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Form 990-PF

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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service

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

For Ca	alendar year 2009, or tax year beginning	, 2009,	and ending	. , , , , , , , , , , , , , , , , , , ,	
G Ch		al Return of a former p	´ r		al return
	Amended return	Address o			
Use	the CAMPANONIC FOUNDARION TO	NC	Α	Employer identification nur	nber
IRS la Other		NC	В	20-0052650 Telephone number (see the	mstructions)
pri	INT DOUGLASVILLE GA 30135		ا	678-357-2975	man decions)
or ty See Sp	/pe		c	If exemption application is	pending, check here
Instruc	ctions			1 Foreign organizations, chec	· •
Н	Check type of organization X Section 501((c)(3) exempt private for	oundation	2 Foreign organizations meet	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable to		private foundation	here and attach computation	
		ounting method X Ca	ash Acciual E	If private foundation status under section 507(b)(1)(A)	
		Other (specify)	F	If the foundation is in a 60	
►	· · · · · · · · · · · · · · · · · · ·	column (d) must be on	r cash basis)	under section 507(b)(1)(B)	, check here
Part	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	columns (b) (c) and (d) may not neces-	expenses per books	income	income	for charitable purposes
	sauly equal the amounts in column (a) (see the instructions))				(cash basis only)
	1 Contributions gifts grants etc received (att sch)		\$ ws , , , , , , , , , , , , , , , , , ,	2 g m, 3 (M, M, s.)	Mr. Problem March
	2 Ck X if the foundir is not req to all Sch 2		<i>i</i> , , , , ,		The rest of the state of the
	3 Interest on savings and temporary	421	121	431.	
	cash investments 4 Dividends and interest from securities	431.	431.	431.	
	5a Gross rents				A TO MAKE
	b Net rental income or (loss)		· · · · ·		
R	6a Net gam/(loss) from sale of assets not on line 10		×	* * * * * * * * * * * * * * * * * * * *	4 11 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
R E V	b Gross sales price for all assets on fine 65			* * * * * * * * * * * * * * * * * * * *	
Ė N	7 Capital gain net income (from Part IV line 2)			·	* V . *
Ŋ	8 Net short-term capital gain 9 Income modifications	·			
Ē	10 a Gross sales less religions and			* * * *	1 2 m 1 m
	allowances			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *
	b Less Cost of goods sold		· · · · · · · · · · · · · · · · · · ·		
	c Gross profit/(loss) (alt sch)		 · · · · · · · · · · · · · · · · · ·		**************************************
	11 Other income (attach schedule)				Contract Contract
0	12 Total. Add lines 1 through 11	431.	431.	431.	
2010	13 Compensation of officers directors trustees etc	0.	101.		
2	14 Other employee salaries and wages				
	15 Sension plans of marce benefits				
ک ۵	16 a Legal fees (attach schellule)	2.000	3 060		
LLI 🧗		3,868.	3,868.		
000	17 indexest				
	The state of the s				
→ R R	19 Depreciation (attach)				9 44 MARY () ()
	20 Occupancy 21 Travel, conferences, and meetings				
A E	1 * +				
D F	23 Other expenses (attach schedule)				
E N	The strain of th	106.	53.		53.
9 E	24 Total operating and administrative expenses Add lines 13 through 23	3,974	3,921.		53.
S	25 Contributions gifts, grants paid PART XV	22,468.	3,321.		22,468.
	26 Total expenses and disbursements.			_	
	Add lines 24 and 25	26,442.	3,921.	0.	22,521.
	27 Subtract line 26 from line 12. a Excess of revenue over expenses		* * * * * * * * * * * * * * * * * * *		, a
	and disbursements	-26,011.		* · · · · · · · · · · · · · · · · · · ·	* * *** * ****************************
	b Net investment income (if negative enter 0)	v v	0.	* * * * * * * * * * * * * * * * * * *	** \$\sum_{\alpha} \cdot \delta
	C Adjusted net income (if negative lenter 0-)		, , , , , , , , , , , , , , , , , , ,	431.	

