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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

Δ	For th	e 2008 c	alendar	Vear or tax	x year begin	nuna .	10/01	2008 2	nd ending	0	/30	. 20 09	
							OUNDATION,		nu enung			er identification	number
$\overline{}$		applicable	Please use IRS	Doing Bus		OKKELL F	DUNDATION,	INC.				146770	
		change	label or print or			hav if mail is not	delivered to street add	\	D		E Telepho		
۱ ⊢	Name c	hange	type		•		delivered to street add	iressj	Room/suite	,	l '		
\sqcup	nitial ref	turn	See Specific		ADFORD P						(417)	269-725	10
	Termina:	tion	Instruc-	City or tov		ountry, and ZIP	+ 4				f		
	Amende	d return	tions.		IELD, MO						G Gross rec	eipts \$	0.00
	pplication	n pending	F Nar	me and addres	ss of principal	officer TOE	DD SCHAIBLE			H(a) Is the	s a group return i	for affiliates? Yes	☑ No
			1300	BRADFOR	D PARKW	AY SPRI	NGFIELD, MO	65804				cluded? Tyes	
ī	Tax-exe	empt status	s. 7 :	501(c) (3)◀	I (insert no.)	4947(a)(1)						ist (see instruction	
J	Websi	ite: ► N/						-		7	exemption num	*	ŕ
K	Type of	organization	✓ Corpo	oration Trust	t Associatio	n ☐ Other ▶		L Year	of formation			legal domicile M	0
	rt I	Summ						1 - 100.		1507			<u> </u>
	_			41									
					zation's m	ission or mo	st significant a	ctivities	:				
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au													
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Š	2	Check this	s box ►	☐ If the org	ganization dis	scontinued its	operations or disp	osed of	more than 2	25% of its a	ssets.		
8	3	Number of voting members of the governing body (Part VI, line 1a)									. 3		5
es	4	Number	of inde	pendent vo	oting memb	pers of the c	overning body	(Part V	I, line 1b)		. 4		5
Activities & Governance					s (Part V, I		, , ,	,	, ,		5	_	0
Act					•	if necessary	Λ				6	-	0
•							t VIII, line 12, c	olumn (C)		7a		
							ກ 990-T, line 3		0)	•	. 7b		
									· · · · · ·	Prior Y		Current Ye	ar
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e				-					I		-	-	
Revenue					(Part VIII, lii						750 440		
é							4, and 7d) .		· · ·		756,410		0
							8c, 9c, 10c, ar		<u>-</u>				
	12	lotal reve	enue—a	add lines 8 t	hrough 11	(must equal I	Part VIII, columi	(A), line	12)		756,410		0
	13	Grants a	nd sım	ılar amount	ts paid (Pa	rt IX, columr	n (A), lines 1–3	٠			895,745	10	<u>60,033</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)											
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)											
en				•		•	line 11e)	•	,				
ă							25) ▶			42.7 od	10.02	444	1
	17 8	Other ev	nences	7037 1716	diumn (A)	lines 11a-1	1d 11f_24f)				56,917		0
	100	Total over	penses	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	12 17 (m)	intes ria-r	10, 111-241)		\ <u></u>	- 8	952,662	10	60,033
	180	Dovonila	Jerises.	nada intes	https://inc	isi equal Par	rt IX, column (/	y, line 2	(5)		196,252)		0,033)
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ts or					2				<u> </u>			Elia di Tez	
Asset 1 Bala	20	Total ass	ieta (R	irt X, line 1	6)				· · · -		165,033		5,000
g g	21-	Total liat	ilities (Part X, li ne	~26)				· · ·				
Fund					es. Subtrac	ct line 21 fro	m line 20	<u> </u>			165,033		<u>5,000</u>
Pa	irt II			Block									
		Under pe	enalties of	f perjury, I dec	lare that I have	e examined this	return, including a	ccompany	ing schedule	s and staten	nents, and to	the best of my kn	owledge
		and belie	a, it is ut	ie, correct, an	d complete t	Declaration of pr	reparer (other than	onicer) is	pased on al	iniormation	or which pre	parer nas any kni	owieuge
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Ma	y the				h the prep	arer shown	above? (see in	struction	ns)			Yes	No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2008)

