identify the organization (including its purposes and activities) and explain the relationship:

5. List the name and address and title of each member of the applicant's governing board:

_____ (Name)	_____ (Title or office)
_____ (Street Address)	_____ (City, State and Zip Code)
_____ (Name)	_____ (Title or office)
_____ (Street Address)	_____ (City, State and Zip Code)
_____ (Name)	_____ (Title or office)
_____ (Street Address)	_____ (City, State and Zip Code)

(If more space is needed attach a separate list)

6. Has the applicant (or any organization listed in 4, above) ever applied for or received a grant from this foundation? () Yes () No

Part II. Use of the proposed grant

7. Show the amount requested and explain in detail how it will be used. State whether the grant is to be earmarked for the use or benefit of any one person, group, or class of people. If so, for whom?

8. Person to contact who will be administering the proposed program.

(Name)

(Title or office)

(Street Address)

(City, State and Zip Code)

(Area code and telephone number)

Describe this person's experience and qualifications to administer this program.

From my knowledge, I state that the information given in Parts I and II is correct. The applicant organization has authorized me to make this application.

(Name)

(Date)

(Title or office)

The information in Parts I and II is to help the grantor foundation meet the requirements of section 4945(h) of the Internal Revenue Code.

CHARITY RANDALL FOUNDATION

Scholarship Application

NAME _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE () _____
HIGH SCHOOL _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE () _____

I am applying for a scholarship to attend the following school
after graduation from high school:

Name _____
Address _____

I am interested in studying _____
and wish to pursue: _____ Degree in _____
Certificate in _____

ADDITIONAL INFORMATION:

DATE OF BIRTH _____ SOCIAL SEC.# _____
I will graduate from _____ High School
on _____.

NAME OF PARENT OR GUARDIAN _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____

INSTRUCTIONS:

This application must be submitted and signed by your Guidance Counselor and must be accompanied by the following additional information:

1. Two letters of recommendation (from teachers, counselors, employers.)
2. A copy of your academic record through the end of the first term of your senior academic year.
3. A statement containing a minimum of 250 words explaining in detail why you want a career in the field you have listed on this application and why you feel you would be successful in this field of endeavor. This statement may be typed or hand written, but it must be on a standard 8 1/2 x 11 inch paper. Your name, address and high school name must appear in the upper left-hand corner.
4. The above statement must include a signed statement from you indicating that it was written by you without the assistance of another person.

SCHOOL INFORMATION: (TO BE COMPLETED BY GUIDANCE COUNSELOR)

I certify that the above applicant has, as of the end of the first term of his or her senior academic year, obtained a grade point average of _____ based on a 4.0 scale and currently ranks _____ in a class of _____ graduates.

Signature of Guidance Counselor	Title	Date
---------------------------------	-------	------

High School	Telephone
-------------	-----------

FINANCIAL NEED:

Awards will be based on financial need which will be determined from the financial information provided by you. Please complete the Financial Information form attached. If you have lived with or have been supported by your parent(s) within the past eighteen months, please complete Sections A and B. If you have not lived with or have not been supported by your parents within the past eighteen months, please complete Section B. All must complete page 1-7 of the Financial Information requested.

Please itemize your anticipated expenditures for the next school year

Tuition	_____
Lodging and Meals	_____
Books and Supplies	_____
Travel	_____
Miscellaneous	_____
Total	_____

All of the information contained in the Scholarship Application, including the Financial Information is true and correct to the best of my knowledge.

Signature of Student Applicant

- * DEADLINE: APRIL 15 OF EACH YEAR
- * RETURN ALL THE REQUESTED DOCUMENTS TOGETHER TO:

Charity Randall Foundation
71 Progress Avenue
Cranberry Township, PA 16066

CHARITY RANDALL FOUNDATION
SCHOLARSHIP APPLICATION
FINANCIAL INFORMATION

Name: _____

_____ Not Married

_____ Married

Name of Spouse: _____

Name(s) of Children:

_____ Live with or supported by parent(s) within the past 18
months (complete Sections A and B)

_____ Have not lived with and have not been supported by parent(s)
within the past 18 months (complete Section B)

Extra Ordinary Financial Circumstances (Explain):

Section A

Dependent Student - Parental Information

Parents Name(s)

Mother: _____

Father: _____

Number of Exemptions Claimed on U.S. Individual Income Tax
Return _____ (20____) by parent(s).