Page 2

Part	11	Balance Sheets column should be for end of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Four Market Value
	1	Cash — non-interest-bearing	20,104.	18,662	(c) Fair Market Value 2. 18, 662.
•	2	Savings and temporary cash investments	158,789.	134,220	
	3	Accounts receivable	130, 709.	134,220	134,220.
	,	Less allowance for doubtful accounts			i
	4	Pledges receivable			
	_	Less allowance for doubtful accounts			~ -
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			-
	J	disqualified persons (attach schedule) (see the instructions)	10,000.	10,000	10,000.
	7	Other notes and loans receivable (attach sch)			
AS		Less allowance for doubtful accounts ▶			
š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
Ś	10	a Investments – U.S. and state government			
		obligations (attach schedule)	50.000		
		b Investments — corporate stock (attach schedule)	50,000.	50,000	50,000.
		c Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis.			
		Less accumulated depreciation (attach schedule)			
		Investments – mortgage loans.			
	13	Investments other (attach schedule)			
	14	Land, buildings, and equipment basis]
		Less accumulated depreciation (attach schedule)			
	15	`			
	10	Total assets (to be completed by all filers – see instructions. Also, see page 1, item l)	238,893.	212,882	212,882.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			1
В	19	Deferred revenue			!
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
Ĺ	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	C).
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted			
TN	25	Temporarily restricted			
ΔD	26	Permanently restricted .			
A S S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	238,893.	212,882	2.
R S	30	Total net assets or fund balances (see the instructions)	238,893.	212,882	2
	31	Total liabilities and net assets/fund balances (see the instructions)	238,893.	212,882	,
Part	III	Analysis of Changes in Net Assets or Fund Balance		212,002	··
1	Tota end-	I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return).	ımn (a), line 30 (must ag		238,893.
		er amount from Part 1, line 27a		-	2 -26,011.
		increases not included in line 2 (itemize).			3
		lines 1, 2, and 3			212,882.
		ases not included in line 2 (itemize).		<u></u>	5
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)) – Part II, column (b), II	ne 30	5 212,882.

(a) List and describe	e the kind(s) of property sold (e g , rese, or common stock, 200 shares MLC	al estate, (b) (company)	low acquired - Purchase - Donation	(C) Date acquired (month, day year)	(d) Date sold (month day, year)
1. N/A	-i	, ,, D-	- Donation		
1a N/A b				 	
c					
d					
· · · · · · · · · · · · · · · · · · ·				-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
C					
d					· ·
e					
	ing gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Coli	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	th	gain minus column (1 an -0-) or Losses (fi	<), but not less
a					
b					
С					
d					
e					
Part V Qualification Under (For optional use by domestic private If section 4940(d)(2) applies, leave t	e 8, column (c) (see the instructions) r Section 4940(e) for Reduced e foundations subject to the section 4 this part blank tion 4942 tax on the distributable ame	Tax on Net Investment In 940(a) tax on net investment in	come)	∏Yes	X No
	lify under section 4940(e). Do not con	, ,	iou '	L] res	V INO
	n each column for each year, see the	· · · · · · · · · · · · · · · · · · ·	entries	<u> </u>	····
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution umn (b) divided	
2008	29,374.	239,7	79.		0.122504
2007	26,370.	260,1			0.101349
2006	22,460.	254,2			0.088340
2005	27,380.	204,4			0.13391
2004	32,861.	260,3			0.126241
2 Total of line 1, column (d)		·	2		0.572349
Average distribution ratio for the number of years the foundation.	ne 5-year base period – divide the tot n has been in existence if less than 5	al on line 2 by 5, or by the years	3		0.114470
4 Enter the net value of nonchar	itable-use assets for 2009 from Part)	K, line 5	4		222,500
5 Multiply line 4 by line 3			5		25,470
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		25,470
8 Enter qualifying distributions fr			8		22,521
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI, I	ine 1b, and complete that part	using a 19		he ຠ 990-PF (2009

