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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

OMB No 1545-0052

2009

| For | caten | dar year 2009, or tax yea | ar beginning | | , and ending | | |
|------------------------|-----------------|---|--|--|---------------------------------------|---|---|
| G | heck | all that apply | Initial return | | ormer public charity | Final return | 1 |
| | | | Amended return | Address chan | ge | Name change | |
| Use | the | RS Name of foundation | | | | A Employer identification | n number |
| | abel. | OTTO DAME | TTV EQUADANT | ON THE | | 20-0102620 | • |
| _ | erwi | ·*· | LY FOUNDATI O box number if mail is not de | | Room/suite | | <u> </u> |
| | print r type | | | envered to street address) | Roomvsuite | B Telephone number | 0.7.7 |
| | Spec | 1610 | | | | (941)951-1 | |
| | ructio | I LIIV OF IOWN STATE A | | | | C If exemption application is p | |
| | | | | | | Foreign organization Foreign organizations micheck here and attach co | S, CRECK Rere |
| HU | _ | | X Section 501(c)(3) ex | | .4 | check here and attach co | omputation |
| <u> </u> | | ction 4947(a)(1) nonexem | | Other taxable private foundand method X Cash | | E If private foundation sta | itus was terminated |
| | | rket value of all assets at (| · 1 — | • | Accrual | under section 507(b)(1 | |
| | om i ·\$ | Part II, col. (c), line 16) Q Q S | | her (specify) mn (d) must be on cash l | haeie) | F If the foundation is in a under section 507(b)(1 | |
| | irt l | | | | | | (d) Disbursements |
| 10 | irt i | (The total of amounts in colu | nd Expenses imns (b), (c), and (d) may not nts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | for chantable purposes (cash basis only) |
| | 1 | Contributions, gifts, gran | | . , | | N/A | (Cash basis only) |
| | 2 | Check X if the foundation | | | | | |
| | 3 | Interest on savings and temperate investments | orary | | <u> </u> | | l |
| <u></u> | 4 | Dividends and interest fro | | 35,325. | 35,325. | | STATEMENT 1 |
| 2010 | 52 | Gross rents | om socamos | 00,0200 | 00,0201 | | |
| | | Net rental income or (loss) | | | | | |
| ₩ | | Net gain or (loss) from sale of | essets not on line 10 | <16,271. | > | <u> </u> | |
| AUG 1 Revenue | h | Gross sales price for all assets on line 6a | 90,226. | | | | |
| ₩. | 7 | Capital gain net income (from | | ` | 0. | | |
| | 8 | Net short-term capital ga | | | | FRECE | N/FD A |
| SCANNED | g | Income modifications | | | | REUL | 101 |
| 뾜 | 10a | Gross sales less returns and allowances | | | | | 0 |
| Z | ь | Less Cost of goods sold | | | · · · · · · · · · · · · · · · · · · · | B AUG 0 | 6 2010 6 |
| | C | Gross profit or (loss) | | | | 0 | 2 |
| Ś | 11 | Other income | | | | OGD | EN UT |
| | 12 | Total. Add lines 1 throug | ıh 11 | 19,054. | 35,325. | 000 | |
| | 13 | Compensation of officers, dire | ectors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries a | and wages | | | | |
| | 15 | Pension plans, employee | benefits | | | | |
| enses | 16a | Legal fees | | | | | |
| e u | b | Accounting fees | | | | | |
| Ä | C | Other professional fees | STMT 2 | 6,648. | 0. | _ | 0. |
| ĕ. | 17 | Interest | _ | | | | |
| and Administrative Exp | 18 | Taxes | STMT 3 | 1,123. | 0. | | 0. |
| nis. | 19 | Depreciation and depletion | on | _ | | | |
| Ę | 20 | Occupancy | | | | | |
| Ă | 21 | Travel, conferences, and | meetings | | | | |
| au | 22 | Printing and publications | 1 | | | _ | |
| <u>n</u> | 23 | Other expenses | | | | | |
| Operating | 24 | Total operating and adm | | | _ | | |
| <u>а</u> | | expenses. Add lines 13 t | - | 7,771. 53,710. | 0. | | 52 710 |
| | 25 | Contributions, gifts, gran | • | 53,/10. | | | 53,710. |
| | 26 | Total expenses and dish | oursements. | 61 401 | • | | 52 710 |
| | - | Add lines 24 and 25 | | 61,481. | 0. | <u> </u> | 53,710. |
| | | Subtract line 26 from line | | -A2 A27 | | | |
| | l | Excess of revenue over exper | | <42,427. | 35,325. | | |
| | l | Net Investment income (| · · | | 33,323. | N/A | |
| 0226 | | Adjusted net income (if n | egative, enter -0-) | L | <u> </u> | 1 N/A | - 000 DF (0000) |

