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, Form **990-PF**

Return of Private Foundation

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

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.

OMB No 1545-0052

	For	alenda	r year 2008, or tax yea	ar beginning JU	L 1, 2008	, and en	ding	JUN 3	0, 2009		
	G C	heck all	I that apply:	nıtıal return	Final return	Amended retur	rn 🗆	Address			change
	Hea	the IRS	Name of foundation					A Employ	er identification		
		abel.	'					' '			
		erwise,	TCM FOUNDA	ATION				71-	0813230		
		print	Number and street (or P	O box number if mail is not	delivered to street address)		Room/suite	B Telepho	ne number		
		type.	P.O. BOX 3	3726				479	-783-14	65	
		Specifications		nd ZIP code				C If exempti	on application is pe	ending, check here	ightharpoons
	111211	uctions	FORT SMITH	H, AR 7291	3-5206			D 1. Forei	gn organizations	, check here	
	H C	heck typ	pe of organization:	X Section 501(c)(3)	exempt private foundation			2. Foreig check	n organizations me here and attach co	eting the 85% test, mputation	
		Section	on 4947(a)(1) nonexem	npt charitable trust	Other taxable private found	dation				tus was terminat	
	I Fa	ır marke	et value of all assets at e	end of year J Accour	iting method: X Cash	Accru	ıal	under se	ection 507(b)(1)	(A), check here	`` ▶□
			rt II, col. (c), line 16)		Other (specify)	·		F If the for	undation is in a 6	60-month termir	nation
		\$			lumn (d) must be on cash	mn (d) must be on cash basis)			ection 507(b)(1)		ightharpoonup
	Pa		Analysis of Revenue an	imns (b), (c), and (d) may not	(a) Revenue and	(b) Net inv			ljusted net	(d) Disbursi for charitable p	ements
		'n	ecessarily equal the amoun	nts in column (a))	expenses per books	incor	me	ır	icome	(cash basis	only)
			ontributions, gifts, grant								
			neck X If the foundation			ļ					
		3 ca	terest on savings and tempo ish investments	orary		_					
		4 Dr	vidends and interest fro	om securities	1,088	.	1,088.			STATEME	<u>NT 1</u>
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0 2 2010		b Ne	et rental income or (loss)			.					
	ē		et gain or (loss) from sale of ross sales price for all		0.	•					
Les Les	ent	b as	sets on line 6a	<u>37,000.</u>		1			BEOF	-11 (1-1-)	
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\geq		Gr	come modifications oss sales less returns	I				3088	FEB 0	8 2010 	S-0S
		10a an	d allowances					<u> </u>	1		<u> </u>
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急			ross profit or (loss)			<u> </u>			OGDF	:14' n l	
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			otal Add lines 1 throug	-	1,088		L,088.		0.		
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			ther employee salaries a	•							
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	ga		her expenses			+					
	ţį		otal operating and adm	oinietrative		 					
	era		penses Add lines 13 tl		3,231.		0.		0.		Λ
	ŏ		ontributions, gifts, grant	-	4,444	·	<u> </u>			1	$\frac{0.}{,444.}$
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			id lines 24 and 25	410011101110	7,675		0.		0.	1	,444.
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			cess of revenue over expens		<6,587.						
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			fjusted net income (if ne			† -	.,		0.		
•					n Act Natice can the instru	otions			<u> </u>	Form 990-1	OF (2009)

823501 01-02-09

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27 Capital stock, trust principal, or current funds 147,052. 135,275. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 0. 0. 0. 29 Retained earnings, accumulated income, endowment, or other funds 31 Total net assets or fund balances 135,275. 128,688. 28,688. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	교	1	•				
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(must agree with end-of-year figure reported on prior year's return)1135,275.2Enter amount from Part I, line 27a2<6,587.	P	art	III Analysis of Changes in Net Assets or Fund Ba	alances			
(must agree with end-of-year figure reported on prior year's return)1135,275.2Enter amount from Part I, line 27a2<6,587.	_	Total	net assets or fund halances at beginning of year - Part II column (a) line				
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 2 <6,587.> 3 0.• 4 128,688. 5 0.• 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 128,688.	•				4	135 275	
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				lumn (h) line 20			
	0_	iuldi	not assets of fund paranees at end of year (fine 4 millios line 3) - Part II, CO	ianini (u), inite 30		Form 990-PF (2008)	

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See the Part VI instructions.

