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990-PF

OMB No 1545-0052 2008

Department	of the	Treasury
Internal Rev	enue S	envice .

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

	For ca	lendar y	ear 2008,	or tax year b	eginning		1	2/0	1 , 2008 <u>,</u>	and end	ling		1	1/30, 20 09
	G Che	eck all th	at apply.	Initial re	eturn	Fına	l return		Amended r	eturn		Address change		Name change
•			Name of for	undation			-					A Employer identifi	cation n	umber
	Use t	he IRS												
	lal	bel.	ELEANOR	CROOK FO	UNDATIO	N _						74-	28578	B66
	Othe	rwise,	Number and	street (or P O	box number d	mail is not	delivered to st	reet a	address)	Room/s	uite	B Telephone number (see	page 10 o	of the instructions)
	-	rint												
		ype. pecific	227 NOR	TH MITCHE	LL							(51	2) 3	92-5205
				, state, and ZIF					-			C If exemption application pending, check here	stion is	
											D 1 Foreign organiza		► 1 1	
	SAN MARCOS, TX 78666								2 Foreign organiza					
	H Check type of organization: X Section 501(c)(3) exempt private foundation									85% test, check for computation				
			-	nexempt char					ate foundat	tion		•		
				l assets at end	J Acco	unting m	rethod X	Cas	sh Acc	rual		E If private foundation under section 507(b		
			n Part II, co			ther (spe						F If the foundation is		
		▶ \$		01,520.				on c	cash basis)			under section 507(b		_ 1 1
	Part	Analys	sis of Reve	enue and Exp	enses (The	(a) D	evenue and	\top			Ι.			Disbursements
				columns (b), (c), equal the amo			enses per		(b) Net inve		(c) Adjusted net income	fc	or charitable purposes
		column	(a) (see pag	ge 11 of the inst	ructions))	•	books						(ca	ish basis only)
•	1	Contributio	ons, arfts, grants,	etc , received (attac	h schedule)	2	, 305, 35	5.						
	2	Check >	if the	foundation is not Sch B	required to									
	3	=	- attaci	temporary cash										
2010	4		-	est from securit			68,02	3.	6	8,023.		NONE		
e2	5 a								····					
===	Ь			oss)					Ţ~~~					
ന			•	sale of assets no			-2,76	4.	RE					
SCANNED FEB	≩ Ĭĥ		les price for all		17,236.				L	UEIV	FN	7		
<u> </u>	7			ome (from Part					45			7		
	8			al gain		•		1	IJ FEB	16 20	,,	181		
Z	9			s • • • • • •				1		** **	Ü	<u> 191</u>		
3	10 a	Gross sale	es less returns rances					7	()Ch	- A		181		
Ö	l b		ances	ı					-20101	SM, 1	17	7.7		
Ø	i i		=	(attach schedu	le)						-			
	11			h schedule)										
	12			rough 11			,370,60	9.T	6	8,023.		NONE	}	
•	13			rs, directors, trust				7						
	14			aries and wages										
ç	15			oyee benefits										
Administrative Descen	16a			chedule)										
\$ 	ÌЬ			ach schedule)S			1,42	5.		1,425.		NONE		NONE
Ş	. c			ees (attach scho										
;	17	•												
į	18			(see page 14 of the			3,95	2.		NONE		NONE		NONE
	19	•	•	schedule) and	•			丁						
t	20	•						\top						
7	21			and meetings										
2	22			tions								-		
5	23			ach schedule) S			1.	3.		13.		NONE		NONE
	24		-	l administrative			- '	_						
Onersting and	<u>:</u> -~	•	-	h 23			5,39	ا ر		1.438.	1	NONE		NONE
Č	25		•	grants paid			1,00							1,000.
	26		-	rsements Add line			6,39			1.438.		NONE		1,000
-	27		line 26 fron		LT and LJ		<u> </u>	+			 -	NVALE		
	1			penses and disbur	sements	2	,364,21	,					İ	
				ome (if negative			, 504, 41	+		6,585.			 	
				e (if negative, e				+		<u>., ., .</u>	 	NONE		
-												11011		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. **STMT 2 JSA 8E1410 1 000

Form **990-PF** (2008)