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	990-PF (2009) GAVRANOVIC FOUNDATION, INC. 20-00526			Р	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the inst	ruction	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				ا ۇ_
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
k	Domestic foundations that meet the section 4940(e) requirements in Part V,				0.
	check here ► _ and enter 1% of Part I, line 27b				į
C	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only Others enter -0-)				<u>0.</u>
3	Add lines 1 and 2.				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		·		0.
ь	Credits/Payments				
	2009 estimated tax pmts and 2008 overpayment credited to 2009				ļ
	Exempt foreign organizations — tax withheld at source 6b				i
	: Tax paid with application for extension of time to file (Form 8868) 6c 6d				'
	Backup withholding erroneously withheld Tatal gradita and normanta. Add times for through 6d.				Δ,
,	Total credits and payments Add lines 6a through 6d 7				0.
٥	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
10					0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded 10				
Par	Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded 11 t VII-A Statements Regarding Activities				
		$\neg \top$	\neg	Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<u> </u>	1 a	163	X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	L.	1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published				1
	or distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?		1 c		_X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	_			
	(1) On the foundation \$ 0. (2) On foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0.			
Ĭ	foundation managers \Rightarrow \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	:	2		Χ
	If 'Yes,' attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
•	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	Ŀ	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	<u> </u>	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	!	5		X
	If 'Yes,' attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				
	with the state law remain in the governing instrument?		6		Χ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes.' complete Part II, column (c), and Part XV		7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) GA				
ŧ	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990 PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation		8ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5)			
10	for calendar year 2009 of the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part X Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	/V -!	9	<u>X</u>	
	and addresses	10			X
BAA		Form	990	1-PF (2009)

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Form 990-PF (2009) GAVRANOVIC FOUNDATION,	INC.	20-005265	0	Page 5
Part VII-A Statements Regarding Activities C	Continued			
11 At any time during the year, did the foundation, dire within the meaning of section 512(b)(13)? If 'Yes', a	ectly or indirectly, own a controlled entil attach schedule (see instructions)	iy	11	x
12 Did the foundation acquire a direct or indirect intere August 17, 2008?	est in any applicable insurance contract	before	12	X
13 Did the foundation comply with the public inspection	•	id exemption application?	13	Х
4	N/A			
14 The books are in care of ► KENNETH GAVRAN Located at ► SAME AS PAGE ONE	1001C	ZIP + 4 ►	2/-25	2/5
15 Section 4947(a)(1) nonexempt charitable trusts film	g Form 990-PF in lieu of Form 1041 –			<u>-</u> -
and enter the amount of tax-exempt interest receive		▶ 15		N/A
Part VII-B Statements Regarding Activities for	<u>or Which Form 4720 May Be Re</u>	quired		
File Form 4720 if any item is checked in the 'Yes' of	olumn, unless an exception applies.			Yes No
1 a During the year did the foundation (either directly o	indirectly)			
(1) Engage in the sale or exchange, or leasing of p	roperty with a disqualified person?	∐Yes X No		
(2) Borrow money from, lend money to, or otherwis disqualified person?	se extend credit to (or accept it from) a	Yes X No		
(3) Furnish goods, services, or facilities to (or acce	pt them from) a disqualified person?	Yes X No		
(4) Pay compensation to, or pay or reimburse the e	expenses of, a disqualified person?	Yes X No		
(5) Transfer any income or assets to a disqualified for the benefit or use of a disqualified person)?	person (or make any of either available	Yes X No		į
(6) Agree to pay money or property to a governme foundation agreed to make a grant to or to emp of government service, if terminating within 90	ploy the official for a period after termin	e ation Yes X No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the ac Regulations section 53 4941(d)-3 or in a current no	ets fail to qualify under the exceptions di lice regarding disaster assistance (see	lescribed in the instructions)?	1 b	N/A
Organizations relying on a current notice regarding	disaster assistance check here	▶ 🗍		
c Did the foundation engage in a prior year in any of that were not corrected before the first day of the ta	the acts described in 1a, other than exc ax year beginning in 2009?	cepted acts,	1c	Х
2 Taxes on failure to distribute income (section 4942) private operating foundation defined in section 4942	(does not apply for years the foundation $(2(1)(3))$ or $(4)(4)(5)$	on was a		
a At the end of tax year 2009, did the foundation have and 6e, Part XIII) for tax year(s) beginning before 2	e any undistributed income (lines 6d 0009?	Yes X No		
If 'Yes,' list the years ► 20, 20, 20	_ , 20		1 1	
b Are there any years listed in 2a for which the found (relating to incorrect valuation of assets) to the yea all years listed, answer 'No' and attach statement -	r's undistributed income? (If applying se	section 4942(a)(2) ection 4942(a)(2) to	2ь	N/A
c If the provisions of section 4942(a)(2) are being app	· ·	t the years here	20	N/A
► 20, 20, 20				'
3a Did the foundation hold more than a 2% direct or in enterprise at any time during the year?	direct interest in any business	Yes X No		
b If 'Yes,' did it have excess business holdings in 200 or disqualified persons after May 26 1969, (2) the liby the Commissioner under section 4943(c)(7)) to c (3) the lapse of the 10-, 15-, or 20-year first phase of the foundation had excess business had	apse of the 5-year period (or longer per lispose of holdings acquired by gift or b holding period? (Use Schedule C, Form	riod approved equest, or	3b	N/A
4a Did the foundation invest during the year any amou charitable purposes?	nt in a manner that would jeopardize its	5	4a	Х
b Did the foundation make any investment in a prior jeopardize its charitable purpose that had not been the tax year beginning in 2009?		day of	4b	X
BAA		Fo	rm 990)-PF (2009)