Cat No 11282Y

Par	t III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission: SEE STATEMENT 1.	
2	Did the organization undertake any significant program services during the year which were not listed on the pnor Form 990 or 990-EZ?	☐ Yes ☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes ☑ No
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amoun allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 160,033 including grants of \$ 160,033) (Revenue \$ WE RAISE FUNDS FOR BURRELL, INC., AN ENTITY WHICH PROVIDES PSYCHIATRIC OR PSYCHOLO TREATMENT FOR INDIVIDUALS, GROUPS, AND FAMILIES AS WELL AS TRANSITIONAL SERVICES F	GICAL
	RELEASED FROM MENTAL INSTITUTIONS AND COMMUNITY SERVICES. RESEARCH GRANTS ARE BURRELL, INC. AS WELL. FOR FURTHER DETAIL SEE STATEMENT 1.	PROVIDED TO
4h		
40	(Code:) (Expenses \$including grants of \$) (Revenue \$	· · · · · · · · · · · · · · · · · · ·
		•••
4c	(Code:) (Expenses \$ncluding grants of \$) (Revenue \$)
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► \$ 160,033 (Must equal Part IX, Line 25, column (B).)	

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

Checklist of Required Schedules (continued)			
		Yes	No
during the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
lave a direct business relationship with the organization (other than as an officer, director, trustee, or imployee), or an indirect business relationship through ownership of more than 35% in another entity individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
Part IV	28a		✓
lave a family member who had a direct or indirect business relationship with the organization? If "Yes," omplete Schedule L, Part IV	28b		✓_
erve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a rofessional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		✓
old the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
tid the organization receive contributions of art, historical treasures, or other similar assets, or qualified onservation contributions? If "Yes," complete Schedule M	30		1
old the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, lart I	31		✓_
It the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete chedule N, Part II	32		1
old the organization own 100% of an entity disregarded as separate from the organization under Regulations ections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
Vas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, I, IV, and V, line 1	34	✓	
any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete chedule R, Part V, line 2	35		1
rection 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related reganization? If "Yes," complete Schedule R, Part V, line 2	36		✓
and the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	37		1
nd that is			treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

Form **990** (2008)

a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable				Yes	No
U.S. Information Returns. Enter -0- if not applicable	1a	Enter the number reported in Box 3 of Form 1006, Applied Summary and Transmitted of 1			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 10 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) wirnings to prize winners? 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax 2a 0 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?) b if "Yes," enter the name of the foreign country: In the structure of the structure of exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6a Did the organization solicit any contributions that were not tax deductible? 7b If "Yes," to question 5a or 5b, did the organization in the Sabetta Transaction? 6a Did the organization solicit any contributions under section 170(c). 7c If "Yes," did the organization notify the donor of the value of the goods or services provided? 7c If did the organization notify the donor of the value of the goods or services provided? 7c If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 7d If "Yes," indicate th	·u				
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaiming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. 5 If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. Endough the instructions over a financial account in a foreign country. Endough the instructions for exceptions and thing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction? 6 If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 Dod the organization solicit any contributions that were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Dod the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 9 Organizations that may receive deductible contributions under section 170(c). 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8889 as required? 10 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 9 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 10 Did the organization sell, exchange	b				
gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2		The first of the f			
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 12 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, or other financial account)? 5b If "Yes," enter the name of the foreign country: \(\) \	Ŭ		1c	1	
Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bif "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? bif "Yes," enter the name of the foreign country. In the same and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?. 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b Did the organization as or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6c Did the organization solicit any contributions that were not tax deductible? 6c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 70 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 70 Organizations from 8282? 6c Did the organization provide goods or services provided? 71 Did the organization of the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 71 Por contributions of cars, boats, arplanes, and other vehicles, did the organization file a Form 1098-C as required? 72 Por all contributions of cars, boats, arrplanes, and oth	22				
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b if "Yes," enter the name of the foreign country: * See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction? 5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 bid the organization provide goods or services in exchange for any quid pro quo contribution of more than 575? 7 Organizations that may receive deductible contributions under section 170(c). 9 bid the organization provide goods or services in exchange for any quid pro quo contribution of more than 575? 10 did the organization provide goods or services in exchange for any quid pro quo contribution of more than 575? 10 did the organization provide goods or services in exchange for any quid pro quo contributions on a personal benefit contract? 17 organization file Form 8282? 18 ordanization file Form 8282? 19 ordanization file form 8282? 10 differ organization provide goods or services in exchange	20				
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 a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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b Gross income from other sources (Do not net amounts due or paid to other sources against	а	Gross income from members or shareholders			
	b				
amounts due or received from them.)					ļ
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a h	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a		<u> </u>