Parental Income and Expenses (Immediately Preceding Calendar Year)

<u>Income</u>	<u>Amount</u>
Salaries and Wages	_____
Interest Income and Dividends	_____
Capital Gains or Losses	_____
Business Income or Loss	_____
Rental Income or Loss	_____
Partnerships and S Corporations	_____
Estate and Trusts	_____
Total Pensions, Social Security and Annuities	_____
Other Taxable Income	_____
_____	_____
_____	_____
_____	_____
Other Nontaxable Income	_____
_____	_____
_____	_____
_____	_____
Total	_____

Section A (Continued)

Dependent Student - Parental Information

<u>Expenses:</u>	<u>Amount</u>
Medical and Dental	_____
Home Mortgage Interest	_____
Real Estate Taxes	_____
Federal Income Taxes (per tax return filed)	_____
State and Local Income Taxes (per tax returns filed)	_____
Job Related Expenses	_____
Tuitions Paid for all Dependents	_____
 Total	 _____

Anticipated Tuitions to be Paid Next School Year:

<u>For Whom</u> <u>(Include Student Applicant)</u>	<u>Name of School</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section A (Continued)

Dependent Student - Parental Information

<u>Assets:</u>	<u>Amount</u>
Cash	_____
Residence	_____
Investments	_____
Business Assets	_____
Other Real Estate	_____
Other Assets	_____
 Total	 _____

<u>Obligations:</u>	
Residential Mortgage	_____
Investments Debts	_____
Business Debts	_____
Other Real Estate Mortgages	_____
 Total	 _____

Section B
Student Information

Parents Name(s)

Mother: _____

Father: _____

Number of Exemptions Claimed by You on Your U.S. Individual Income
Tax Return if filed _____ (20____)

Student Income and Expenses - Immediately Preceding Calendar Year
(Include Spouse if Married)

<u>Income</u>	<u>Amount</u>
Salaries and Wages	_____
Interest Income and Dividends	_____
Capital Gains or Losses	_____
Business Income or Loss	_____
Rental Income or Loss	_____
Partnerships and S Corporations	_____
Estate and Trusts	_____
Total Pensions, Social Security and Annuities	_____
Other Taxable Income	_____
_____	_____
_____	_____
_____	_____
Other Nontaxable Income	_____
_____	_____
_____	_____
_____	_____
Total	_____

Section B (Continued)

Student Information

Expenses:

Amount

Medical and Dental

Home Mortgage Interest

Real Estate Taxes

Federal Income Taxes (per tax return filed)

State and Local Income Taxes (per tax returns filed)

Job Related Expenses

Tuitions Paid for all Dependents

Total

Anticipated Tuitions to be Paid Next School Year:

For Whom
(Include Student Applicant)

Name of School

Amount

Section B (Continued)

Student Information

<u>Assets:</u>	<u>Amount</u>
Cash	_____
Residence	_____
Investments	_____
Business Assets	_____
Other Real Estate	_____
Other Assets	_____
 Total	 _____

<u>Obligations:</u>	
Residential Mortgage	_____
Investments Debts	_____
Business Debts	_____
Other Real Estate Mortgages	_____
 Total	 _____

CHARITY RANDALL FOUNDATION

Scholarship Application

NAME _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE (____) _____
HIGH SCHOOL _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE (____) _____

I am applying for a scholarship to attend the following school
after graduation from high school:

Name _____
Address _____

I am interested in studying _____
and wish to pursue: _____
_____ Degree in _____
_____ Certificate in _____

ADDITIONAL INFORMATION:

DATE OF BIRTH _____ SOCIAL SEC.# _____
I will graduate from _____ High School
on _____.

NAME OF PARENT OR GUARDIAN _____
STREET ADDRESS _____
CITY _____ STATE _____ ZIP _____

INSTRUCTIONS:

This application must be submitted and signed by your Guidance Counselor and must be accompanied by the following additional information:

1. Two letters of recommendation (from teachers, counselors, employers.)
2. A copy of your academic record through the end of the first term of your senior academic year.
3. A statement containing a minimum of 250 words explaining in detail why you want a career in the field you have listed on this application and why you feel you would be successful in this field of endeavor. This statement may be typed or hand written, but it must be on a standard 8 1/2 x 11 inch paper. Your name, address and high school name must appear in the upper left-hand corner.
4. The above statement must include a signed statement from you indicating that it was written by you without the assistance of another person.

SCHOOL INFORMATION: (TO BE COMPLETED BY GUIDANCE COUNSELOR)

I certify that the above applicant has, as of the end of the first term of his or her senior academic year, obtained a grade point average of _____ based on a 4.0 scale and currently ranks _____ in a class of _____ graduates.

Signature of Guidance Counselor	Title	Date
---------------------------------	-------	------

High School	Telephone
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FINANCIAL NEED:

Awards will be based on financial need which will be determined from the financial information provided by you. Please complete the Financial Information form attached. If you have lived with or have been supported by your parent(s) within the past eighteen months, please complete Sections A and B. If you have not lived with or have not been supported by your parents within the past eighteen months, please complete Section B. All must complete page 1-7 of the Financial Information requested.

Please itemize your anticipated expenditures for the next school year

Tuition	_____
Lodging and Meals	_____
Books and Supplies	_____
Travel	_____
Miscellaneous	_____
Total	_____

All of the information contained in the Scholarship Application, including the Financial Information is true and correct to the best of my knowledge.