Part VII P Statements Degrading Activity		. 4700 May Da Dan		52650	Page 6
Part VII-B Statements Regarding Activit 5a During the year did the foundation pay or incu		1 4/20 IVIAY BE REQ	uirea (continuea)		 ,
(1) Carry on propaganda, or otherwise attempt	•	on (section 4945(e))?	☐ Yes X	No	
(2) Influence the outcome of any specific pub	-	, , , , , , , , , , , , , , , , , , , ,		J0	
on, directly or indirectly, any voter registra	ation drive?	1 4955), or to carry] No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc. o i 4940(d)(2)? (see insti	rganization described uctions)	Yes X] No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientifi in of cruelty to children	c, literary, or or animals?	Yes X] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	irding disaster assistan	ce check here	▶		1
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	•	N/A Yes] No	\$ 1 2 2 7
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive at on a personal benefit contract?			∐Yes X]No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	cily, on a personal bene	fit contract?	6b	X
7a At any time during the tax year, was the found	dation a party to a prof	nibited tax shelter transa	ection? Yes X	No	
b If yes, did the foundation receive any proceed	s or have any net incor	me attributable to the tra	ansaction?	7b	N/A
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employees,	
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see inst	ructions).		
	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	account.
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	
KENNETH GAVRANOVIC	PRESIDENT	0.	0.		0.
SAME AS PAGE ONE	0				
HEATHER GAVRANOVIC	SECRETARY	0			
SAME AS PAGE ON	O SECRETARI	0.	0.		0.
/					
2 Compensation of five highest-paid employee	 es (other than those inc	luded on line 1— see ır	nstructions). If none, e	nter 'NONE.'	
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred	other allow	<i>r</i> ances
NONE			compensation	<u> </u>	
NONE					
				ļ <u>-</u> -	
~					
		-		 	
Total number of other employees paid over \$50,000	<u>.</u>		•		0
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Form 990-PF (2009) GAVRANOVIC FOUNDATION, INC.	20-005	
Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	agers, Highly Paid Er	mployees,
Five highest-paid independent contractors for professional services — (see instructions) enter 'NONE.'	. If none,	
	ype of service	(c) Compensation
NONE	<u>ypo o: oooo</u>	(o) componication
		
Total number of others receiving over \$50,000 for professional services	•	. 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the number of	Expenses
5		·
1 <u>N/A</u>		
2		
	·	
3		
4	. 	
	· -	
	<u> </u>	
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax ye	ar on lines 1 and 2	Amount
1 N/A		
	· -	
2		
		
All other program-related investments See instructions		
3	·	
	·	
Total. Add lines 1 through 3	▶	0.
BAA		Form 990-PF (2009)

INC.