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			,, ^
	circumstances, processes, or changes in Schedule O. See instructions.		ing.	
1a	real control of the c			ī
b	Enter the number of voting members that are independent]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	14/857		
	any other officer, director, trustee, or key employee?	2_		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		٠	
	the year by the following.	<u> </u>	3. ' •	
а	The governing body?	8a_	✓_	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9a	Does the organization have local chapters, branches, or affiliates?	9a		✓_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		✓
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			,
200	the organization's mailing address? If "Yes," provide the names and addresses in Schedule Otion B. Policies	11		✓
56 6	uon B. Policies		V	
120	Deep the experimental house a southern and first of all and all 10 0 10 10 11 11 11 11 11	12a	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	124		
J	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
		120		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		1
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by	14/2	N. 34.	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.			لـــا
	The organization's CEO, Executive Director, or top management official?	15a		✓
b	Other officers or key employees of the organization?	15b		√ ,
	Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	7.23		لنزياتا
	with a taxable entity during the year?	16a	f 425 9 8	<u>√</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		2 4 304 2	لــ ــــا
200	the organization's exempt status with respect to such arrangements?	16b		
17 18	List the states with which a copy of this Form 990 is required to be filed ►NONE Section 6104 required on accomplication to make its Forms 1000 (or 1004 for a least to).			
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or)(3)s	oniy)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
10	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	or inte	erest	
20	policy, and financial statements available to the public.		E 41	
20	State the name, physical address, and telephone number of the person who possesses the books and reco			251

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee. (C) (E) (F) Average Name and Title Position (check all that apply) Reportable Reportable Estimated hours per compensation compensation amount of Officer Individual trustee or director Key employee employee Highest Institutional week from from related other compensation organizations (W-2/1099-MISC) the from the organization compensat (W-2/1099-MISC) organization and related trustee organizations **CLAUDIA BROWN** .25 0 0 0 DIRECTOR FERN NEVATT 0 .25 0 0 **DIRECTOR FRED HALL** 0 0 .25 0 **TREASURER** CLIFFORD BROWN .25 0 0 0 **SECRETARY WILLIAM D SHEPPARD** .25 0 0 n **VICE CHAIR** DR. TODD SCHAIBLE .25 0 241.814 n **CHAIR**

Part VII

	Name and title			Reportable	Estimated						
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
	•			_							
										_	
	Total							<u> </u>			
2	Total number of individuals (including those organization ▶ 0	e in 1a) wh	o rec	eive	ed r	nore	e thar	1 \$1	00,000 in repo	rtable compen	sation from the
											Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete So							-	e, or highest c	ompensated	3 /
4	For any individual listed on line 1a, is the s								 d other compe	nsation from	
	the organization and related organizations individual	greater tha	ın \$15	50,0	007	If "	Yes,"	cor	mplete Schedu	le J for such	4
5	Did any person listed on line 1a receive services rendered to the organization? If ")	or accrue	comp	oen:	satı	on 1	from a	any	unrelated org	anization for	
Se	ction B. Independent Contractors	es, comp	nete .	3611	euu	16 0	101 3	ucn	person	<u> </u>	5 ✓
1	Complete this table for your five highest co-	mpensate	d ind	epe	nde	ent o	contra	cto	rs that received	d more than \$1	00,000 of
	(A) Name and business add	ress							(B) Description of s	ervices	(C) Compensation
N/A											
	•										
								\vdash			
2	Total number of independent contractors (compensation from the organization ▶ 0	including t	hose	in	1) w	/ho	receiv	/ed	more than \$10	00,000 in	

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

(C)

(D)

(E)

(B)