F	m 990	D-PF (2008)	74	-2857866	Page 2
	ert.II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End (of year
	anen	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	26,672.	21,645.	21,645.
	2	Savings and temporary cash investments	8,279,761.	10,645,007.	10,675,875.
	3	Accounts receivable	-		
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ł	disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
v,	8	Inventories for sale or use		_	
Assets	9	Prepaid expenses and deferred charges STMT .4 [NONE	4,000.	4,000.
As	10 a	Investments - U S and state government obligations (attach schedule)			
	ь	Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	,	7	
	12	(attach schedule) Investments - mortgage loans		 	
	13	Investments - other (attach schedule)			
	14	Land huildings and - I			
		equipment basis Less accumulated depreciation	- ' '		
	15	Cattach schedule) Other assets (describe			
	16	Total assets (to be completed by all filers - see the			<u> </u>
	''	instructions. Also, see page 1, item I)	8 306 433	10,670,652.	10,701,520.
_	17	Accounts payable and accrued expenses		10,010,032.	10,701,320.
	18				
G	19	Grants payable			
Liabilities	20	Deferred revenue Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable (attach schedule)			
<u>.</u>	22	Other liabilities (describe			
	22	Other Habilities (describe			
	23	Total liabilities (add lines 17 through 22)			
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ŝ	24	Unrestricted	1		
Š	25	The state of the s			
ala	26	Temporarily restricted			
9	28	Foundations that do not follow SFAS 117,			
Net Assets or Fund Balances		check here and complete lines 27 through 31.			
7	27	Capital stock, trust principal, or current funds	1,000.	1,000.	
5	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
sse	29	Retained earnings, accumulated income, endowment, or other funds	8,305,433.	10,669,652.	
ĕ	30	Total net assets or fund balances (see page 17 of the	0/000/1001	20/003/002	
žet	• •	instructions)	8,306,433.	10,670,652.	
_		Total liabilities and net assets/fund balances (see page 17	0/300/433.	10,010,052.	
		of the instructions)	8,306,433.	10,670,652.	
E	art II	Analysis of Changes in Net Assets or Fund E	Balances	10,070,032.	
_	_	net assets or fund balances at beginning of year - Part II,		agree with	
·		of-year figure reported on prior year's return)			8,306,433.
2	Enter	r amount from Part Line 27a		2	2,364,219.
3	Othe	r amount from Part I, line 27a			
		4 O 4 O			10,670,652.
_	Dage	accon not included in line 3 (townso) b		10,010,032.	
6	Total	net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II column (h)	line 30 6	10,670,652.
JSA		Thirds at the or your time 4 miles in	5, . 3, 55141111 (5)	,	Form 990-PF (2008)
	1420 1 C	000			

Part IV Capital Gains	and Losses for Tax on Inv	estment Income		, ————————————————————————————————————		
(a) List and 2-story bi	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo, day, yr)			
1a SEE PART IV SCHE	DULE					
b						
<u>c</u>						
_d						
<u>e</u>				L	L	
(e) Gross sales price	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini			
<u>a</u>			ļ			
<u>b</u>					-	
<u>c</u>						
<u>d</u>						
Complete only for assets st	nowing gain in column (h) and owi	ned by the foundation on 12/31/69		O (O-1 (b)		
	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t		
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))	
<u>a</u>						
b						
<u></u>						
d			,			
<u>e</u>	. 16	gain, also enter in Part I, line 7				
2 Capital gain net income or	(not conital loce)	(loss), enter -0- in Part I, line 7	2		-2,764.	
3 Net short-term capital gain	or (loss) as defined in sections 12	· · ·			-2,704.	
· · · · · · · · · · · · · · · · · · ·	line 8, column (c) (see pages 13	• •				
•	ine 8	•	3			
		iced Tax on Net Investment Inc	ome			
		outable amount of any year in the b	ase perio	d? [Yes X No	
	· 	, see page 18 of the instructions be	efore mak	ing any entries		
(a)	(b)	(c)	1010111011	(d)		
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by		
2007	17,000.	7,763,350.		<u> </u>	0.002190	
2006	9,000.	122,784.			0.073299	
2005	370,102.	319,293.			1.159130	
2004	26,172.	256,657.			0.101973	
2003	352,969.	441,524.			0.799433	
2 Total of line 1, column (d)			2		2.136025	
	for the 5-year base period - divide					
number of years the found	lation has been in existence if less	than 5 years	3		0.427205	
4 Enter the net value of none	charitable-use assets for 2008 from	m Part X line 5	4	a	,228,803.	
- Litter the flet value of florid		m Paπ X, line 5	- -		1220,000.	
5 Multiply line 4 by line 3 .	5 3,942,591.					
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6	6 666.		
7 Add lines 5 and 6			7	3	,943,257.	
Enter qualifying distribution If line 8 is equal to or greathe Part VI instructions on present the presen	8 e that pa	art using a 1%	1,000. tax rate See			

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

instructions) > TX,

7

8 b

10

Х

Х

Х

names and addresses

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008? | 4b | X | Form 990-PF (2008)