Form 990-PF (2009) GAVRANOVIC FOUNDATION,

Forr	1 990-PF (2009) GAVRANOVIC FOUNDATION, INC.	20-0052650	Page (
	Minimum Investment Return (All domestic foundations must complete this part. see instructions)		
	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities.	1 a	50,000.
- 1	Average of monthly cash balances	1 b	165,888.
,	Fair market value of all other assets (see instructions)	1 c	10,000.
(d Total (add lines 1a, b, and c)	1 d	225,888.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	225,888.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3,388.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	222,500.
6	Minimum investment return. Enter 5% of line 5	6	11,125.
Pa	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► X and do not complete this		itions
1		1	
	a Tax on investment income for 2009 from Part VI, line 5 Income tax for 2009 (This does not include the tax from Part VI) 2b	_	
	Add lines 2a and 2b		
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	
Pa	t XII Qualifying Distributions (see Instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	22,521.

b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.

Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule)

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 6 Adjusted qualifying distributions. Subtract line 5 from line 4

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

BAA

Form 990-PF (2009)

22,521

22,521

16

2

3a

3ь

4

5

art XIII Undistributed Income (see Instruc		N/A	,, — I	
•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20, 20, 20				
Excess distributions carryover, if any, to 2009	****			
a From 2004				
b From 2005				
c From 2006				
d From 2007			•	
e From 2008				
f Total of lines 3a through e				
Qualifying distributions for 2009 from Part				
XII, line 4 ► \$				
a Applied to 2008, but not more than line 2a				
	F			
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus				
Excess distributions carryover applied to 2009				
(If an amount appears in column (d) the				
same amount must be shown in column (a))				
Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b 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 instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
B Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)				
Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a			·	17 V - 1 8
Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
A				Form 990-PF

1a If the foundation has received a ruling or of	determination letter t				
is effective for 2009, enter the date of the	ruling			•[1040()(5)
b Check box to indicate whether the foundat		ating foundation des		X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
investment return from Part X for each year listed	431.	3,596.	13,010.	12,712.	29,749.
b 85% of line 2a	366.	3,057.	11,059.	10,805.	25,287.
c Qualifying distributions from Part XII, line 4 for each year listed	22,521.	29,379.	26,370.	22,460.	100,730.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	22,521.	29,379.	26,370.	22,460.	100,730.
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	7,416.	7,992.	8,673.	8,474.	32,555.
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during th	(Complete this p	part only if the or	rganization ha	d \$5,000 or mor	e in
Information Regarding Foundation Managers a List any managers of the foundation who I close of any tax year (but only if they have SEE STATEMENT 3	gers: nave contributed more contributed more th	e than 2% of the tol nan \$5,000) (See se	ection 507(d)(2))	·	
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corpo % or greater interes	ration (or an equa t	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions t s gifts, grants, etc, (o preselected charit see instructions) to	able organizations individuals or orga	anızatıons under oth	•
a The name, address, and telephone numbe	er of the person to w	hom applications sh	ould be addressec	i	
SEE STATEMENT 4					
b The form in which applications should be	submitted and inform	nation and materials	they should include	de	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards, s	such as by geograph	ical areas, charitable	e fields, kinds of ii	nstitutions, or other	factors
SEE STATEMENT FOR LINE 2A					
ВАА	TEE	A0310L 07/06/09		F	orm 990-PF (2009)

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
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)	substantial contributor	recipient		
a Paid during the year SEE STATEMENT 5				
			~	
Total			► 3a	22,468.
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gros	s amounts unless otherwise indicated		ed business income		1 by section 512, 513, or 514	.
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
_	ram service revenue			code		(see the instructions)
				 		
				1		
f		į į		ļ		
_	and contracts from government agencies					
	bership dues and assessments		<u> </u>	1 1 4	421	
	st on savings and temporary cash investments lends and interest from securities			14	431.	
	ental income or (loss) from real estate			1		
	-financed property			 		
	debt-financed property					
6 Net re	ntal income or (loss) from personal property					
7 Othe	r investment income					
	or (loss) from sales of assets other than inventory					
	ncome or (loss) from special events			-		
	s profit or (loss) from sales of inventory revenue			-		
				1		<u> </u>
				1		
_						
е						
					404	
12 Subt	otal Add columns (b), (d), and (e)			ļ	431.	
12 Subte	I. Add line 12, columns (b), (d), and (e).	L			131.	431.
12 Subto 13 Total See works	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca			<u> </u>	13	431.
12 Subto 13 Total See works	I. Add line 12, columns (b), (d), and (e).		ishment of Exemp	t Purp	13	431.
12 Subto 13 Total See works	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			13 Oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	431.
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	
12 Subtraction 13 Total See works Part XVI Line No.	I. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca B Relationship of Activities to the	Accompli			oses	