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Form **990-PF** (200

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2009.04000 SWIFT FAMILY FOUNDATION,

| m | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | f year |
|----------------------------|---------------|--|--------------------|---|---------------------------|
| | arı | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 172,617. | 189,577. | 189,577. |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable | | | |
| | 1 | 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 | | | <u> </u> |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | |
| | ' | Less allowance for doubtful accounts ▶ | | | |
| y, | 8 | Inventories for sale or use | | | |
| Assets | | Prepaid expenses and deferred charges | 1,065. | | |
| As | | Investments - U S and state government obligations STMT 4 | 122,381. | 119,753. | 119,753. |
| | 1 | Investments - corporate stock STMT 5 | 630,200. | 689,571. | 689,571. |
| | 1 | Investments - corporate bonds | , | , | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | ' ' | Less. accumulated depreciation | ĺ | • | |
| | 12 | Investments - mortgage loans | · - · - | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | | | |
| | '* | Less: accumulated depreciation | f | | |
| | 45 | | | | |
| | 15 | Other assets (describe | | | |
| | 4.0 | Total assets (to be assessabled by all filers) | 926,263. | 998,901. | 998,901. |
| _ | $\overline{}$ | Total assets (to be completed by all filers) | 720,203. | 770,701. | 770,701. |
| | | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ies | 19 | Deferred revenue | | | |
| Ē | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Liabilities | 21 | Mortgages and other notes payable | | · | |
| | 22 | Other liabilities (describe | | | |
| | | | | ^ | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | ĺ | Foundations that follow SFAS 117, check here | | | |
| Ś | l_ | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ည | 24 | Unrestricted | | | |
| a a | 25 | Temporarily restricted | | | |
| 8 | 26 | Permanently restricted | | | |
| Š | | Foundations that do not follow SFAS 117, check here | | | |
| Net Assets or Fund Balance | | and complete lines 27 through 31. | | ^ | |
| ts | 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| SSe | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | |
| Ä | 29 | Retained earnings, accumulated income, endowment, or other funds | 926,263. | 998,901. | |
| ž | 30 | Total net assets or fund balances | 926,263. | 998,901. | |
| | | | 006 060 | 000 001 | |
| | 31 | Total liabilities and net assets/fund balances | 926,263. | 998,901. | |
| p | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| | | | | | |
| 1 | | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | 026 262 |
| | | t agree with end-of-year figure reported on prior year's return) | | 1 | 926,263. |
| 2 | | amount from Part I, line 27a | ARTH ON THURS | DMENIII C | <42,427.> |
| 3 | | · · · · · · · · · · · · · · · · · · · | GAIN ON INVEST | | 115,065. |
| | | ines 1, 2, and 3 | | 4 | 998,901. |
| 5 | | eases not included in line 2 (itemize) | | 5 | 0. |
| <u>6</u> | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | olumn (b), line 30 | 6 | 998,901. |
| | | | | | Form 990-PF (2009) |