3 b

	990-P f (2008)		74-28			Page 6
Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amount (1) Carry on propaganda, or otherwise attempt to influent (2) Influence the outcome of any specific public election, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charit	ce legislation (section (see section 4955), of her similar purposes?	or to carry on,	Yes X N	o	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable educational purposes, or for the prevention of cruelty	see page 22 of the in le, scientific, literary, to children or animals	structions)	·		
	If any answer is "Yes" to 5a(1)-(5), did any of the transaction Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disaster If the answer is "Yes" to question 5a(4), does the foundation because it maintained expenditure responsibility for the gradient of the	ding disaster assistar er assistance check t tion claim exemption	nce (see page 22 of the nere	instructions)?		N/A
6 a	If "Yes," attach the statement required by Regulations section Did the foundation, during the year, receive any funds, do on a personal benefit contract?	ion 53 4945-5(d) rectly or indirectly, to	pay premiums		o	
	Did the foundation, during the year, pay premiums, direct If you answered "Yes" to 6b, also file Form 8870 At any time during the tax year, was the foundation a par	tly or indirectly, on a	personal benefit contrac	at?	6b	X
	If yes, did the foundation receive any proceeds or have a	•	•	نت با		
	t VIII Information About Officers, Directors,					X
	and Contractors					
1 1	List all officers, directors, trustees, foundation ma	(b) Title, and average		(d) Contributions to	(e) Expens	e account
	(a) Name and address	hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	employee benefit plans and deferred compensation	other all	
EE	STATEMENT 5		NONE	NONE	NC	NE
	Compensation of five highest-paid employees (oth f none, enter "NONE."	er than those inc			tructions).	
(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) Expensor	e account, owances
ION]	E					
<u></u>			-			
		ł			1	

Form 990-PF (2008)

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)								
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2								
1_NONE								
2								
All other program-related investments See page 24 of the instructions								
3 NONE								
Total. Add lines 1 through 3								

	74-2037000		0
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		· · · · · · · · · · · · · · · · · · ·
	purposes		
а	Average monthly fair market value of securities	1a	4,274,016.
	Average of monthly cash balances	1 b	5,091,327.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	4,000.
d		1 d	9,369,343.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)1e		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Cubbrack Inc. O from Inc. 1d	3	9,369,343.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
		4	140,540.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,228,803.
6	Minimum investment return. Enter 5% of line 5	6	461,440.
	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva	te operatino	10171101
. u	foundations and certain foreign organizations check here and do not complete this p	art)	,
1	Minimum investment return from Part X, line 6	1	461,440.
2 a	Tax on investment income for 2008 from Part VI, line 5 2a 1,332.		
	Income tax for 2008. (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	1,332.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	460,108.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	460,108.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	460,108.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
'a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,000.
b		1b	NONE
	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	-	NONE
2		2	NONE
•	purposes Amounts set aside for specific charitable projects that satisfy the	-	NONE
3	Contability took (areas IDC approval required)	3a	MONE
a	Suitability test (prior into approval required)	3b	NONE
Ъ	Cash distribution test (attach the required schedule)	4	NONE
4 .	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	/-
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	nether the	foundation

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2008 from Part XI,	Corpus	Years prior to 2007	2007	2008
	line 7				460,108.
2	Undistributed income, if any, as of the end of 2007				
а	Enter amount for 2007 only	,			
	Total for pnor years. 20,20,20				
3	Excess distributions carryover, if any, to 2008				
а	From 2003			}	
þ	From 2004 5,814.				
С	From 2005 354, 425.				
d	From 2006 2, 920.		•		•
e	From 2007				,
	Total of lines 3a through e			• ,	
4	Qualifying distributions for 2008 from Part XII,	,			,
	line 4 ▶ \$1,000.				
а	Applied to 2007, but not more than line 2a	i			
_	Applied to undistributed income of prior years (Election	\			, ,
-	required - see page 26 of the instructions)		,		·
c	Treated as distributions out of corpus (Election			_	
Ū	required - see page 26 of the instructions)				
d	Applied to 2008 distributable amount		'.		1,000
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2008.	363,159.		÷	363,159
	(If an amount appears in column (d), the same		•		
6	amount must be shown in column (a)) Enter the net total of each column as	:			
-	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
ь	Prior years' undistributed income Subtract	· ·			
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed	* /			
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				
	been previously assessed				•
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				
•	Undistributed income for 2008 Subtract lines				
•	4d and 5 from line 1 This amount must be				
	distributed in 2009				95,949
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
_	instructions)				
8	Excess distributions carryover from 2003 not applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2009.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9	ĺ		[
а	Excess from 2004				
b	Excess from 2005				
	Excess from 2006				
d	Excess from 2007				
е	Excess from 2008			}	

