

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

2008

For	calend	dar year 2008, or tax year beginning 8/01/08 ,	and ending 7/3	1/09						
G	Check	all that apply Initial return Final return	rn Amend	ed return		Address change		Name change		
Us	e the IF	Name of foundation EMERSON KAMPEN FOUNDATION	A Employer identification number 35-1694614							
0 +	label. herwis	6 /6 TOXATE DIDELLA 60 BD11	STEE		B Telephone number (see page 10 of the in					
Oi	print	Number and street (or P O box number if mail is not delivere		Room/suite		6-223-2872	io oi ine	msuuctions)		
	r type.									
	Speci		C If exemption application is pending, check here D 1. Foreign organizations, check here							
	truction	ony or torni, orang and an obdo	3062			oreign organizations mee		- L		
—	Check	type of organization: X Section 501(c)(3) exempt private				5% test, check here and a	U	mputation >		
Ö			le private foundation			ate foundation status was		• —		
L		rket value of all assets at end J Accounting method		rual		r section 507(b)(1)(A), che				
		from Part II, col (c), Other (specify)	E		F If the	foundation is in a 60-mon	ith termii	nation		
	ne 16)	·	be on cash basis)			r section 507(b)(1)(B), che				
	art I	Analysis of Revenue and Expenses (The	(a) Revenue and	<u> </u>			(d) [Disbursements		
-		total of amounts in columns (b), (c), and (d) may not necessarily	expenses per	(b) Net inv	estment	(c) Adjusted net		or charitable		
		equal the amounts in column (a) (see pg 11 of the instructions))	books incom		me	income	purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)	201,765				100	SIT DUSIS OTHY)		
	2	Check ▶ ☐ If the foundation is not required to attach Sch B		<u> </u>	>					
	3	Interest on savings and temporary cash investments	541		541		·			
	4	Dividends and interest from securities	174,942	17	74,942					
	5a	Gross rents						····		
a)	Ь	Net rental income or (loss)								
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	27,785				· 			
Š	b	Gross sales price for all assets on line 6a 778, 275								
æ	7	Capital gain net income (from Part IV, line 2)		4	17,275					
	8	Net short-term capital gain				0		,		
	9	Income modifications								
7 00	10a	Gross sales less returns & allowances			_					
SCANNED s	ь	Less. Cost of goods sold								
	С	Gross profit or (loss) (attach schedule)					<u> </u>			
筦	11	Other income (attach schedule)						···		
園—	12	Total. Add lines 1 through 11	405,033	22	2,758	0				
S NWF © Expenses	13	Compensation of officers, directors, trustees, etc	1,299				F			
₩ SE	14	Other employee salaries and wages				TECEIV	EU			
Z 9	15	Pension plans, employee benefits	99			10		그었		
∞ <u>₩</u>	16a	Legal fees (attach schedule) SEE STMT 2	2,360			JAN 19	010	0		
		Accounting rees (attach schedule)	4,325		4 055			S		
ati a	C	Other professional fees (attach schedule) STMT 4	24,975	2	4,975		- 1 1 1			
St S	17	Interest	7 000		-	LOGDEN				
Ē	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 5	7,000							
톭	19	Depreciation (attach schedule) and depletion								
ĕ	20	Occupancy Travel, conferences, and meetings			-					
힏	21	Printing and publications								
e e	23	Other expenses (att sch.) STMT 6	3							
Ę.	23	Total operating and administrative expenses.								
rat	-	Add lines 13 through 23	40,061	2	4,975			0		
${\mathfrak g}_{{\mathfrak g}}$ ${\mathfrak g}_{{\mathfrak g}}$ Operating and Administrative	25	Contributions, gifts, grants paid	270,000		, _ , _			270,000		
O	26	Total expenses and disbursements. Add lines 24 and 25	310,061	2	4,975	0		270,000		
	27	Subtract line 26 from line 12	,		_,_,_					
	a	Excess of revenue over expenses & disbursements	94,972							
	b	Net investment income (if negative, enter -0-)			7,783					
	C	Adjusted net income (if negative, enter -0-)		<u></u>		0				

instructions Also, see page 1, item I)