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.

$\overline{}$	n 990-PF (2008) TCM FOUNDATION 71 - 08 1 TCM FOUNDATION 71 - 08 1 TCM FOUNDATION 71 - 08 1 TCM FOUNDATION 71 - 08			Page 4
		e mstrt	JCHO	nsj
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			;
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)			
	of Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			<u>22.</u>
_	, , , , , , , , , , , , , , , , , , ,			!
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		-	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2			$\frac{0.}{22.}$
3	•			
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-			22.
6	Credits/Payments:			ŧ
	2008 estimated tax payments and 2007 overpayment credited to 2008	× .		
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)	•		
	Backup withholding erroneously withheld 6d		-	٠.,
_	Total credits and payments. Add lines 6a through 6d			<u>0.</u>
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			22.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2009 estimated tax Refunded 11			
_			V	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	Yes	
	any political campaign?	<u>1a</u>	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1	
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 <u>c</u>	 	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1	
_	managers. > \$O.			7.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2_	ļ	<u> </u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			1,,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	1		
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	 	X
c	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ļ	İ	
6	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	ĺ		
		ء ا		v
7	remain in the governing instrument?	6	Х	<u> </u>
1	Did the foundation have at least \$5,000 in assets at any time during the year?	7	A-	-
0-	If "Yes," complete Part II, col. (c), and Part XV	1	1	
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
	If the appropriate line 7, has the foundation furnished a copy of Form 200 DF to the Attorney Concept for described	-		
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.		v
^	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 6	8b_	 	X
9	3			.
40	year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	 	X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			<u>X</u>

orm 990-PF (2008) TCM FOUNDATION			71-08132	30	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:]		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			1] ;
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	į	1 '
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				ĺ
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No	1	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es X No	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		-	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it mainta			1	
expenditure responsibility for the grant?	y .	I/A	s No		
If "Yes," attach the statement required by Regulations section 53.494	• •			-	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es 🗶 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal 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 s		Ye	es X No		
b If yes, did the foundation receive any proceeds or have any net income attribute			<u> </u>	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	·	nagers, Highly	y 		
1 List all officers, directors, trustees, foundation managers and their		1	(4)		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	aci	e) Expense count, other
(a) Name and address	to position	enter -0-)	and deferred compensation	a	llowances
				1	
		1]	
SEE STATEMENT 7		0.	0.	<u> </u>	0.
		ĺ		1	
				}	
				ļ	
		1		1	
	<u> </u>				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	1	- \ Evnance
(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	acc	e) Expense count, other allowances
NONE					
				<u> </u>	
			· -		
				<u> </u>	
Total number of other employees paid over \$50,000					0

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Form 990-PF (2008) ' TCM FOUNDATION 7:	1-0813	230 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		-
	_	
2		
	\dashv	
3		
4	_	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	>	0.
		990-PF (2008)

Р	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, se	e 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.
b	Average of monthly cash balances	1b	131,418.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	131,418.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	131,418.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,971.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	129,447.
6	Minimum investment return. Enter 5% of line 5	6	6,472.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	6,472.
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.)		
C	Add lines 2a and 2b	2c	22.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,450.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	6,450.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	6,450.
=	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1.	4 444
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,444.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	,	3b	4 4 4 4
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,444.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	4,444.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for th	ie section