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE			
1 a	a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the ruling is effective for 2008, enter the date of the ruling								
Ь	Check box to indicate wh		a private operating found			(3) or 4942(J)(5)			
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total			
	Justed net income from Part I or the minimum investment	(a) 2008	(b) 2007	(c) 2006	(d) 2005				
	return from Part X for each								
h	year listed	· · · · · · · · · · · · · · · · · · ·							
C	• • • • •								
•	Qualifying distributions from Part XII, line 4 for each year listed .								
d	Amounts included in line 2c not								
	used directly for active conduct of exempt activities								
e	Qualifying distributions made			ľ					
	directly for active conduct of exempt activities Subtract line					•			
3	2d from line 2c								
,	Complete 3a, b, or c for the alternative test relied upon]						
а	"Assets" alternative test - enter				,				
	(1) Value of all assets (2) Value of assets qualifying		<u> </u>		 				
	under section								
ь	4942(j)(3)(B)(i) "Endowment" alternative test-								
	enter 2/3 of minimum invest-								
	ment return shown in Part X, line 6 for each year listed		<u> </u>						
C	"Support" alternative test - enter								
	(1) Total support other than gross investment income			ĺ					
	(interest, dividends, rents,				!				
	payments on secunties loans (section 512(a)(5)),								
	or royalties) (2) Support from general								
	public and 5 or more								
	exempt organizations as provided in section 4942								
	(j)(3)(B)(III)				······································				
	port from an exempt organization								
	(4) Gross investment income.								
Pa	rt XV Supplement	ary Information (C	omplete this part o	only if the foundation	on had \$5,000 or mo	re in assets at any			
_			27 of the instruction	ons.)					
1	Information Regarding List any managers of			e than 2% of the tota	Lontributions receive	ed by the foundation			
•	before the close of any	tax year (but only if th	ney have contributed n	nore than \$5,000) (Se	ee section 507(d)(2))	ou by the roundation			
	ELEANOR CF	NOOK							
	List any managers of		own 10% or more of	the stock of a corpo	pration (or an equally	large portion of the			
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	ınterest	,			
	N/A								
2	Information Regarding	-		· -					
	Check here ► if the unsolicited requests for	he foundation only r	nakes contributions	to preselected charit	able organizations at	nd does not accept			
	organizations under oth				20 Of the instruction	is) to individuals of			
_	The name, address, ar		 		addressed				
a	SEE STATEM	•	of the person to whom	r applications should be	s addressed				
	The form in which appl		omitted and information	on and materials they	should include				
-	The second secon								
_	LETTER REO	UESTING CONTRI	BUTION AND INFO	NEGARD REGARD	ING USE OF FUNI	os			
С	Any submission deadling								
	NONE				- 				
d	Any restrictions or lin	mitations on awards,	such as by geogra	phical areas, charital	ble fields, kinds of i	nstitutions, or other			
	factors								
īca-	NONE								

Form 990-PF (2008)			74-2857866	Page 1 '
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Durin	g the Year or Appro			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year		}		
SEE STATEMENT 7]			
ODE STATEMENT /				
	}	İ		
		1	[
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		ļ ļ		
Total	<u> </u>	<u> </u>	<u> </u>	1 000
b Approved for future payment	<u> </u>	' 		1,000.
b ripprovou for rataro paymork				
	1			
	1			
		,		
Total	· · · · · · · · · · · · · · ·			

Part X	VI-A Analysis of Income-Produ	icing Activ	vities			
	oss amounts unless otherwise indicated		ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Progr	ram service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a _						
b _				ļ		
c _						
d _	····					
e _						
f _			·	ļ	···	
_	ees and contracts from government agencies			ļ		
	bership dues and assessments		<u> </u>		<u> </u>	
	st on savings and temporary cash investments			ļ <u> </u>		
	ends and interest from securities			14	68,023.	
	ental income or (loss) from real estate		·	<u> </u>	<u> </u>	<u> </u>
	Pebt-financed property		· · · · · · · · · · · · · · · · · · ·			
	lot debt-financed property			 		
	ental income or (loss) from personal property			 		
	r investment income			 		
	or (loss) from sales of assets other than inventory		<u> </u>	 		
	ncome or (loss) from special events		<u> </u>	 	<u> </u>	
	s profit or (loss) from sales of inventory	 		 		
	revenue a	<u> </u>			<u></u>	
b _				 		
С ₋				 		
		-		 		
e _	otal. Add columns (b). (d). and (a)				68,023.	
	otal Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e)					
	ksheet in line 13 instructions on page 28 t					00,023.
Part X	VI-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No	T =					tributed importantly to
	the accomplishment of the fo					
•	page 28 of the instructions)					
	N/A					
		<u> </u>				
		<u></u>				
						
						
						