Par	VII	Statement of Re	evenue				l	r age U
				A 141	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b d e f	Federated campaigns Membership dues Fundraising events . Related organizations Government grants (contr All other contributions, gifts, and similar amounts not includ Noncash contributions includions.	1b 1c 1d 1d 1e grants, uded above 1f					
<u> </u>	h	Total. Add lines 1a-1f	<u> </u>	▶				
Program Service Revenue	2a b c d e f	All other program servi	ce revenue .	Business Code				
	3 4 5	Investment income (incother similar amounts) Income from investment of Royalties	cluding dividend of tax-exempt bon	s, interest, and				
	b	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (lo	(i) Real	(ii) Personal	· · ·			
		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		Less cost or other basis and sales expenses .				\$.		;
	d	Gain or (loss) Net gain or (loss) .		▶				
r Revenue	8a	Gross income from events (not including \$ of contributions reported See Part IV, line 18						-
Other	b	Less: direct expenses Net income or (loss) fro	b	events >				
	•	Gross income from gam						
		Less: direct expenses. Net income or (loss) fro	b					
	10a b	Gross sales of inverteurns and allowances Less cost of goods so Net income or (loss) fror	entory, less a ild b n sales of invent				**************************************	~
	11a	······································					Andread was an observed to the first surrounce surrounce	
	b							
	G C	All other revenue	•••••					<u> </u>
		Total. Add lines 11a-1	 1d					
		Total Revenue. Add lin 9c, 10c, and 11e.	nes 1h, 2g, 3, 4		0	0	0	0

All other organizations must complete column (A) but are not required to complete column (B), (C), and (D). Do not include amounts reported on fines 6b, 75,8b,95, and 10b of Part VIII. 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Contains in the U.S. See Part IV, line 21 Contains of the assistance to individuals in the U.S. See Part IV, line 21 Contains of the assistance to individuals in the U.S. See Part IV, line 21 Contains of the assistance to individuals in the U.S. See Part IV, line 21 Contains of the assistance to individuals in the U.S. See Part IV, line 21 Contains of the assistance to individuals in the U.S. See Part IV, line 21 Contains of the assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and wages 8 Persen plain contributions inclusive section 403(k) and section 403(k) employer contributions of the propriet of	Pa	rt IX Statement of Functional Expense	<u> </u>	 -		
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6b, (A) 7b, 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to undividuals in the U.S. See Part IV, line 21 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 21 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustess, and key employees 6 Compensation of current officers, directors, trustess, and key employees 7 Other salaries and wages 8 Person plan centributions (include section 401(b) and section 403(b) employer contributions) 8 Person plan centributions (include section 401(b) and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 1 Fees for services (non-employees): a Management 1 Legal 1 Caccounting 1 Postions and promotion 10 Office expenses 1 Information technology 1 Investment management fees 1 June 1 Travel or entertainment expenses 1 For officers, directors, and the control officials or officers and the control officials or officers, directors, and the control officials or officers and the control officers or officers and the control of officers or officers and the control officers or officers and the control off				e must complete	all columns	
Do not include amounts reported on fines 6b, Total expenses Program service Management and organizations in the U.S. See Part IV, line 21 160,033		All other organizations must complete co	lumn (A) but are no	t required to com	olete columns (B).	(C), and (D).
Total supplies Tota	Do					
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to povernments, organizations, and individuals outside the U.S. See Part IV, line 12 5 and 16 4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (se defined under section 4958(R))(ii) and peacers discorbed in section 4958(R)(ii) and peacers discorbed in section 4958(R)(iii) and peacers discorbed in section 4958(R)(iiii) and peacers discorbed in sect			Total expenses			
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26 Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	25	Total functional expenses Add lines 1 through 346	160.022	160 022		
SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and		Joint Costs. Check here If following	100,033	100,033		
organization reported in column (B) joint costs from a combined educational campaign and		SOP 98-2. Complete this line only if the				
fundraising solicitation		organization reported in column (B) joint costs				
		from a combined educational campaign and fundraising solicitation				