| Part IV Capital Gains a | and Losse | s for Tax on In | vestment | Income | | | | | | |
|--|------------------------------------|--|------------------------------------|----------------------|-------------|-----------------------------|-----------------------|---|-------------------------------|---------------------------------------|
| (a) List and descr 2-story brick war | ibe the kind(s) rehouse, or co | of property sold (e g mmon stock, 200 shs | , real estate, MLC Co) | | ΙP | How ac - Purcl - Dona | hase 1 | (c) Date a (mo , d | | (d) Date sold (mo , day, yr) |
| 1a SEE SCHEDULE AT | | | | | | | P | | | |
| b SEE SCHEDULE AT | TACHEL | <u> </u> | | | | | P | | | |
| <u>C</u> | | | | | | | | | | |
| <u>d</u> | | <u>-</u> | | | \vdash | | | | | |
| <u>e</u> | (f) Denre | ciation allowed | (n) Cos | t or other basis | 1 | | | (h) G: | aın or (loss) | · · · · · · · · · · · · · · · · · · · |
| (e) Gross sales price | | allowable) | | xpense of sale | | | | | s (f) minus (| |
| a 16,092. | | | | 16,75 | | | | | | <661. |
| b 74,134. | | | | 89,74 | 4. | | | | | <15,610. |
| С | | | | | | | | | | |
| d | | | | | - | | | | | |
| Complete only for assets showing | n nain in colun | on (h) and owned by t | he foundation | on 12/31/60 | | | //\ | Cause /C | 'al /b\ asia | |
| Complete only for assets showing | | justed basis | | cess of col (I) | | | | | iol (h) gain not less thar | |
| (i) F M V as of 12/31/69 | | f 12/31/69 | | col (j), if any | | | | Losses | (from col (| h)) |
| a | | | - | | | | | | | <661. |
| b | | | | | | | | | | <15,610. |
| C | | | | | | | | | | |
| <u>d</u> | | | | | | | | | | |
| <u>e</u> | | | | | | | | | | |
| 2 Capital gain net income or (net cap | pital loss) | If gain, also enter If (loss), enter -0- | ın Part I, line ın Part I, line | 7 7 | } | 2 | | | | <16,271. |
| 3 Net short-term capital gain or (los | s) as defined ii | n sections 1222(5) an | d (6) | | ` | | | | | |
| If gain, also enter in Part I, line 8, | column (c) | | | | • | | | | N/A | |
| Part V Qualification U | nder Sect | ion 4940(a) for | Reduced | Tay on Net | Inv | estn | ent Inc | ome | N/A | . — |
| If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation does not quality. | ion 4942 tax o fy under section | on 4940(e) Do not co | mplete this pa | rt . | | | | · • • • • • • • • • • • • • • • • • • • | | Yes X No |
| 1 Enter the appropriate amount in e | ach column to | | actions before | making any entri | | | | | | (d) |
| Base periód years Calendar year (or tax year beginnin | ıgın) A | (b) djusted qualifying dist | | Net value of no | (c) ncha | rıtable- | | | Distrib (col (b) div | oution ratio rided by col. (c)) |
| 2008 | | | 6,565. | | | | 6,802 | | | .062379 |
| 2007 | | | 1,500. 9,500. | | | | 4,343 6,551 | | | .058095 |
| 2006 | | | 0,386. | | | | $\frac{0,331}{0,772}$ | | | .054983 |
| 2004 | | | 1,963. | | | | $\frac{6,240}{6}$ | | | .071962 |
| 2 Total of line 1, column (d) | | | | | _ | | | 2 | | .306829 |
| 3 Average distribution ratio for the 5 | • | | on line 2 by 5, | or by the number | of ye | ears | | | | .061366 |
| the foundation has been in exister | ice it less than | o years | | | | | | 3 | | |
| 4 Enter the net value of noncharitab | le-use assets f | or 2009 from Part X, I | ine 5 | | | | | 4 | | 900,286. |
| 5 Multiply line 4 by line 3 . | | | | | | | | 5 | | 55,247. |
| 6 Enter 1% of net investment incom | ie (1% of Part | I, line 27b) | | | | | | 6 | | 353. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 55,600. |
| 8 Enter qualifying distributions from | n Part XII, line | 4 | | | | | | 8 | | 53,710. |
| If line 8 is equal to or greater than | | | 1b, and comp | olete that part usin | ıg a 1 | % tax ı | rate | | | |
| See the Part VI instructions 923521 02-02-10 | | | | | | | <u> </u> | | F | orm 990-PF (2009) |