Grants payable Deferred revenue

Other liabilities (describe

Accounts payable and accrued expenses

Mortgages and other notes payable (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

6,834,555

5,602,360

23	Total liabilities (add lines 17 through 22)	0	0
	Foundations that follow SFAS 117, check here		
24 25 26	and complete lines 24 through 26 and lines 30 and 31.		
24	Unrestricted		
25	Temporarily restricted		
26	Permanently restricted		
	Foundations that do not follow SFAS 117, check here X and complete lines 27 through 31.		
27	Capital stock, trust principal, or current funds	5,470,248	5,487,668
- 1	Paid-in or capital surplus, or land, bldg, and equipment fund		
28 29 30	Retained earnings, accumulated income, endowment, or other funds	1,364,307	114,692
2 30	Total net assets or fund balances (see page 17 of the		
	instructions)	6,834,555	5,602,360
2 31	Total liabilities and net assets/fund balances (see page 17		
	of the instructions)	6,834,555	5,602,360

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) 6,834,555 2 Enter amount from Part I, line 27a 2 94,972 3 3 Other increases not included in line 2 (itemize)▶ 6,929,527 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 8 1,327,167 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 5,602,360

Form 990-PF (2008)

5,602,360

17

18

19

20

21

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

Form 990-PF (2008)

241,345

270,000

7

8

Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

the Part VI instructions on page 18

Form	n 990-PF (2008) EMERSON KAMPEN FOUNDATION 35-1694614			Page 5						
	art VII-A Statements Regarding Activities (continued)			rage 5						
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	T	Π	Τ-						
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11	i	x						
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	<u> </u>		 						
	August 17, 2008?	12		x						
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	 						
	Website address ► N/A									
14										
	Located at ► INDIANAPOLIS, IN ZIP+4 ► 1058	n								
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041— Check here			L						
	and enter the amount of tax-exempt interest received or accrued during the year									
P	art 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.	Τ	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?									
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		Ì							
	disqualified person? Yes X No									
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?									
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No	İ		:						
	(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)?									
	(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)									
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-		l						
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		X						
_	Organizations relying on a current notice regarding disaster assistance check here									
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	١.								
2	were not corrected before the first day of the tax year beginning in 2008? N/A Taxes on follows to distribute means (coston 4040) (does not explicate and the foundation was a second follows).	1c		 						
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)):	ĺ		·						
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and									
a	A B 1300 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C	•								
	6e, Part XIII) for tax year(s) beginning before 2008? If "Yes," list the years ▶ 20 , 20 , 20 , 20	l								
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 page 20 of the instructions)	2b		-						
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here									
	▶ 20 , 20 , 20 , 20									
За	Did the foundation hold more than a 2% direct or indirect interest in any business									
	enterprise at any time during the year?									
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or			1						
	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			1						
	foundation had excess business holdings in 2008) N/A	3b								
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		- 1							
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4ь		X						