					·	
			· <u></u>			
				· 		

Porm 990-PF (2008) Part XVII 74-2857866 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did th	ne organization directly of	or indirectly eng	gage in any of the follow	ing with	any other	organization	described in	section		Yes	No
) of the Code (other than			-	-						
a	Trans	fers from the reporting fo	oundation to a n	oncharitable exempt organ	ization of							
	(1) C	ash							Ŀ	1a(1)		Х
	(2) 0	ther assets							[1a(2)		X
t	Other	transactions									_	
	(1) S	ales of assets to a nonch	arıtable exempt	organization					[1b(1)		x
	(2) P	urchases of assets from	a noncharitable e	exempt organization					[1b(2)		Х
	(3) R	ental of facilities, equipme	ent, or other asse	ets	. .				[1b(3)		x
		eimbursement arrangeme										х
		oans or loan guarantees										х
		erformance of services of							1			<u>_x</u>
C	Sharu	ng of facilities, equipment	t, mailing lists, o	ther assets, or paid employ	yees				<u>.</u> [1c		X
d	l If the	answer to any of the abo	ove is "Yes," co	mplete the following sch	edule Co	lumn (b) sh	ould always	show the fair	market va	alue o	f the g	goods,
	other	assets, or services given	by the reporting	ng foundation. If the four	ndation re	ceived less	than fair ma	arket value in	any trans	actio	n or s	haring
	arrang	gement, show in column (d) the value of th	he goods, other assets, or	services r	eceived						
		,,_,_,,_,,_, ,_,										
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt organiz	ation	(d) Desc	ription of transf	ers, transactions	s, and sharir	ід апа	ngeme	nts
		N/A				N/A						
_		 										
												
								 				
_										_		
_	-						·					
_												
				· 								
_				····								
_			· 								_	
2 a	ls the	foundation directly or	indirectly affilia	ated with, or related to,	one or r	nore tax-ex	cempt organi	zations descr	ıbed ın _			
	section	n 501(c) of the Code (other	er than section 5	501(c)(3)) or in section 52	7?				L	Ye	s X	. No
þ	If "Yes	s," complete the following	schedule									
		(a) Name of organization		(b) Type of orga	nization			c) Description	of relationsh	пр		
		 										
_												
	Hedos	penalties of perjury, I declar	ro that I have a	aminod this setum in all disc		nuna sebedi	ulae and states	nente and to t	he hest of	my k	owled	
	belief,	it is true, correct, and comp	lete Declaration of	of preparer (other than taxpa	ayer or fidu	iciary) is bas	ed on all infor	mation of which	h preparer	has ar	y knov	wledge
		81.	3 Charole			9 12	9 4//)	Photo	D. A	/		
ູ່	<u>-</u>	gnature of officer or trustee) look			<i>ل احر</i> کھا Date	- 1011	Title	<u>ucun</u>			
ב פר		ga.a.o or onloci or austre			Date				eparer's i	dentif	vina ni	umber
_	<u>.</u>				Date		Check if	. — l (Se	ee Signatur	e on p	age 30) of the
E G	필일	Preparer's signature	erita	1000	1.7	-10	self-employ		structions)	10		
"	Paid Preparer's Use Only	Firm's name (or yours if			11. 1.	-10			01882			
-	a S	self-employed), address,		& SALCH, P.C. CARANCAHUA, SU		10		EIN ▶ 74-	-21210	00		
		and ZIP code		CARANCAHUA, SC CHRISTI, TX	יויה ס	784	70	Phone no 3	361-8 <u>8</u> 3	ጓ_Ω1	51	
_4			CORPUS	CIRISII, TX		/ 04	, ,		. <u>01−00</u> For	n 990)-PF	(2008)
									. 5		•	,-,-,-,

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

ELEANOR CROOK FOUNDATIO	N	Employer identification number
Organization type (check one)		74-2857866
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
,	527 political organization	
Form 990-PF	x 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundate	tion
	501(c)(3) taxable private foundation	
organization can check boxes for b General Rule X For organizations filing For	oth the General Rule or a Special Rule. (Note. Only a section 501(c)(oth the General Rule and a Special Rule See instructions.) orm 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or contributor. Complete Parts I and II	
Special Rules		
under sections 509(a)(1)	rganization filing Form 990, or Form 990-EZ, that met the 331/3 % support of the 331/3 % su	ar, a contribution of the
during the year, aggregat	8), or (10) organization filing Form 990, or Form 990-EZ, that received the contributions or bequests of more than \$1,000 for use exclusively for extractional purposes, or the prevention of cruelty to children or animals.	r religious, charitable,
during the year, some co not aggregate to more th the year for an exclusively applies to this organization	8), or (10) organization filing Form 990, or Form 990-EZ, that received intributions for use <i>exclusively</i> for religious, charitable, etc., purposes, than \$1,000. (If this box is checked, enter here the total contributions the religious, charitable, etc., purpose. Do not complete any of the parts usin because it received nonexclusively religious, charitable, etc., contributions.	out these contributions did at were received during inless the General Rule outions of \$5,000 or more
990-EZ, or 990-PF), but they must a	covered by the General Rule and/or the Special Rules do not file Scheanswer "No" on Part IV, line 2 of their Form 990, or check the box in the form 990-PF, to certify that they do not meet the filing requirements of	he heading of their