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				6,450.
2 Undistributed income, if any, as of the end of 2007			_	
a Enter amount for 2007 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2008:		````		:
a From 2003				` ,
b From 2004	`			
c From 2005 6,167.				
d From 2006				·
e From 2007 71.				,
f Total of lines 3a through e	6,238.			
4 Qualifying distributions for 2008 from	,			•
Part XII, line 4: ▶ \$4 , 444 .	`		-	, .
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior				, *
years (Election required - see instructions)		0.	·	<u> </u>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2008 distributable amount				4,444.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a))	2,006.			2,006.
6 Enter the net total of each column as indicated below.				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,232.			
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 instr.			0.	
f Undistributed income for 2008 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003			•	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009				
Subtract lines 7 and 8 from line 6a	4,232.			
O Analysis of line 9 ⁻				
a Excess from 2004				
b Excess from 2005 4 , 161 .				
c Excess from 2006				
d Excess from 2007 71.				
e Excess from 2008		i	<u> </u>	
				Form 990-PF (2008)

Part XIV Private Operating I	JNDATION	etructions and Part V	II.A guestion 9)		1813230 Page 1
				N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f		-	▶	14040(3/2) 25	40.40(-)(5)
b Check box to indicate whether the four		ng toundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2008	(b) 2007	Prior 3 years (c) 2006	(d) 2005	(a) Total
income from Part I or the minimum	(2) 2000	(0) 2007	(6) 2000	(0) 2003	(e) Total
investment return from Part X for					
each year listed	<u> </u>	 		 	
b 85% of line 2a			-	 	
c Qualifying distributions from Part XII,	-				
line 4 for each year listed		ļ	<u> </u>	 	
d Amounts included in line 2c not				1	
used directly for active conduct of					
exempt activities			 	- 	
e Qualifying distributions made directly					
for active conduct of exempt activities.	}				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:	}	}		1	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			<u> </u>		
b "Endowment" alternative test - enter 2/3 of minimum investment return		1			
shown in Part X, line 6 for each year)			1	
listed			<u></u>		
c "Support" alternative test - enter:	}			1	1
(1) Total support other than gross					
investment income (interest,	1			İ	ľ
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)		<u>L </u>			
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	n had \$5,000 or i	more in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w			tributions received by th	e foundation before the (close of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(d)(2).)			
THOMAS C. MUELLER TH	RUST				
b List any managers of the foundation w			(or an equally large port	ion of the ownership of a	a partnership or
other entity) of which the foundation h	as a 10% or greater intere	St.			
NONE					
2 Information Regarding Contribu					
Check here ► X If the foundation					
the foundation makes gifts, grants, etc.	. (see instructions) to indi	viduals or organizations	under other conditions, o	complete items 2a, b, c, a	and d
a The name, address, and telephone num					
TCM FOUNDATION C/O I		•	831465		
P.O. BOX 83, EDGEMON	NT, AR 72044				
b The form in which applications should		•			
LETTER FORM REQUEST	ING INFORMAT	ION ON APP	LICATION PR	OCESS	
c Any submission deadlines:					
NO DEADLINES	<u> </u>		 	 	
d Any restrictions or limitations on award			s, kinds of institutions, or	other factors:	
NO RESTRICTION OR L	IMITATION ON	AWARDS			
823601 01-02-09					Form 990-PF (2008
					10000 222 1 1 12000

Part XV Supplementary Information	(continued)		71 001	. <u>5250 rugo</u>
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year TRINTY JUNIOR HIGH SCHOOL, 1205 SOUTH ALBERT PIKE AVE, FORT SMITH, AR 72903		PUBLIC CHARITY	FUND CATHOLIC EDUCATION	4,444
Total			▶ 3a	4,44
b Approved for future payment		1	- Ou	
NONE				
Total 823611 01-02-09			▶ 3b	0 0 0 0

15010104 759194 57384000

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	------------

Enter gross amounts unless otherwise indicated.	Unrelated	l business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	-	code		
ab	•				
· · · · · · · · · · · · · · · · · · ·			+		· · · · · · · · · · · · · · · · · · ·
	1 1		+		
e	1 1		 		
f			†		 -
g Fees and contracts from government agencies		 	 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		_			
4 Dividends and interest from securities			14	1,088.	
5 Net rental income or (loss) from real estate:					. *
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property			!		
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	.	·			
c	.				
d	.				
e			 		
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	1,088.	
3 Total Add line 12, columns (b), (d), and (e)				13	1,088.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xemp	t Purposes	

	the foundation's exempt purposes (other than by providing funds for such purposes).
823621	C 000 DE (2000)