4b X Form 990-PF (2008)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form	990-PF (2008)	EMERSON	KAMPEN	FOUNDATION		35-1	69461	4					Pa	age 6
(1) Carry on propagands, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other smilar purposes? (4) Provide a grant to an individual for travel, study, or other smilar purposes? (5) Provide a grant to an individual for travel, study, or other smilar purposes? (6) Provide a grant to an organization other than a charitable, etc., organization described in section 590(e)(1), (2), or (6), or section 4940(f)(2)? (see page 22 of the instructions) (5) Provide or any purpose of their than relegious, charitable, section (1) than it is a section 590(e)(1), (2), or (6), or section 4940(f)(2)? (see page 22 of the instructions) (6) Provide for any purpose of their than relegious, charitable, section (1) than it is a section 590(e)(1), (2), or (6), or section 4940(f)(2)? (see page 22 of the instructions)? (7) If a lary answer is "ves" to 58(1), (3), day or fire transactions for the purposes of their foundation of the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (8) If vesting the foundation diverse of the foundation of the foundatio	Pa	rt VII-B	Statements	Regarding	Activities for Whicl	h Form	4720 May Be	Require	d (c	ontin	ued)				
California Cal	5a	During the year of	did the foundati	on pay or incur	any amount to									[
directly or indirectly, any voter registration drive? (3) Provide a grant to a not would all for tave, study, or other similar purposes? (4) Provide a grant to a not on organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) (5) Provide for any purpose, or for the prevention of cruety to children or animals? (6) Provide for any purpose, or for the prevention of cruety to children or animals? (7) If you answers is "Yes" to 58(1)-(5), dat any of the transactions fall to quality under the exceptions described in Regulations sections 53 4945 or in a current notice regarding diseaster assistance check here (8) If the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (9) If Yes, "attach the statement required by Regulations section 53 4945-5(d) (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a parisonal benefit contract? (1) Ves, "attach the statement required by Regulations section 53 4945-5(d) (1) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a parisonal benefit contract? (1) Use answered "ves" to 64, also fie Form 8870 (2) If you answered "ves" to 64, also fie Form 8870 (3) If you answered "ves" to 64, also fie Form 8870 (4) If you answered "ves" to 64, also fie Form 8870 (5) If you answered "ves" to 64, also fie Form 8870 (6) If you answered "ves" to 64, also fie Form 8870 (7) If you answered "ves" to 64, also fie Form 8870 (8) If you answered "ves" to 64, also fie Form 8870 (9) If you and fund the foundation received any proceeds or have any net income attributable to the transaction? (9) Name and address of each employee paid more than \$50,000 (10) Tills, and average (10) Congression (10		(1) Carry on pro	paganda, or otl	nerwise attemp	t to influence legislation (s	section 49	945(e))?			Yes	X	No			
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide or grant to an organization offset than a chalifable, scientific, literary, or education purposes, of for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charable, scientific, literary, or educational purposes, of for the prevention of cruelty to children or animals? b It any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes," attach the statement required by Regulations section 53 4945-5(d). So Did the foundation, dump the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to be, also file Form 8870 A tarny time duming the tax year, was the foundation aparty to a prohibited tax shelter transaction? 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 page 22 of the instructions). (a) Name and address of each employees (other than those included on line 1—see page 23 of the instructions). (b) Tits, and exception of the instructions. (c) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (d) Combinists to employee barding place and efforts of the page 22 of the instructions. (d) Combinists to employee and exception of the page 22 of the instructions. (d) Compensation of the high		(2) Influence the	e outcome of ar	y specific publi	c election (see section 49	955); or to	carry on,								
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide or grant to an organization offset than a chalifable, scientific, literary, or education purposes, of for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, charable, scientific, literary, or educational purposes, of for the prevention of cruelty to children or animals? b It any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If "Yes," attach the statement required by Regulations section 53 4945-5(d). So Did the foundation, dump the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to be, also file Form 8870 A tarny time duming the tax year, was the foundation aparty to a prohibited tax shelter transaction? 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 page 22 of the instructions). (a) Name and address of each employees (other than those included on line 1—see page 23 of the instructions). (b) Tits, and exception of the instructions. (c) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (d) Combinists to employee barding place and efforts of the page 22 of the instructions. (d) Combinists to employee and exception of the page 22 of the instructions. (d) Compensation of the high		directly or inc	directly, any vo	ter registration	drive?					Yes	X	No			