of	of	Part

Schedule B	(Form 990, 990-EZ, or 990-PF) (2008)		Page of of Part
Name of o	rganization ELEANOR CROOK FOUNDATION		Employer identification number
			74-2857866
Part	Contributors (see instructions)		<u> </u>
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ELIZABETH CROOK & MARC LEWIS	Aggregate contributions	Person X
	1510 WEST 24TH STREET	\$\$.	Payroll Noncash
	AUSTIN, TX 78703-2404		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ELEANOR BUTT CROOK 227 NORTH MITCHELL SAN MARCOS, TX 78666	\$ 2,300,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\ \\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash

(Complete Part II if there is

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2008

ELEANOR CROOK FOUNDATION						
Note: Form 5227 filers need to complete on						
Part I Short-Term Capital Gains and			ar or Less	(e) Cost or other b	asıs	(f) Gain or (loss) for
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(see page 4 of the instructions)		the entire year Subtract (e) from (d)
1a				· · · · · · · · · · · · · · · · · · ·		
						
	<u></u>		L			
b Enter the short-term gain or (loss), if a	any, from Schedule D)-1, line 1b			1b	-2,766.
	5 1001 0050	0704 000	.4			
2 Short-term capital gain or (loss) from	Forms 4684, 6252,	6781, and 882	4		2	
3 Net short-term gain or (loss) from part	tnerships, S corpora	tions, and other	r estates or trusts	<i>.</i>	3	
4 Short-term capital loss carryover Enter	er the amount, if any	y, from line 9 of	f the 2007 Capital Los	ss		,
Carryover Worksheet		· · · · · · · · · · · · · · · · · · ·	Fator have and on to		4 (
5 Net short-term gain or (loss). Combin column (3) on the back	-				5	-2,766.
Part II Long-Term Capital Gains and L	osses - Assets Held	More Than Or	ne Year			
(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other b (see page 4 of t instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a						
					1	
		<u> </u>				
		·				-
b Enter the long-term gain or (loss), if a	ny, from Schedule D-	-1, line 6b			6b	2.
7 Long-term capital gain or (loss) from I	Forms 2/130 //68/	6252 6781 ai	nd 8824		7	
7 Cong-term capital gain of (loss) from t	OIIII3 2433, 4004,	0202, 0701, 41	10 0024		· <u>·</u>	
8 Net long-term gain or (loss) from parti	nerships, S corporat	ions, and other	estates or trusts		8	
9 Capital gain distributions					9	
10 Gain from Form 4797, Part I				<u>.</u>	10	
11 Long-term capital loss carryover Ente						,
Carryover Worksheet			Fatantia Control		11 (
12 Net long-term gain or (loss). Combine column (3) on the back					12	2.
Column (S) on the back			<u> </u>			D (Form 1041) 2008