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Form **990-PF** (2009)

Fo	rm 990-F		OVIC FOUN						20-005			age 13
Pa	art XVII	Information R Exempt Organ	egarding Tr	ransfers ⁻	To and Ti	ransactio	ns ar	nd Relationsh	nips With Nonc	haritable	•	
		Exempt Organ	ilizations							<u> </u>	Yes	No
	1 Did th	ie organization directly ibed in section 501(c) ng to political organiza	y or indirectly of the Code (o	engage in a other than s	iny of the fo ection 501(ollowing wit c)(3) organ	h any d lization	other organizations) or in sections	on 527,		res	NO
		ig to political organiza fers from the reportin		a nonchari	itable exem	nt organiz:	ation of	ţ.		ļ		
	(1) C		g roundation to	, a morroman	nable exem	ipt organize	3(1011 01			1 a (1)		Х
		ther assets								1a (2)		Х
	b Other	transactions										
	(1) S	ales of assets to a no	ncharitable exe	empt organi	ızatıon					1b(1)		X
	(2) P	urchases of assets fro	om a noncharit	able exemp	ıt organizatı	ion				1 b (2)		Х
	(3) R	ental of facilities, equ	ipment, or othe	er assets						1b (3)		Х
	(4) R	eimbursement arrang	ements							1 b (4)		Х
		oans or loan guarante								1 b (5)		X
	٠,	erformance of service		•	•					1 b (6)		Х
	c Sharu	ng of facilities, equipn	nent, mailing li	sts, other a	ssets, or pa	aid employ	ees			1c	<u>i</u>	Х
	d If the the go	answer to any of the oods, other assets, or ansaction or sharing a	above is 'Yes,' services given arrangement, s	complete to by the reposition in colu	the following orting found umn (d) the	g schedule dation If th value of th	Colum e found e good	nn (b) should alv dation received l ls, other assets,	vays show the fair less than fair marke or services receive	market val et value in ed	ue of	
) Line no	(b) Amount involved	(c) Name	of noncharitab	ile exempt orga	nnization	(d) Description of tran	nsfers, transactions, and	sharing arrai	ngemenl	ls
N	/ <u>A</u>											
												
_			 									
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_			 									
_												
												
					· · · · ·							
_												
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_												
_			<u> </u>									
	descr	foundation directly or ibed in section 501(c) s,' complete the follow	of the Code (d	iated with, o other than s	or related to ection 501(o, one or m (c)(3)) or in	ore tax section	k-exempt organi n 527?	zations	Yes	s X	No
_		(a) Name of organiza	tion	(b)) Type of or	rganızatıon		(0) Description of rel	ationship		
<u>N</u>	/A											
_												
_					· .							
_								+				
	Under nena	alties of perjury. I declare that	I I have examined t	his return, inclu	iding accompan	vino schedules	and stat	ements, and to the he	est of my knowledge and	helief it is tru	e corre	rl and
	complete I	Declaration of preparer (other	than taxpayer or fr	duciary) is base	ed on all inform	iation of which	preparer	has any knowledge	est of my knowledge and	ocher, it is tro		C(, G/,G
s	► £	Kacher	h	<u> </u>	Wet	ary		11/12/10	► Secr	eta	\mathcal{V}	
S I G N	Sign	ature of officer or trustee					Dat		Title	/	<u> </u>	
N HERE	Paid Pre-	Preparer's signature	11/1	Bia	2,0	1	Da 1:	^{te} 1/11/10	Check if (See	parer's Identify Signature in 0197660	the inst	iber irs)
	parer's				50.01							
	Use Only	yours if self employed) 1832	2 INDEPENI WOODY, GA	DENCE SO	QUARE, S	STE. A				70) 512	-760	00
_	L								, \ / /	-,		

FEDERAL STATEMENTS

PAGE 1

GAVRANOVIC FOUNDATION, INC.