01-02-09

	art X	Exempt Organ	egarding Fransie nizations	ers to and	a Fransactions	s and Relation	onsnips with ive	ncnaritable	e	
1	Dıd tl	ne organization directly or indi		ne following w	vith any other organiz	zation described in	section 501(c) of		Yes	No
		ode (other than section 501(c		_						
;		sfers from the reporting found	• • • • • • • • • • • • • • • • • • • •		= :			ŀ		!
	(1)	· -		. •				1a(1)		X
		Other assets						1a(2)		X
ı		r transactions:								
	(1) 5	Sales of assets to a noncharita	able exempt organization					16(1)		X
	(2)	Purchases of assets from a no	oncharitable exempt orga	nization				1b(2)		X
	(3)	Rental of facilities, equipment,	or other assets					1b(3)		X
	(4)	Reimbursement arrangements	3					1b(4)		X
	(5) l	oans or loan guarantees						1b(5)	<u> </u>	X
	(6) f	Performance of services or mo	embership or fundraising	solicitations				1b(6)		Х
(c Shari	ng of facilities, equipment, ma	ailing lists, other assets, o	or paid employ	yees			<u>1c</u>	<u> </u>	X
(answer to any of the above is			, ,			-	sets,	
		rvices given by the reporting f nn (d) the value of the goods,			ess man ian market	value ili aliy tialisa	action of Sharing arrang	ement, show in		
(a)	Line no	(b) Amount involved	(c) Name of nor		empt organization	(d) Desc	ription of transfers, transact	ions, and sharing ar	rangeme	ants
			-	N/A_						
_										
_	_									
_										
			<u> </u>							
-										
· _										
28		e foundation directly or indirect				janizations describ	oed		Γŧ	ភ
		ction 501(c) of the Code (other) or in section	52/7			Yes	X	☐ No
	<u>ii ye</u>	s," complete the following sch (a) Name of org) Type of organization	n	(c) Description of	relationship		
		N/A	ganization		i) Type of Organizatio		(c) Description of	CIALIOTISTIP		
		N/A				- 				
		<i>-</i>								
	1	penalties of perjury, I declare that I I	have examined this return, inc er than taxpayer or fiduciary)					pelief it is true corre	ect,	
	and cor	Secretarion of preparer (our	er than taxpayer or hodiciary)	is based on an ii	normation of which prep					
a)		White Co	8		1/27/10		ECTOR			
ě	S	ignature of officer or trustee			Date	Title		T		
Sign Here	,° ≥	Preparer's signature	ara Home	b.:-0-	CPA	Date 1 • 21 • 10	Check if self-	Preparer's identif	ying nur	nber
Ś	Paid Preparer's Use Only	Firm's name (or yours BEAI	L BARCLAY 8	COMP	NY, PLC,	CPA	employed ► L	<u> </u>		
	rep P	firm's name (or yours BEAL firself-employed), P. C). BOX 10148		ALVI, PLIC,	CFA	FIIN			
	ر ته	address and ZIP code FORT		729 <u>1</u>	7		Phone no	(479) 48	4-5	740
	L	101(1	· DITTIL MIN	, <u>, , , , , , , , , , , , , , , , , </u>	, 		I Holic NO (Form 990		
										/

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	_1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVID EN DS	COLUMN (A) AMOUNT	
MERRILL LYNCH MERRILL LYNCH	-		21. 1,067.		0.	1,0	21. 67.
TOTAL TO FM 990-PF, PART I, L	N 4		1,088.	0.		1,088	
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
LEGAL FEES		2,205.		0.		0.	0.
TO FM 990-PF, PG 1, LN 16A		2,205.		0.		0.	0.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		761.		0.		0.	0.
TO FORM 990-PF, PG 1, LN 16B		761.		0.		0.	0.
FORM 990-PF O	THER	PROFES:	SIONAL F	EES	- 2 - 15 - 1	STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-			
							
INVESTMENT FEES		150.		0.	(0.	0.