Sche	dule D (Form 1041) 2008						P	Page 2
Pa	rt Ⅲ Summary of Parts I and II		· · · · ·	eficiaries'	(2) Es		(3) Total	
	Caution: Read the instructions before completing this pa	$\overline{}$	(see	page 5)	or tri	ust's		
13	Net short-term gain or (loss)	13_					-2,76	<u>66.</u>
14	Net long-term gain or (loss):	l						
a	Total for year	14a						2.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	_						
	28% rate gain	14c						
15	The state of the s							
to Pa	e: If line 15, column (3), is a net gain, enter the gaın on Form 1041, line 4 (or Fo art V, and do not complete Part IV. If line 15, column (3), is a net loss, complete F	m 990 Part IV 2	-1, Part I, III and the Car	ne 4a). If line ital Loss Cal	es 14a and m vover Wor	15, COIL ksheet	umn (2), are net gains, Las necessary	, go
							, uo nococcary.	
	Capital Loss Limitation					Т	T	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F			• -		1	,	-
a Note	The loss on line 15, column (3) or b \$3,000	 . 1 lin		rm 000-T I		16	complete the Capital I	64.)
Cany	rover Worksheet on page 7 of the instructions to figure your capital loss carryove	er, 1111	_	niii 330-1, ii	iiie 34), is a	1033, 0	-	
Pai	Tax Computation Using Maximum Capital Gains Rates							
For	n 1041 filers. Complete this part only if both lines 14a and 15 in colu	ımn (2) are gain	s, or an an	nount is ei	ntered	l in Part I or Part II a	and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more							
	tion: Skip this part and complete the worksheet on page 8 of the instru	ctions	ıf [.]					
	other line 14b, col. (2) or line 14c, col. (2) is more than zero, or							
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. n 990-T trusts. Complete this part only if both lines 14a and 15 ar		or aug	lifical divide	ande ara i	noludi	od in income in Dr	oet I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa							
	er line 14b, col (2) or line 14c, col (2) is more than zero	ii Cana	complete	, the work	311001 011	Jugo (5 of the manachen	J .,
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	24)	17	 	· · · · · · · · · · · · · · · · · · ·	T	T	
18	Enter the smaller of line 14a or 15 in column (2)	, , .	· · ' ′ 			1		
10	· ·							
19	but not less than zero							
13	from Form 1041, line 2b(2) (or enter the qualified							
	dividends included in income in Part I of Form 990-T) 19							
20	Add lines 18 and 19							
21	If the estate or trust is filing Form 4952, enter the							
- '	amount from line 4g, otherwise, enter -0-							
22	Subtract line 21 from line 20 If zero or less, enter -0-		22			1		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23			1		
	Total and the first the first of the first o					1		
24	Enter the smaller of the amount on line 17 or \$2,200		24					
25	Is the amount on line 23 equal to or more than the amount on line 24		} = -			1		
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box							
	No. Enter the amount from line 23		25					
26	Subtract line 25 from line 24		26			1		
27	Are the amounts on lines 22 and 26 the same?	• • •				1		
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27					
						1		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			1		
		• • •				1		
29	Subtract line 28 from line 27		. 29			_		
30	Multiply line 29 by 15% (15)					30		
31	Figure the tax on the amount on line 23 Use the 2008 Tax Rate So	chedul	e for Esta	tes and Tr	usts (see			
	the Schedule Ginstructions)					31		
	· · · · · · · · · · · · · · · · · · ·	- • •						
32	Add lines 30 and 31					32	<u> </u>	
33	Figure the tax on the amount on line 17 Use the 2008 Tax Rate So							
	the Schedule Ginstructions)					33		
34	Tax on all taxable income. Enter the smaller of line 32 or I	ine 3	3 here a	nd on lin	e 1a of]	
	Schedule G, Form 1041 (or line 36 of Form 990-T)	<u></u>	<u></u>	<u></u>	<u></u>	34		
						Sche	edule D (Form 1041)	2008

SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2008

Name of estate or trust **Employer Identification number** 74-2857866 ELEANOR CROOK FOUNDATION Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (d) Sales price (see page 4 of the (e) Cost or other basis (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (b) Date (c) Date sold (f) Gain or (loss) Subtract (e) from (d) (see page 4 of the acquired (mo, day, vr) instructions) instructions) (mo , day, yr) 1a 425,000 U.S. TREASURY 425,000 BONDS 04/08/2009 11/20/2009 425,925 925. 245,000 ASSOCIATED BK 244,577 GREEN BAY 245,000 -423. 07/22/2009 11/24/2009 244,706 245,000 -294. 245,000 BANK OF PERRY CNTY 07/31/2009 11/24/2009 08/07/2009 244,711 245,000 -289. 245,000 CRESCENT BK 11/24/2009 245,000 FIRST CTZNS NATL 245,000 244,699 -301. BK 07/29/2009 11/24/2009 244,699 245,000 -301. 245,000 FIRST FED SVGS BK 07/30/2009 11/24/2009 245,000 FIRST NATL BK & TR CO 245,000 -394. 11/24/2009 244,606 <u>07/29/2009</u> 245,000 -380. 245,000 HERITAGE CMNTY BK 07/22/2009 11/24/2009 244,620 245,000 MIDLAND STS BK 07/27/2009 11/24/2009 244,633 245,000 -36<u>7.</u> 245,000 SOUTHCOAST CMNTY 245,000 -31<u>1</u>. 244,689 BK 08/11/2009 <u>11/24/2009</u> -362. 245,000 245,000 SOUTHERN FIRST BK 11/24/2009 244,638 <u>08/11/2009</u> 245,000 VALLEY BK 07/20/2009 11/24/2009 244,718 245,000 -282. PRIME FUND DAILY MONEY 13 13. CLASS

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

-2,766.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer

Employer identification number

Long-Term Capital Gains and (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
a PRIME FUND DAILY MONEY	(mo , day, yr)			mad decions,	
CLASS			2.		2
					——————————————————————————————————————
					· · · · · · · · · · · · · · · · · · ·
			<u> </u>		
		<u> </u>			
					<u></u>
			 		