section 506(a)(1), (2), or (3), or section 4940(d)(2) (see page 22 of the instructions)		(3) Provide a gra	ant to an individ	lual for travel, s	tudy, or other similar purp	ooses?			П	Yes	X	No			
section 506(a)(1), (2), or (3), or section 4940(d)(2) (see page 22 of the instructions)		(4) Provide a gra	ant to an organ	zation other tha	an a charitable, etc , orga	nization o	described in		_		_			1	
b If any answer is "Yes" to 5a(1)-(5), day ny of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? In organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If yes, and the feature of the grant? If you answered "yes," attach the statement required by Regulations section 53 4945-5(d). But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "yes" to 8b, also file form 8870 A tan by the during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yea, did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "yes" to 8b, also file form 8870 A tan by the during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yea, did the foundation receive any proceeds or have any net income attributable to the transaction? If yea, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address Coundation managers and their compensation (see page 22 of the instructions). If of the instructions of the instructions of the instructions of the instructions of the instructions. If none, enter "NONE." Compensation of five highest-paid		section 509(a	a)(1), (2), or (3)	, or section 494	10(d)(2)? (see page 22 of	the instri	uctions)			Yes	X	No			
b If any answer is "Yes" to 5a(1)-(5), day ny of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? In organizations relying on a current notice regarding disaster assistance (see page 22 of the instructions)? If yes, and the feature of the grant? If you answered "yes," attach the statement required by Regulations section 53 4945-5(d). But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "yes" to 8b, also file form 8870 A tan by the during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yea, did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "yes" to 8b, also file form 8870 A tan by the during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yea, did the foundation receive any proceeds or have any net income attributable to the transaction? If yea, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address Coundation managers and their compensation (see page 22 of the instructions). If of the instructions of the instructions of the instructions of the instructions of the instructions. If none, enter "NONE." Compensation of five highest-paid		(5) Provide for a	any purpose oth	er than religiou	s, charitable, scientific, lit	erary, or									
b If any answer is Yes' to Sa(1)-(5), aid 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 page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is Yes' to question Sa(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes, attach the statement required by Regulations section 53 4945-5(d). But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered 'Yes' to be, last offer form 8870 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Pald Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). Compensation of five highest-paid employees paid more than \$50,000 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees paid more than \$50,000 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions). Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the Instructions).		educational p	purposes, or fo	r the prevention	of cruelty to children or a	anımals?			\Box	Yes	X	No			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is 'Yes' to question 53(4), does the foundation daim exemption from the tax because it maintained expenditure responsibility for the grant? If 'Yes, 'Latch the statement required by Regulations section 53 4945-5(d). But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered 'Yes' to 6b, also file Form 8870 A tar it med during the tax year, was the foundation a party to a prohibited tax shelter transaction? 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 page 22 of the instructions). (a) Name and address (b) Title, and average (c) Compensation (flort pide, entire of the promote	b	-	-	=			the exceptions d	escribed in						ł	
Organizations relying on a current notice regarding disaster assistance check here of if the answer is "Yes" to question 5a(4), does the foundation dame exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 494-5(d). But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to bb, also file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, sid the foundation receive any proceeds or have any net moorne attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average (c) Congression of the provided position of the highest-paid employees (other than those included on line 1—see page 23 of the instructions). (a) Name and address of each employee paid more than \$50,000 NORE Total number of other employees paid over \$50,000		•			•	•	•		ns)?		N	I/A	5b	ı	
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? Yes		•			- -		•			•	П	,			