TAX	ES	STATEMENT 5			
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
115.	0.	0.	0.		
115.	0.	0.	0.		
	EXPENSES PER BOOKS	PER BOOKS MENT INVEST- MENT INCOME 115. 0.	(A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME 115. 0. 0.		

EXPLANATION

SECRETARY OF STATE FOR ARKANSAS DOES NOT REQUIRE AN ANNUAL RETURN TO BE FILED WITH THEM

	VIII - LIST OF OFFICERS, DIRECTORS STATEMENT TRUSTEES AND FOUNDATION MANAGERS						
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	• •	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT			
THOMAS C. MUELLER TRUST P.O. BOX 5206 FORT SMITH, AR 72903	DIRECTOR 0.00	0.	0.	0.			
CHARLES N. WOHLFORD 64 HAVEN DRIVE FORT SMITH, AR 72901	DIRECTOR 0.00	0.	0.	0.			
ROBERT G. HENDERSON P.O. BOX 83 EDGEMONT, AR 72044	DIRECTOR 0.00	0.	0.	0.			
TIM SHIELDS 7707 TULLAMORE FORT SMITH, AR 72903	DIRECTOR 0.00	0.	0.	0.			
JAMES D. WALCOTT 3415 LEIGH'S HOLLOW LANE FORT SMITH, AR 72903	DIRECTOR 0.00	0.	0.	0.			

TCM FOUNDATION			71-0813230				
JEANNE ANN KING 14508 MAPLELAKE DRIVE EDMOND, OK 73013	DIRECTOR 0.00	0.	0.	0.			
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.			

Form **8868**

(Rev April 2009)

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

	The despirate approach for each feature						
• If yo	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this t complete Part II unless you have already been granted an automatic 3-month extension on a previously file	-	m 8868.	▶ 🗓			
Part	_ 						
A corp	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete		> [
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ncome tax returns	exten	sion of time				
noted (not au you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic stomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if	(1) you want sted Form 99	t the additional 00-T Instead,			
Type o	Name of Exempt Organization	Emp	oyer identif	ication number			
•	TCM FOUNDATION	7	1-0813	230			
File by the due date filing you	Number, street, and room or suite no. If a P O. box, see instructions P.O. BOX 3726						
return S instruction	ee						
Check	type of return to be filed (file a separate application for each return)						
	Form 990	27 69					
Tele ● If th	CHARLES N. WOHLFORD be books are in the care of ▶ 2408 SOUTH 51ST, SUITE C - FORT SMITH, be books are in the care of ▶ 2408 SOUTH 51ST, SUITE C - FORT SMITH, be phone No ▶ 479-646-6540 FAX No ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	s is fo	r the whole g				
	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt FEBRUARY 15 , 2010 , to file the exempt organization return for the organization named a s for the organization's return for a calendar year or a calendar year and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2010 , to file the exempt organization return for the organization named a story and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2010 , to file the exempt organization return for the organization named a story and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2010 , to file the exempt organization return for the organization named a story and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2010 , and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2010 , and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , 2008 , and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , and an automatic 3-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15 , and an automatic 3-months for a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation required to file Form 990-T) extension of time and a corporation file Form 990-T) extension of time and a corporation file Form 990-T).		The extension	on			
2	If this tax year is for less than 12 months, check reason		Change in a	ccounting period			
	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	\$	0			
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	_3a_	_Ψ				
	tax payments made Include any prior year overpayment allowed as a credit	3b	\$	0			
	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)	2-	¢	0			
	See instructions	3c	5 for =====	O ont instructions			
	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879- ——					
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form	8868 (Rev 4-200)			

823831 05-26-09