Pa	irt X	Balance Sheet				
			(A) Beginning of year		(E End o	l) f year
	1	Cash—non-interest-bearing	5,000	1		5,000
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net	10,033	3		
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		6		
S	7			7		
Assets	8			8		
As	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment cost basis 10a	·			
	b	Less: accumulated depreciation. Complete				
		Part VI of Schedule D	150,000			
	11	Investments—publicly traded securities		11		
	12	Investments—other securities. See Part IV, line 11		12		
	13	Investments—program-related. See Part IV, line 11	_	13		
	14	Intangible assets		15	-	
	15° 16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)	165,033	 		5,000
	17		103,033	17		3,000
	18	Accounts payable and accrued expenses		18		
:	19			19		
	20	- -		20		
S	21	Escrow account liability. Complete Part IV of Schedule D		21		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		00		
	00	persons. Complete Part II of Schedule L		22		
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable		24		
	25	Unsecured notes and loans payable		25		
	26	Total liabilities. Add lines 17 through 25	0			0
es –		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	• • • • • • • • • • • • • • • • • • • •			
Balances	27	Unrestricted net assets	165,033	27		5,000
Bal	28	Temporarily restricted net assets		28		
Þ	29	Permanently restricted net assets		29		
or Fund	•	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
Ş	30	Capital stock or trust principal, or current funds		30		
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
As	32	Retained earnings, endowment, accumulated income, or other funds		32		
ét	33	Total net assets or fund balances		33		
_	34	Total liabilities and net assets/fund balances	165,033	34		5,000
Pa	rt XI	Financial Statements and Reporting				
1	٨٥٥	punting method used to prepare the Form COO. Cook. Approved	□ Other			Yes No
		ounting method used to prepare the Form 990. $\;\sqcup\;$ Cash $\;\;\; \ \ $		٠,	2a	
Za b		e the organization's financial statements compiled or reviewed by an independent according to the organization's financial statements audited by an independent according to the organization of the organizat		ur.	2b	
C		es" to lines 2a or 2b, does the organization have a committee that assumes		 ciabt cf		
•		audit, review, or compilation of its financial statements and selection of an ini	•	-	2c	
3a		result of a federal award, was the organization required to undergo an a				
		Single Audit Act and OMB Circular A-133?			" │ 3a │	✓
b	If "Y	es," did the organization undergo the required audit or audits?			3b	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 2008 Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number 43 **BURRELL FOUNDATION, INC.** 1467704 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I c Type III-Functionally integrated **b I** Type II **d** Type III-Other e 🗹 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting **V** Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(iı) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(in) Provide the following information about the organizations the organization supports. h (III) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (a) EIN (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section. col (ii) of your (i) organized in the governing document? (see instructions)) support? Yes Yes No Yes **BURRELL. INC** 43-1081715 160,033

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (d) 2007 (e) 2008 (c) 2006 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (f) Total (e) 2008 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 . 11 Gross receipts from related activities, etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . 14 % Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 % 331/3 % support test - 2008. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box 331/3 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

_	dule A (Form 990 or 990-EZ) 2008						Page
Fά	Support Schedule for Orga (Complete only if you checke				1)(2)		
Sec	tion A. Public Support						
	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						,
6	Total. Add lines 1-5				_		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support		1				
C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for torganization, check this box and stop I	nere		nd, third, fourth	-		
Sec	tion C. Computation of Public Sup	port Perce	ntage				
15	Public support percentage for 2008 (lin	e 8, column (f) divided by lin	ne 13, column	(f)) .	15	%
16	Public support percentage from 2007 S	chedule A, Pa	art IV-A, line 2	7g	•	16	%
sec	tion D. Computation of Investmen	t Income Po	ercentage				

17 17 % Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . % Investment income percentage from 2007 Schedule A, Part IV-A, line 27h . . . 18 18 19a 331/4 % support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 331/4 %, and line 17 is not more than 33% %, check this box and stop here. The organization qualifies as a publicly supported organization ightharpoonup331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33/3 %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🗌 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ □

	orm 990 or 990-EZ) 2008					Page 4
Part IV	Supplemental Information. Complete Part II, line 17a or 17b; or Part III, line	this part t 12. Provide	o provide to any other	the explanation additional info	n required by ormation. (see	Part II, line 10; instructions)
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

Open to Public Inspection OMB No 1545-0047

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
 ▶ Attach to Form 990.

Name of the organization						Employer Iden	Employer identification number
BURRELL FOUNDATION, INC						43	1467704
Part I General Information on Grants and Assista	on Grants and	Assistance	in the second se				
	in records to subsaward the grants of	stantiate the amou or assistance?	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and nice?	sistance, the grantee	s' eligibility for the gra	ants or assistance, a	nd Ves No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedure	es for monitoring	the use of grant funds	in the United States.	- 1		
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	sistance to Go 21, for any rec I-1 (Form 990) it	vernments and uppent that received additional spaces	Organizations in the ved more than \$5,00 is needed	he United States. (00. Check this box	Complete if the orgaring on the constant of the contract of th	anization answered received more thar	l "Yes" on ı \$5,000. Use
1 (a) Name and address of organization or government	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BURRELL, INC	43-1081715	3	10,033	150,00	воок	LAND	ON GOING OPERAT
		:					
						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations 	501(c)(3) and govi	ernment organizat	suon				0
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990	ction Act Notice, s	see the Instructions	s for Form 990.		Cat. No 50055P		Schedule I (Form 990) 2008

Schedule I (Form 990) 2008

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. BURRELL FOUNDATION'S BOARD OF DIRECTORS MONITORS BURRELL INC'S USE OF SUPPORT PROVIDED THROUGH ORAL REPORTS BEING GIVEN TO THE Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance BOARD ON AN ANNUAL BASIS. Part III

Schedule I (Form 990) 2008

BURRELL FOUNDATION, INC STATEMENT 1

FORM 990, PART I - ORGANIZATION'S PRIMARY EXEMPT PURPOSE/MISSION

BURRELL FOUNDATION IS AN ORGANIZATION ESTABLISHED FOR THE FOLLOWING PURPOSES.