because it maintained expenditure responsibility for the grant? 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? b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b If yes, diff the foundation receive any proceeds or have any net income attributable to the transaction? The 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 page 22 of the instructions). (a) Name and address (b) Tills and average (fine the prohibition of party of the instructions). (c) Compensation (fine the prohibition of party of the instructions). (a) Name and address (a) Name and address (b) Tills and average (c) Tolls and average (c) Compensation (c)	c	J		•	•					•					
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? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870 7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction? 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 page 22 of the instructions). (a) Name and address (b) Tide, and average hours per week event be position. (d) Compensation (find paid, enter paids effect by paids and average hours per week event be position. (e) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Tide, and average hours per week event be position. (c) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Tide, and average devoted by position. (c) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (d) Contributions to compensation of five highest-paid employees paid more than \$50,000 (e) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (d) Contributions to compensation of five highest-paid employees paid expense the page 25 of the instructions). (e) Compensation of five highest-paid employees paid employees (other than \$50,000 (b) Tide, and average (c) Compensation (d) Contribu	_							N/A	П	Yes	П	No			
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered 'Yes' to 6b, also file Form 8870 7a At any time during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? 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 page 22 of the instructions). (a) Name and address (b) Title, and werage where the party of the instructions of the party of the instructions of the instruct				-	•	5(d)		-0,	ш		اب				
on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 page 22 of the instructions). (a) Name and address (b) Title and everage overeted to posebon (lift and property party in the property party in the instructions). PARRADA XAMPEN (a) Name and address (b) Title and everage overeted to posebon (lift and property party in the instructions). (c) Compensation (lift contractors (lift) Contractors (6a						v nremiums								
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870 a 1 any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 page 22 of the instructions). (a) Name and address (b) Tills, and seep and their compensation (for the pass and defend position of the highest-paid employees (other than those included on line 1—see page 23 of the Instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Tills, and average devoted to position of the highest-paid employees (other than those included on line 1—see page 23 of the Instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Tills, and average devoted to position of the instructions of the pass and defend compensation of the pass and defend compensation of the pass and defendent compensation of the pass and defen	va			car, receive arr	ranas, anostry or manes	ny, to pa	y premiums		\Box	Voc	\mathbf{x}	No		1	
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 sheller transaction?	h	•		ear nav nremii	ims directly or indirectly	on a ner	sonal banafit conti	act?	Ч	103			Sh.		x ·
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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 page 22 of the instructions). (a) Name and address (b) Title, and average (c) Compensation (in on paid, enter organization and deferred compensation. (a) Name and address (b) Title, and average (c) Compensation (in on paid, enter organization and deferred compensation. (c) Compensation (in on paid, enter organization and deferred compensation. (d) Contributions (in on paid, enter organization and deferred compensation. (e) Expense (c) Compensation. (f) Contributions (in on paid, enter organization. (e) Compensation. (f) Contributions (in on paid, enter organization. (g) Contributions (in on paid, enter organization. (g) Contributions (in on paid, enter organization. (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). (g) Compensation of five highest-paid employees (other than those included on line 1—see page 23 of t					•	on a pers	sonai beneni comi	act					<u> </u>		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	70	•				d tay aba	ltor transportion?		\Box	Vaa	∇	Na			
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 page 22 of the instructions). (a) Name and address (b) Tills, and average (c) Compensation (f) Compensation (f) Compensation (f) Compensation (f) India, enter (f) India	/a	•						nn?	ш	168			76		
And Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Title, and average (boots per week devided to position (fill not paid, enter employee president enter the part of the									ahl	v Dair					
1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (a) Name and address (b) Tills, and average hours per work (revised to position of the plant and deferred compensation of the highest-paid employees (other than those included on line 1—see page 23 of the instructions). (b) Tills, and average hours per work (evolved to position of the highest-paid employees (other than those included on line 1—see page 23 of the instructions). (c) Compensation (c) Compensat	Г				s, Directors, Truste	es, rot	inuation man	ayers, m	y	y Fait	J E11	ipicy	= = 5,		