| Form | 1990-PF (2009) SWIFT FAMILY FOUNDATION, INC. | | | 01026 | | | Page 4 |
|------|---|------------|-------|----------------|---------|-----------|----------------|
| Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e) | , or 49 | 948 - | see in: | stru | ctio | ns) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary-see instructions) | | | İ | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | · [| 1 | | | 7 | 07. |
| | of Part I, line 27b | | | | | | |
| | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | | | | | _ |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | - | 2 | <u> </u> | | | <u>0.</u> |
| 3 | Add lines 1 and 2 | | 3 | | | <u> 7</u> | 07. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | ļ | 5 | | | / | 0/. |
| | Credits/Payments | .05 | | | | | |
| | | 85. | | | | | |
| | Exempt foreign organizations - tax withheld at source Toward with continuous for water to file (Form 9969) | | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d | | | | | | |
| | Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d | | 7 | | | 1 n | 85. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | 8 | - | | 1,0 | 03. |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | • | 9 | | | | |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 10 | _ | | 3 | 78. |
| | Enter the amount of line 10 to be Credited to 2010 estimated tax 378 - Refund | ed 🕨 | 11 | - | | | 0. |
| | rt VII-A Statements Regarding Activities | | | | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in | tervene i | n n | | | Yes | No |
| | any political campaign? | | | | 1a | | Х |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for defini | tion)? | | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials po | ublished | or | [| | | |
| | distributed by the foundation in connection with the activities. | | | | - | | |
| C | Did the foundation file Form 1120-POL for this year? | | | _ | 10 | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | _ | | | | : | |
| | (1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ | 0. | | - | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | ın | | | | | |
| | managers > \$O. | | | | | | ., |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | ļ . | 2 | | X |
| _ | If "Yes," attach a detailed description of the activities. | . 4 | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpo | ration, oi | • | ŀ | | | Х |
| 4- | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | - | 3 4a | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? | | N | / | 4b | | -^- |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | - ' | ′ • • | 5 | | X |
| J | If "Yes," attach the statement required by General Instruction T. | | | | | | ļ <u></u> - |
| 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 t | he state | law | | | | |
| | remain in the governing instrument? | | | | 6 | | X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | | 7 | X | |
| | If "Yes," complete Part II, col. (c), and Part XV. | | | [" | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) FL | | | | | | |
| b | If 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 General Instruction G? If "No," attach explanation | | | Ĺ | 8b | X | <u> </u> |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | for caler | dar | Γ | | | |
| | year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | L | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresse | s | | | 10 | | X |
| | | | | Form | 990 | -PF (| (2009) |

X

Х

3b

4a

Yes X No

N/A

statement - see instructions)

during the year?