Signature of Student Applicant

- * DEADLINE: APRIL 15 OF EACH YEAR
- * RETURN ALL THE REQUESTED DOCUMENTS TOGETHER TO:

Charity Randall Foundation
71 Progress Avenue
Cranberry Township, PA 16066

CHARITY RANDALL FOUNDATION
SCHOLARSHIP APPLICATION
FINANCIAL INFORMATION

Name: _____

_____ Not Married

_____ Married

Name of Spouse: _____

Name(s) of Children:

_____ Live with or supported by parent(s) within the past 18
months (complete Sections A and B)

_____ Have not lived with and have not been supported by parent(s)
within the past 18 months (complete Section B)

Extra Ordinary Financial Circumstances (Explain):

Section A

Dependent Student - Parental Information

Parents Name(s)

Mother: _____

Father: _____

Number of Exemptions Claimed on U.S. Individual Income Tax
Return _____ (20____) by parent(s).

Parental Income and Expenses (Immediately Preceding Calendar Year)

<u>Income</u>	<u>Amount</u>
Salaries and Wages	_____
Interest Income and Dividends	_____
Capital Gains or Losses	_____
Business Income or Loss	_____
Rental Income or Loss	_____
Partnerships and S Corporations	_____
Estate and Trusts	_____
Total Pensions, Social Security and Annuities	_____
Other Taxable Income	_____
_____	_____
_____	_____
_____	_____
Other Nontaxable Income	_____
_____	_____
_____	_____
_____	_____
Total	_____

Section A (Continued)

Dependent Student - Parental Information

<u>Expenses:</u>	<u>Amount</u>
Medical and Dental	_____
Home Mortgage Interest	_____
Real Estate Taxes	_____
Federal Income Taxes (per tax return filed)	_____
State and Local Income Taxes (per tax returns filed)	_____
Job Related Expenses	_____
Tuitions Paid for all Dependents	_____
 Total	 _____

Anticipated Tuitions to be Paid Next School Year:

<u>For Whom</u> <u>(Include Student Applicant)</u>	<u>Name of School</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section A (Continued)

Dependent Student - Parental Information

<u>Assets:</u>	<u>Amount</u>
Cash	_____
Residence	_____
Investments	_____
Business Assets	_____
Other Real Estate	_____
Other Assets	_____
 Total	 _____

<u>Obligations:</u>	
Residential Mortgage	_____
Investments Debts	_____
Business Debts	_____
Other Real Estate Mortgages	_____
 Total	 _____

Section B
Student Information

Parents Name(s)

Mother: _____

Father: _____

Number of Exemptions Claimed by You on Your U.S. Individual Income
Tax Return if filed _____ (20____)

Student Income and Expenses - Immediately Preceding Calendar Year
(Include Spouse if Married)

<u>Income</u>	<u>Amount</u>
Salaries and Wages	_____
Interest Income and Dividends	_____
Capital Gains or Losses	_____
Business Income or Loss	_____
Rental Income or Loss	_____
Partnerships and S Corporations	_____
Estate and Trusts	_____
Total Pensions, Social Security and Annuities	_____
Other Taxable Income	_____
_____	_____
_____	_____
_____	_____
Other Nontaxable Income	_____
_____	_____
_____	_____
_____	_____
Total	_____

Section B (Continued)

Student Information

<u>Expenses:</u>	<u>Amount</u>
Medical and Dental	_____
Home Mortgage Interest	_____
Real Estate Taxes	_____
Federal Income Taxes (per tax return filed)	_____
State and Local Income Taxes (per tax returns filed)	_____
Job Related Expenses	_____
Tuitions Paid for all Dependents	_____
 Total	 _____

Anticipated Tuitions to be Paid Next School Year:

<u>For Whom</u> <u>(Include Student Applicant)</u>	<u>Name of School</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section B (Continued)

Student Information

Assets:

Amount

Cash

Residence

Investments

Business Assets

Other Real Estate

Other Assets

Total

Obligations:

Residential Mortgage

Investments Debts

Business Debts

Other Real Estate Mortgages

Total

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

OMB No 1545 1709

Department of the Treasury
Internal Revenue Service► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box. ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	Charity Randall Foundation	25-1329778
	Number, street, and room or suite number. If a P.O. box, see instructions	
	127 Anderson Street, Suite 127	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	Pittsburgh, PA 15212-5803	

Check type of return to be filed (file a separate application for each return).

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ► Robert G. Panagulias

Telephone No. ► 412-321-9433 FAX No. ► 412-321-9437

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 10, to file the exempt organization return for the organization named above.

The extension is for the organization's return for

- ☐ calendar year 20__ or
► ☒ tax year beginning 7/01, 20 08, and ending 6/30, 20 09.

- 2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$	1,108.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$	5,752.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.Form **8868** (Rev. 4-2009)