					·····

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		NS AND LO			INVEST	P	Date	Date sold
Kind of F		Description Cost or FMV Adu basis Excess of			6	acquired Gain	5410 3010	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	FMV over adj basis		or (loss)	
CAPCINES OF SAILE 1	anowable	Dasis	TZ/J II MS	12/01/00				
		425,000 U.S.	TREASURY	BONDS			04/08/2009	11/20/2009
425,925.		425,000.					925.	i
		245,000 ASSO	CIATED BK	GREEN BAY			07/22/2009	11/24/2009
244,577.		245,000.					-423.	
		245,000 BANE	OF PERRY	CNTY			07/31/2009	11/24/2009
244,706.		245,000.					-294.	
		245,000 CRES	SCENT BK				08/07/2009	11/24/2009
244,711.		245,000.					-289.	
		245,000 FIRS	ST CTZNS NA	TL BK			07/29/2009	11/24/2009
244,699.		245,000.					-301.	
		245,000 FIRS	ST FED SVGS	BK			07/30/2009	11/24/2009
244,699.		245,000.					-301.	
		245,000 FIRS	ST NATL BK	& TR CO			07/29/2009	11/24/2009
244,606.		245,000.					-394.	
		245,000 HER	ITAGE CMNTY	BK			07/22/2009	11/24/2009
244,620.		245,000.					-380.	
		245,000 MIDI	LAND STS BK				07/27/2009	11/24/2009
244,633.		245,000.					-367.	
		245,000 SOUT	THCOAST CMN	TY BK			08/11/2009	11/24/2009
244,689.		245,000.					-311.	
		245,000 SOUT	THERN FIRST	вк			08/11/2009	11/24/2009
244,638.		245,000362.						
		<u> </u>				丄	l	L

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GA	AINS AND LO	ISSES FOI	R TAX ON	<u>INVESTI</u>	M	ENT INCOM	IE
Kind of Property		Desc	ription		2 20	Date acquired	Date sold
Gross sale Depreciation price less allowed/ expenses of sale allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
	245,000 VAL	LEY BK				07/20/2009	11/24/2009
244,718.	245,000.					-282.	
	PRIME FUND	DAILY MONEY	CLASS				1
13.						13.	
	PRIME FUND	DAILY MONEY	CLASS				
2.						2.	
TOTAL GAIN(LOSS)				• • • • • • •		-2,764.	
_							

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1 1 1 1 1 1 1	NONE	NONE
ADJUSTED NET INCOME	1 1 1 1 1 1	NONE	NONE
NET INVESTMENT INCOME		1,425.	1,425.
REVENUE AND EXPENSES PER BOOKS		1,425.	1,425.
			TOTALS
DESCRIPTION	!!!!!!!!!	SWANK & SALCH, P.C.	

FORM 990PF, PART I - TAXES

		CHARITABLE	PURPOSES		NONE	1	NONE	
	ADJUSTED	NET	INCOME		NONE		NONE	
	NET	INVESTMENT	INCOME	1 1 1 1	NONE		NONE	
REVENUE	AND	EXPENSES	PER BOOKS		3,952.		3,952.	
			DESCRIPTION		FEDERAL INCOME TAX EXPENSES		TOTALS	

STATEMENT

FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE PURPOSES		NONE	NONE
ADJUSTED NET INCOME		NONE	NONE
NET INVESTMENT INCOME		13.	13.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1		13.
			TOTALS
DESCRIPTION		BANK FEES	

- PREPAID EXPENSES AND DEFERRED CHARGES PART II FORM 990PF,

ENDING FMV 	4,000.
ENDING BOOK VALUE	4,000.
	TOTALS
DESCRIPTION	PREPAID INCOME TAX

STATEMENT

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

PRES, TREA

227 N. MITCHELL ELEANOR CROOK

SAN MARCOS, TX 78666

WILLIAM H. CROOK, JR.

VP, SEC

6433 LONG MEADOW

CORPUS CHRISTI, TX 78413

MARY ELIZABETH CROOK

VP

1510 WEST 24TH STREET AUSTIN, TX 78703

NOEL C. MOORE

۷P

3385 CHARLIE GRISSOM ASHBURN HALL

KITTRELL, NC 27544

GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

N/A

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND M

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

1,000.

TRUE VINEYARD MINISTRIES INC.

317 W SAN ANTONIO ST SAN MARCOS, TX 78666

RECIPIENT NAME AND ADDRESS

NONE

PUBLIC

MISSIONARY SUPPORT

TOTAL CONTRIBUTIONS PAID

1,000.

STATEMENT 7