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

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

| Form 990-PF (2009) SWIFT FAMILY FOUNDATION | £ | | 20-010262 | 20 Page 6 |
|--|---|---|--|---|
| Part VII-B Statements Regarding Activities for Which | Form 4720 May Be F | Required (contin | ued) | |
| 5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section). (2) Influence the outcome of any specific public election (see section 4955). | | | s X No | |
| any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purpose | | Ye | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organizat 509(a)(1), (2), or (3), or section 4940(d)(2)? | ion described in section | Ye | es X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literar the prevention of cruelty to children or animals? | | Ye | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u section 53 4945 or in a current notice regarding disaster assistance (see inst | ructions)? | n Hegulations | N/A 5 | b |
| Organizations relying on a current notice regarding disaster assistance check c If the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant? | from the tax because it maintai | | es No | |
| If "Yes," attach the statement required by Regulations section 53.49 6a Did the foundation, during the year, receive any funds, directly or indirectly, t | • • | | | |
| a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | Ye | es X No | b X |
| If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax | | Ye | es X No | 75. |
| b If yes, did the foundation receive any proceeds or have any net income attributed in the foundation About Officers, Directors, Trus | | pagere Highly | | <u>'b </u> |
| Part VIII Paid Employees, and Contractors | stees, roundation ina | inagers, mgm | 1 | |
| 1 List all officers, directors, trustees, foundation managers and the | r compensation. | | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| JON F. SWIFT | PRESIDENT | | | |
| 2221 8TH STREET | - 0.00 | | | 0 |
| SARASOTA, FL 34237 | 0.00 | 0. | 0. | 0. |
| JANEY SWIFT | _VICE PRESIDEN | ı[T. | | |
| 2221 8TH STREET | | | | 0 |
| SARASOTA, FL 34237 | 0.00 | 0. | 0. | 0. |
| JASON SWIFT | DIRECTOR | | | |
| 4153 CAMINO REAL ROAD | | | | 0 |
| SARASOTA, FL 34231 | 0.00 | 0. | 0. | 0. |
| 2 Compensation of five highest-paid employees (other than those in | ncluded on line 1). If none, | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | | |
| | | | | |
| | <u> </u> | | | |
| | | | | |
| | Ţ | | | |
| | | | <u> </u> | |
| Total number of other employees paid over \$50,000 | | | Form 9 | 0 990-PF (2009) |

| Part IX-B Summary of Program-Related Investments | | |
|--|----------|--------|
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | | Amount |
| 1 N/A | | |
| 2 | | |
| All other program-related investments. See instructions 3 | | |
| Total. Add lines 1 through 3 | • | 0 |

Form **990-PF** (2009)

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations, | see instructions.) |
|--------|--|--|----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| а | Average monthly fair market value of securities | 1a | 725,679. |
| | Average of monthly cash balances | 1b | 725,679. 188,317. |
| C | Fair market value of all other assets | 10 | |
| d | Total (add lines 1a, b, and c) | 1d | 913,996. |
| 8 | | | |
| | 1c (attach detailed explanation) 18 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 913,996. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 13,710. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 900,286. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 45,014. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 45,014. |
| 2a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009 (This does not include the tax from Part VI) | | |
| C | Add lines 2a and 2b | 2c | 707. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 44,307. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 44,307. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 44,307. |
| _ | art XII Qualifying Distributions (see instructions) | | |
| 1 - | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | 1a | 53,710. |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 Program-related investments - total from Part IX-B | 1b | 33,710. |
| ь 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| - | Suitability test (prior IRS approval required) | 3a | |
| a | - " ' ' ' | 3b | |
| 4 | 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 | 4 | 53,710. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 3077200 |
| J | income Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 53,710. |
| U | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | | |
| | 4940(e) reduction of tax in those years | 4 | |