(a) Name and address (b) Tilts, and overage hours prevened evolved to position (c) Compensation (d) Contributions to endoyee benefit plats add digited allowances (co.) EARBARA KAMPEN WEST LAPAYETTE CO-TRUSTEE 168 CREIGHTON RD IN 47906 1 1,299 0 0 0 JOANIE DUNHAM MULLICA HILL CO-TRUSTEE 101 CROMWELL DR NJ 08062 1 0 0 0 0 2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Tile, and average hours per week devoted to position (c) Compensation (d) Contributions to exployee benefit plats and defired allowances (e) Expense account, other allowances (e) Expense account, other allowances (c) Compensation (c) Compensation (d) Contributions to exployee benefit plats and defired compensation (e) Expense account, other allowances (e) Expense accoun					managare and their on	mnonost	ion (see none 22	of the inet							
BARBARA KAMPEN WEST LAFAYETTE CO-TRUSTEE 168 CREIGHTON RD IN 47906 1 1,299 0 0 JOANIE DUNHAM MULLICA HILL CO-TRUSTEE 101 CROMWELL DR NJ 08062 1 0 0 0 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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) Continutions to employee benefit plans and deferred compensation. NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Continutions to employee benefit plans and deferred compensation. (e) Expense account, other allowances.	<u></u>	ist all officers, u	irectors, truste	es, louidation	managers and their con	inpensati				(d)	Contrib	outions to	(0)	Evnon	
BARBARA KAMPEN WEST LAFAYETTE CO-TRUSTEE 168 CREIGHTON RD IN 47906 1 1,299 0 0 JOANIE DUNHAM MULLICA HILL CO-TRUSTEE 101 CROMWELL DR NJ 08062 1 0 0 0 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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) Continutions to employee benefit plans and deferred compensation. NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Continutions to employee benefit plans and deferred compensation. (e) Expense account, other allowances.			(a)	Name and addres	s		hours per week	(If not paid,	enter	en plar	iployee is and c	benefit leferred	acc	ount, of	ther
168 CREIGHTON RD IN 47906 1 1,299 0 0 JOANIE DUNHAM MULLICA HILL CO-TRUSTEE 101 CROMWELL DR NJ 08062 1 0 0 0 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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 NONE (c) Compensation (d) Contributions to employee benefit plans and deferred allowances (e) Expense account, other allowances Total number of other employees paid over \$50,000		DRADA KAMDEN	· · · · · · · · · · · · · · · · · · ·		WRST LAVAVRTER					 '	ompen	Saliuri	a!	OWAIIC	55
JOANTE DUNHAM MULLICA HILL 101 CROMWELL DR NJ 08062 1 0 0 0 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Tille, 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			n				1		1 20			0			0
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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			-				CO-TRIISTER		-,,	1					
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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 enployee benefit plans and deferred compensation (e) Expense account, other allowances NONE Total number of other employees paid over \$50,000							1			١		0			n
(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 paid more than \$50,000 (e) Expense account, other allowances NONE Total number of other employees paid over \$50,000		1 CROINIDE DK	<u> </u>		NO OOOU					┪	_				
(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 paid more than \$50,000 (e) Expense account, other allowances NONE Total number of other employees paid over \$50,000															
(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 paid more than \$50,000 (e) Expense account, other allowances NONE Total number of other employees paid over \$50,000										1	_				
(a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoled to position (c) Compensation (d) Contributions to employee bear account, other allowances NONE (e) Expense account, other allowances Total number of other employees paid over \$50,000										1					
(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 paid more than \$50,000 (e) Expense account, other allowances NONE Total number of other employees paid over \$50,000		Compensation	of five highest-	naid employee	s (other than those incl	uded on	line 1—see nage	23 of the ir	etru	ctione'					
(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	-	-	_	paid cilipioyee		adou on	inic i see page	20 01 1116 11		otions,	,.				
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and verage hours per week devoted to position who is per we		II III III II II					0.5.70			(4)	Contabi	itions to			
NONE devoted to position devoted to position plans and deterred compensation allowances Total number of other employees paid over \$50,000		(a) Nam	ne and address of	each employee p	aid more than \$50,000	Ì	hours per week	(c) Compe	nsation	, em	ployee t	penefit			
Total number of other employees paid over \$50,000						ı	devoted to position	, ,,		prans			all	owance	3 \$
Total number of other employees paid over \$50,000	NO.									+					
	240														
					<u> </u>					+					
						ł				1					
										+-					
						l									
										+-					
						 {				+-					
						ŀ	İ								
	Total	number of other	employees para	Lover \$50,000									_	r^-	—
	, Oldi	Trainibol of other 6	cimpioyees paid	r Gver wathout		-				-		Ec		-PF	2000