20-0052650

STATEMENT 1 FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES**

(A)	(B) NET	(C)	(D)
EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
PER BOOKS	INCOME	NET_INCOME	PURPOSES

ACCOUNTING FEES

3,868. \$ 3,868. \$ 3,868. 3,868. \$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	TOTAL	\$ 106. \$ 106.	\$ 53. \$ 53.	\$ 0.	\$ 53. \$ 53.

STATEMENT 3 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

KENNETH GAVRANOVIC HEATHER GAVRANOVIC

STATEMENT 4 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM:

NAME:

KENNETH GAVRANOVIC

CARE OF:

STREET ADDRESS:

P.O. BOX 7015

CITY, STATE, ZIP CODE: TELEPHONE:

DOUGLASVILLE, GA 30154

FORM AND CONTENT:

WRITTEN REQUESTS ONLY

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS:

PREFERENCE GIVEN TO ORGANIZATIONS LOCATED OR OPERATING IN

THE SOUTHEASTERN UNITED STATES

2009.	FEDERAL STATEMENTS	PAGE 2
	GAVRANOVIC FOUNDATION, INC.	20-0052650
CTATERRENT S		

STATEMENT 5 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	A <u>M</u>	OUNT
ST. JULIANS EPISCOPAL CHURCH 5400 STEWARTS MILL ROAD DOUGLASVILLE, GA 30135	NONE	PUBLIC	RELIGIOUS	\$	9,500.
THE BEDFORD SCHOOL 5665 MILAM ROAD FAIRBURN, GA 30213	NONE	PUBLIC	EDUCATION AND RECREATION		830.
BOYS AND GIRLS CLUB OF METRO ATLANTA 8828 GURLEY ROAD DOUGLASVILLE, GA 30134	NONE	PUBLIC	EDUCATION AND RECREATION		5,500.
JUNIOR LEAGE OF DOUGLAS COUNTY P.O. BOX 1324 DOUGLASVILLE, GA 30133	NONE	PUBLIC	EDUCATION AND RECREATION		508.
WEST ATLANTA/DOUGLAS CHORAL SOCIETY, INC PO BOX 6471 DOUGLASVILLE, GA 30154	NONE	PUBLIC	EDUCATION AND RECREATION		1,680.
SHARE HOUSE P.O. BOX 723 DOUGLASVILLE, GA 30133	NONE	PUBLIC	DOMESTIC VIOLENCE		4,300.
CHAPEL HILL CHRISTIAN SCHOOL 5357 CHAPEL HILL RD., DOUGLASVILLE, GA 30135	NONE	PUBLIC	RELIGIOUS		150.
			TOTA	L \$	22,468.

Form **8868** (Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

interna Revenue	Service	The a separate application for each return.				
If you are	filing for an Automatic 3-Month	Extension, complete only Part I and check this box			► X	
		tomatic) 3-Month Extension, complete only Part II (on	page 2 of th	ıs form)		
-	-	ady been granted an automatic 3-month extension on a		•		
Part I	Automatic 3-Month Extens	sion of Time. Only submit original (no copies	needed).			
A corporation	required to file Form 990-T and	requesting an automatic 6-month extension — check the	his box and	complete Part I only	▶ 🗌	
All other corp), partnerships, REMICS, and trusts must use Form 700	04 to reques	t an extension of tim	ne to file	
returns noted the additional Form 990-T	l below (6 months for a corporati I (not automatic) 3-month extens	electronically file Form 8868 if you want a 3-month auto on required to file Form 990-T). However, you cannot fi sion or (2) you file Forms 990-BL, 6069, or 8870, group by completed and signed page 2 (Part II) of Form 8868 e-file for Charities & Nonprofits	ıle Form 886 returns, or a	68 electronically if (1) a composite or conso) you want olidated	
	Name of Exempt Organization			Employer identification i	number	
Type or						
print	GAVRANOVIC FOUNDATIO	ON, INC.		20-0052650		
File by the	Number, street, and room or suite number	_ <u> </u>		120 0002000		
due date for filing your return See instructions	3811 HIGHWAY 166 City town or post office state, and ZIP co	do For a favorir address, see instructions		,,, <u> </u>		
Chaok tuna a	DOUGLASVILLE, GA 301					
Form 990	of return to be filed (file a separa	¬ ''	П ганна 47′	20		
Form 990	}	Form 990-T (corporation)	Form 472			
		Form 990-T (section 401(a) or 408(a) trust)	Form 522			
Form 990		Form 990-T (trust other than above)	Form 606			
If the orga If this is f check this the exten I reques until The ext	or a Group Return, enter the orgs box If it is for part of sion will cover st an automatic 3-month (6 mont 8/15, 20 _10, to file ension is for the organization's r calendar year 20_09 _ or		the names a			
▶ ∐	tax year beginning	, 20, and ending, 20				
2 If this ta	ax year is for less than 12 month	s, check reason Initial return Final retur	rn C	Change in accounting	period	
	pplication is for Form 990-BL, 99 ndable credits. See instructions	90-PF, 990-T, 4720, or 6069, enter the tentative tax, les	ss any	3a \$	0.	
	pplication is for Form 990-PF or nclude any prior year overpayme	990-T, enter any refundable credits and estimated tax ent allowed as a credit	payments	3ь\$	0.	
deposit	e Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment Syst	l, tem)	3c \$	0.	
Caution. If yo payment instr		nic fund withdrawal with this Form 8868, see Form 8453	8-EO and Fo	rm 8879-EO for		
BAA For Priv	vacy Act and Paperwork Reduct	ion Act Notice, see instructions.		Form 8868 (F	ev 4-2009)	