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
|--|---|---|---|---------------------------|
| 1 Distributable amount for 2009 from Part XI, | 00.000 | | 2000 | 2000 |
| line 7 | | | | 44,307. |
| 2 Undistributed income, if any, as of the end of 2009 | 11.1.1111111111111111111111111111111111 | . !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!! | | |
| a Enter amount for 2008 only | | | 0. | |
| b Total for prior years | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2009 | | | | |
| a From 2004 3,725. | | | | |
| b From 2005 2,075. | | | | |
| c From 2006 5,131. | | | | |
| d From 2007 7, 202. | | | | |
| e From 2008 11,895. | | | | |
| f Total of lines 3a through e | 30,028. | | | |
| 4 Qualifying distributions for 2009 from | | | | |
| Part XII, line 4 ►\$ 53,710. | | | | |
| a Applied to 2008, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2009 distributable amount | | ····· | | 44,307. |
| e Remaining amount distributed out of corpus | 9,403. | ·*···································· | *************************************** | |
| Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 39,431. | | | |
| b Prior years' undistributed income Subtract | · | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of | | | | |
| deficiency has been issued, or on which the section 4942(a) tax has been previously | | | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2008. Subtract line | | | | |
| 4a from line 2a Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2009 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2010 | | musimum u ma , dillaha | ***** | 0. |
| 7 Amounts treated as distributions out of | | , | | |
| corpus to satisfy requirements imposed by | _ | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2004 | 2 525 | | | |
| not applied on line 5 or line 7 | 3,725. | | | |
| 9 Excess distributions carryover to 2010. | 25 706 | | | |
| Subtract lines 7 and 8 from line 6a | 35,706. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2005 2,075. | | | | |
| b Excess from 2006 5, 131. | | | | |
| c Excess from 2007 7, 202. | | | | |
| d Excess from 2008 11,895. e Excess from 2009 9,403. | | | | |
| e Excess from 2009 9, 403. | | ··· | <u> </u> | Form 990-PF (2009) |

| Part XV Supplementary Information | | | | |
|---|--|----------------------|---------------------------------------|--------------------------|
| 3 Grants and Contributions Paid During the Yo | ear or Approved for Future | Payment | · · · · · · · · · · · · · · · · · · · | |
| 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 | | |
| a Paid during the year | | | | |
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| | | | | |
| SEE STATEMENT 6 | | <u> </u> | | |
| Total | 1 | | <u>▶ 3a</u> | 53,710. |
| b Approved for future payment | | | | |
| | | | | |
| | | | | |
| NONE | | | | |
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| | | | : | - |
| | | <u> </u> | | _ |
| Total | | | ▶ 3b | 0. |
| 923611 02-02-10 | | | F | orm 990-PF (2009) |

| AT ATACC AMAUNTO UNIBCE ATRABUICA INGICATAN | Unrelated ! | ousiness income | Exclud | ed by section 512, 513, or 514 | (8) |
|--|--|---|-----------------------|--|--------------------------------------|
| ter gross amounts unless otherwise indicated | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | Related or exempt function income |
| Program service revenue | code | 741100111 | code | | Tanction income |
| a | | | - | | |
| b | | | | | |
| <u> </u> | | | | | |
| d | L I | | | | |
| 8 | | | + | | |
| Topo and contracts from government against | | | - | | |
| g Fees and contracts from government agencies | | · | + + | - - | |
| Membership dues and assessments | | . | + + | | |
| Interest on savings and temporary cash investments | | | | | |
| Dividends and interest from securities | | | 1 1 | | 35,325 |
| Net rental income or (loss) from real estate | | | | | 33,323 |
| a Debt-financed property | | | - | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | | | 1 1 | | |
| | | | | | |
| property Other investment income | | | 1 1 | | |
| Gain or (loss) from sales of assets other | | <u> </u> | + + | <u>.</u> | |
| than inventory | | | | | <16,271 |
| Net income or (loss) from special events | | | | | 120/2/1 |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue | | | | · · · · · · · · · · · · · · · · · · · | |
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| C | | | | | |
| d | | | | | |
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| | 1 1 | | | | |
| e | | С | | 0. | 19,054 |
| e Subtotal Add columns (b), (d), and (e) | | С |) . | | 40.0-4 |
| e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | ons) | C |) . | 13 | 4 4 4 4 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation | | | , , | 13 | 4 4 4 4 |
| e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | | , , | 13 | 4 4 4 4 |
| subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activit ine No. Explain below how each activity for which | ties to the Accon | nplishment of | Exempt | Purposes | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activit ine No. Explain below how each activity for which | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activit ine No. Explain below how each activity for which the foundation's exempt purposes (other | ties to the According to the income is reported in the frame by providing fund | nplishment of loolumn (e) of Part XV s for such purposes) | Exempt | Purposes uted importantly to the accor | 19,054 |

Form **990-PF** (2009)