Form 990-PF (2	008) EMERSON KAMPEN FOUNDATION	35-1694614	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation	ındation Managers, Highly Paid En	
.	and Contractors (continued)		
3 Five high	est-paid independent contractors for professional services (see page		NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
			<u> </u>
Total number of	others receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant stati and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A			
,			
			İ
2			
3			
			
4			
Part IX-B	Summary of Program-Related Investments (see pa	age 23 of the instructions)	
Describe the two	largest program-related investments made by the foundation during the tax year o		Amount
1 N/A			
2 .			
All other program	n-related investments. See page 24 of the instructions		
3	Training introduction obe page 24 of the mondologic		
-			
Total Add lines	1 through 3		

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2008)

Pa	art XIII Undistributed Income (see page 26 of	the instructions)			
	,		(a)	(b)	(c)	(d)
1	Distributable amount for 2008 from Part XI,		Corpus	Years prior to 2007	2007	2008
	line 7		······································			299,757
2	Undistributed income, if any, as of the end	of 2007				
a		0. 2007			333,841	
b		20			3337041	
3	Excess distributions carryover, if any, to 20					
		06.				
a						
þ					į	
C						
d						
е						
f	Total of lines 3a through e					
4	Qualifying distributions for 2008 from Part X	(II,				
	line 4 ▶\$ 270,000					
а	Applied to 2007, but not more than line 2a				270,000	
ь	Applied to undistributed income of prior year	rs (Election	- """			
	required—see page 26 of the instructions)		_			
С	Treated as distributions out of corpus (Elect	tion				
	required—see page 26 of the instructions)					
d	Applied to 2008 distributable amount		· · · · · · · · · · · · · · · · · · ·			
	Remaining amount distributed out of corpus			*		· · · · · · · · · · · · · · · · · · ·
5	Excess distributions carryover applied to 20		-			
,	• ''					
	(If an amount appears in column (d), the sa	ille				
_	amount must be shown in column (a))					
6	Enter the net total of each column as					\$
	indicated below:	_	-			
	Corpus Add lines 3f, 4c, and 4e Subtract li	ine 5				
b	Prior years' undistributed income. Subtract					
	line 4b from line 2b					
C	Enter the amount of prior years' undistribute	ed				
	income for which a notice of deficiency has	been				
	issued, or on which the section 4942(a) tax	has				
	been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instructions					
е	Undistributed income for 2007 Subtract line	•		,		
	4a from line 2a Taxable amount-see page	,				
	27 of the instructions				63,841	
f	Undistributed income for 2008. Subtract line	es				
	4d and 5 from line 1. This amount must be			1		
	distributed in 2009					299,757
7	Amounts treated as distributions out of corp	us				
•	to satisfy requirements imposed by section	us				
	•	ha				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the structure)	ile				
_	instructions)					
8	Excess distributions carryover from 2003 no					
	applied on line 5 or line 7 (see page 27 of th	ie				
	instructions)					
9	Excess distributions carryover to 2009.		ļ			
	Subtract lines 7 and 8 from line 6a					· · · · · · · · · · · · · · · · · · ·
0	Analysis of line 9.			T		
а	Excess from 2004					
b	Excess from 2005					
С	Excess from 2006					
d	Excess from 2007					
е	Excess from 2008					
			 			

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

The name, address, and telephone number of the person to whom applications should be addressed

N/A

The form in which applications should be submitted and information and materials they should include:

N/A

c Any submission deadlines

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

N/A

Form **990-PF** (2008)

Part XV Supplementary Information (C				
3 Grants and Contributions Paid During th	e Year or Approved for F	uture 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) a Paid during the year YMCA CAMP TECUMSEH 1950 S 18TH STREET LAFAYETTE IN 47905	NONE	501(C)3 DEVELOPMENT	PROGRAMS	150,000
INDIANA UNIVERSITY 400 E 7TH STREET POPLARS BLOOMINGTON IN 47405	NONE	501(C)3 WOMEN	S HEALTH	120,000
Total		 	≥ 3a	270,000
Approved for future paymentN/A			!	
N/A	l			
	,		Ţ	
	İ		ľ	
!]	
,			1	
]	
i				
Total			▶ 3b	
ı Olai				- 000 DE (000

Part XVI-A

Enter gross amounts unless otherwise indicated

Unrelated business income

Excluded by section 512, 513, or 514

(e)

1	Program se	rvice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
•	•						
					1		
					1		
	f				1		
		nd contracts from government agencies					
2	•	dues and assessments					
		savings and temporary cash investments			14	541	
		nd interest from securities		_	14	174,942	
		ncome or (loss) from real estate		······································			
-		anced property					
		t-financed property					
6		ncome or (loss) from personal property					
		tment income					
		s) from sales of assets other than inventory			14	47,275	-19,490
		or (loss) from special events					
		or (loss) from sales of inventory					
	-	ue a					
	e						
12	Subtotal Ac	dd columns (b), (d), and (e)		0		222,758	-19,490
13	Total. Add l	ine 12, columns (b), (d), and (e)	\ <u></u>			13	
		in line 13 instructions on page 28 to verify calculati	ons)			_	
F	art XVI-B	Relationship of Activities to the A	ccomplishme	nt of Exempt P	urpose	S	
	Lin <u>e</u> No.	Explain below how each activity for which income the accomplishment of the foundation's exempt p					
	lacktriangledown						
_		page 28 of the instructions)					
_	N/A						
_							