Form 8868	(Rev 4-2009)			Page 2				
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete onl	y Part II and check t	his box	► X				
Note. Only	complete Part II if you have already been granted an automatic 3-month extension	ension on a previous	sly filed Form 8868					
	re filing for an Automatic 3-Month Extension, complete only Part I (on page							
Part II	Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).							
Type or	Name of Exempt Organization		Employer identification	number				
print	GAVRANOVIC FOUNDATION, INC.	15 1 15 15 15 15	20-0052650					
File by the extended	Number, street and room or suite number if a PO box, see instructions ROBERT S. BLAD, P.C.		For IRS use only					
due date for filing the	1832 INDEPENDENCE SQUARE, STE. A		· · · · · · · · · · · · · · · · · · ·	1. m = 20 3				
return See	City, town or post office, state and ZIP code. For a foreign address, see instructions			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	DUNWOODY, GA 30338	1 day 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
Check type	of return to be filed (File a separate application for each return)							
Form 9	90 X Form 990-PF	Form 1041-A	ΠF	orm 6069				
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	∏F	orm 8870				
Form 9	90-EZ Form 990-T (trust other than above)	Form 5227						
STOP! Do	not complete Part II if you were not already granted an automatic 3-month e	xtension on a previo	ously filed Form 8	868.				
The boo	ks are in care of ► KENNETH GAVRANOVIC							
Telepho	one No ► 678-357-2975 FAX No ►							
If the or	rganization does not have an office or place of business in the United States	, check this box		▶ □				
• If this is	s for a Group Return, enter the organization's four digit Group Exemption Nu	mber (GEN)		If this is for the				
	p, check this box If it is for part of the group, check this box		th the names and	EINs of all				
members ti	ne extension is for	•						
	lest an additional 3-month extension of time until $11/15$, 20	10						
	alendar year 2009, or other tax year beginning, 20			, 20				
	tax year is for less than 12 months, check reason Initial return	Final return	Change in acc	ounting period				
7 State	in detail why you need the extension TAXPAYER RESPECTFULLY	REQUESTS AD	DITIONAL TIN	ME TO				
GAT	HER INFORMATION NECESSARY TO FILE A COMPLETE AND	ACCURATE TA	X RETURN.					
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentifundable credits. See instructions	ative tax, less any	8a \$	0.				
	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable ents made. Include any prior year overpayment allowed as a credit and any							
	orm 8868		8b\$	<u> </u>				
c Balan with F	ice Due. Subtract line 8b from line 8a. Include your payment with this form, of TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	or, if required, depos System) See instr	sit s 8c\$	0.				
	Signature and Verificatio	n						
Under penaltie	s of perjury. I declare that I have exammed this form, including accompanying schedules and statemen implete, and that I am authorized to prepare this form.	ts, and to the best of my kr	nowledge and belief, it is	lrue,				
Signature	But I mal to the Title - (M		Date ►	2/9/10				
3.2.3.0								