- 1 TO INCREASE AWARENESS AND SENSITIVITY OF THE COMMUNITY TO MENTAL HEALTH AND RELATED MATTERS (E.G., PUBLIC AWARENESS PROGRAMS, PROFESSIONAL SPEAKERS, NATIONAL SYMPOSIA, ETC.)
- 2. TO DEVELOP, MARKET, AND DISTRIBUTE EDUCATIONAL MATERIALS AND THERAPEUTIC AIDES SUCH AS BOOKS, AUDIO TAPES, AND VIDEO TAPES (E.G. INTERACTIVE VIDEO FOR TREATMENT OF PHOBIAS, VARIOUS ANXIETY DISORDERS, MARITAL DIFFICULTIES, ETC.)
- 3 TO PROVIDE SCHOLARSHIPS AND EDUCATION STIPENDS, PARTICULARLY TO AREA STUDENTS AND EMPLOYEES OF BURRELL BEHAVIORAL HEALTH.
- 4. TO FUND AND CARRY OUT RESEARCH THROUGH BURRELL BEHAVIORAL HEALTH IN THE AREAS OF APPLIED BEHAVIORAL SCIENCES
- 5 TO UNDERWRITE INITIAL START-UP COSTS OF SELECTED NEW AND INNOVATIVE SERVICES AT BURRELL BEHAVIORAL HEALTH
- 6 TO FUND CAPITAL EXPENDITURES AND ON-GOING OPERATIONS FOR BURRELL BEHAVIORAL HEALTH UTILIZING ONLY FUNDING SPECIFICALLY RAISED FOR THAT PURPOSE
- 7 TO DO THOSE THINGS NECESSARY, TO BRING TOGETHER UNDER BURRELL BEHAVIORAL HEALTH THE BEST TECHNOLOGY AND PROFESSIONAL TALENT AVAILABLE FOR THE DIAGNOSIS AND TREATMENT OF A WIDE RANGE OF PYSCHIATRIC ILLNESSES AND THE PROMOTION OF WELLNESS THROUGH BEHAVIORAL HEALTH SERVICES THOSE STEPS NECESSARY TO MAKE BURRELL A NATIONALLY RECOGNIZED LEADER IN BEHAVIORAL HEALTH SERVICES, AND
- 8 TO CARRY OUT FUNDRAISING FOR ALL THE ABOVE PURPOSES.

General Ledger Trial Balance for Period Ending 9/30/2009

BURRELL FOUNDATION (BUF)

OMMERCE ONTRIBUTIONS RECEIVABLE		5,000.00	
ONTRIBUTIONS RECEIVABLE		5,000.00	
		0 00	
LOWANCE FOR CONTR RECEIVABLE		0 00	
SCOUNT ON CONTRIBUTIONS		0 00	
C	urrent Assets:	5,000 00	
RNISHINGS & EQUIPMENT		4,887.64	
CUMULATED DEPR			4,887.64
	Fixed Assets:	4,887 64	4,887 64
IRESTRICTED FUNDS			165,032 89
	EQUITY:		165,032 89
ONTRIBUTION EXPENSE		160,032.89	
	EXPENSES:	160,032.89	
	Report Total:	169,920 53	169,920 53
;	C RNISHINGS & EQUIPMENT CUMULATED DEPR	Current Assets: RNISHINGS & EQUIPMENT CUMULATED DEPR Fixed Assets: RESTRICTED FUNDS EQUITY: DIAMPTON EXPENSE EXPENSES:	Current Assets: 5,000 00 RNISHINGS & EQUIPMENT 4,887.64 CUMULATED DEPR Fixed Assets: 4,887 64 RESTRICTED FUNDS EQUITY: 160,032.89 EXPENSES: 160,032.89

Run Date: 6/15/2010 9:12:25AM

G/L Date: 6/15/2010