om	1,990-PF	(200)	8) EMERSON E	CAMPEN	FOUNDATION		<u> 35-</u>	<u> 1694</u>	614			Pa	ige 1:
	art XVII	1		arding Tr	ansfers To and Transact	ions a	nd Rela	tionsh	ips With	Noncha	ritable		
_	Did the				ge in any of the following with an	, other c	roapizatio	n deceri	nod .			Yes	No
1		_	-		on 501(c)(3) organizations) or in		-				<u> </u>	162	140
				or triair Section	on sor(c)(s) organizations) of in	SECTION	JZI, ICIALII	ig to poi	ilicai				
	organiza					_4							
а			m the reporting found	ation to a no	oncharitable exempt organization	01.					4 (4)		7.7
	(1) Cas										1a(1)		X
	(2) Oth	er as	sets								1a(2)		X
b	Other tra	ansa	ctions									-	_
	(1) Sale	es of	assets to a noncharita	able exempt	organization						1b(1)		<u> </u>
	(2) Pur	chas	es of assets from a no	oncharitable	exempt organization						1b(2)		_X
	(3) Ren	ital o	f facilities, equipment,	or other ass	sets						1b(3)		X
	(4) Reir	mbur	sement arrangements	3							1b(4)		X
	(5) Loa	ns or	loan guarantees								1b(5)		X
	(6) Perf	forma	ance of services or me	embership o	r fundraising solicitations						1b(6)		X
С	Sharing	of fa	cilities, equipment, m	ailing lists, o	ther assets, or paid employees						1c		X
d	If the an	swei	to any of the above is	s "Yes," com	plete the following schedule Co	lumn (b)	should al	ways she	ow the fair m	narket			
	value of	the	goods, other assets, o	or services q	iven by the reporting organization	n If the i	foundation	receive	d less than f	air market			
			=	-	nt, show in column (d) the value								
_	a) Line no		(b) Amount involved		of noncharitable exempt organization						haring arrange	ments	
N/			(b) / miles in member	(0)	or in the state of	1	, <u> </u>		roror, trainout	Morio, aria o	naming arrange		
		$\neg \neg$				-							_
						1							
		$\neg \uparrow$				+						-	
		\dashv				+							
						- 							
		\dashv		l			_						
						+							
				<u> </u>		+						-	
						_							
2a	Is the fo	unda	ition directly or indirec	tly affiliated	with, or related to, one or more to	x-exem	pt organiza	ations					
	describe	ed in	section 501(c) of the	Code (other	than section 501(c)(3)) or in sect	ion 527	?					s X	No
b	If "Yes,"	com	plete the following sci	hedule									
		(a)	Name of organization		(b) Type of organization				(c) Description	on of relation	nship		
	N/A					1	_		<u></u>				
												-	
													
						_							
						+							
T	Lindas no	naltia	o of marrier. I double a the	I baya ayamı	and the natural radiation and radiation		les and stat		nd 4n 4h n h na4		lades and		
ĺ	belief, it is	name s true	s of perjury, i declare that , correct, and complete C	Pedaration of p	ned this return, including accompanyir preparer (other than taxpayer or fiducia	ary) is bas	sed on all inf	ements, a ormation	of which prepa	arer has any	knowledge		
ŀ	$\mathbf{k} \mathbf{V}$	/]	· (L)		V/ 1/a	10		k	CO MDT	rempp	-		
Į			of officer or trustee		Date	<i>[] [D_</i>		Tit	CO-TRU	DIFF_			
و ا	- Sign	anne	or officer or trustee		Date				<u> </u>				
₽│)		_		Date				Preparer's identify	/ing	
ا ء	.o _		/ /	$\overline{}$	11 0/1				Check if		number (see Sigi	nature o	ח
Sign Here	id July	Pre	parer's	_ } /	1 L/2/1/2. 24	21			self-employe		page 30 of the ins		•
رو	Paid Preparer's Use Only	sig	nature /	1 Wu	· New, UT	M	12/1	5/09	-		<u> P00238</u>	<u>605</u>	
- 1	P. S.	Fire	m's name (or yours if		HOMPSON LLP						_		_
- [sel	f-employed), addres	PO BOX							<u>35-205</u>		
{									Phone no	765-42	B-5	000	