923621 02-02-10

| Pa | Information Regarding Transfers To Exempt Organizations | and Transactions a | and Relationships With Nonch | ıaritable | 9 | |
|-----------|--|--------------------------------|---|-----------------------|------------------|--------------|
| 1 | Did the organization directly or indirectly engage in any of the following | no with any other organization | on described in section 501(c) of | | Yes | No |
| • | the Code (other than section 501(c)(3) organizations) or in section 5 | | | | | |
| а | Transfers from the reporting foundation to a noncharitable exempt of | | | ľ | | |
| Ī | (1) Cash | | | 1a(1) | i ' | Х |
| | (2) Other assets | | | 1a(2) | | Х |
| b | Other transactions | | | 11-7 | | |
| _ | (1) Sales of assets to a noncharitable exempt organization | | | 1b(1) | | Х |
| | (2) Purchases of assets from a noncharitable exempt organization | | | 1b(2) | | Х |
| | (3) Rental of facilities, equipment, or other assets | | | 1b(3) | | X |
| | (4) Reimbursement arrangements | | | 1b(4) | | Х |
| | (5) Loans or loan guarantees | | | 1b(5) | | Х |
| | (6) Performance of services or membership or fundraising solicitati | ions | | 1b(6) | | Х |
| C | Sharing of facilities, equipment, mailing lists, other assets, or paid en | nployees | | 10 | | Х |
| d | If the answer to any of the above is "Yes," complete the following sch | edule Column (b) should alv | ways show the fair market value of the good | s, other as: | sets, | |
| | or services given by the reporting foundation. If the foundation received | ved less than fair market valu | ie in any transaction or sharing arrangemen | t, show in | | |
| | column (d) the value of the goods, other assets, or services received | <u> </u> | | | | |
| (a) | Line no (b) Amount involved (c) Name of noncharitable | le exempt organization | (d) Description of transfers, transactions, a | nd shanng ar | тапдет | ents |
| | N/A | | | | | |
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| | | | | | | |
| 2a | ı is the foundation directly or indirectly affiliated with, or related to, on | e or more tax-exempt organi | zations described | | | _ |
| | in section 501(c) of the Code (other than section 501(c)(3)) or in sec | ction 527? | | Yes | X | IJNo |
| <u>b</u> | If "Yes," complete the following schedule | | T | | | |
| | (a) Name of organization | (b) Type of organization | (c) Description of relation | nship | | |
| | N/A | | | | | |
| | | | | | | |
| | | | | | | |
| | | _ | | | | |
| | | | and to the heat of my knowledge and belief it | t to true com | net | |
| | Under penalties of perjury, I declare that I have examined this return, including accomplete. Declaration of preparer (other than taxpayer or fiduciary) is based or | | | I is true, come | 5 C1, | |
| | | 18/2/1 | \sim \sim \sim \sim \sim | | | |
| 9 | Constitute of afficer or trustee | | THE | | | _ |
| Sign Here | Signature of officer or trustee | Date | Title Date Check If Prep | oarer's identif | ving nur | nber |
| 6 | Preparer's Moennis Manch C | | self- | | ,g 1141 | |
| S | M DENNIC MODDAY | <u> </u> | · · · · · · · · · · · · · · · · · · · | | | |
| | Hirm's name (or yours M. DENNIS MODRAK, (or yours M. DENNIS MODRAK, (or yours M. BOX 20488) | CPA | EIN P | | | - |
| | address, and ZIP code SARASOTA, FLORIDA | 21276 | Dhara (Q4 | 1)504 | _15 | 10 |
| | SARASUTA, FLURTUA | 342/0 | Phone no (94 | 1) 3 0 4 Form 000 | | |

| FORM 990-PF DIVIDEND | S AND | INTER | EST FROM | SECUE | RITIES | STATEMENT | 1 |
|---|-------------------------|--------------|-------------------------------|-------|------------------------------|--------------------|----------------------|
| SOURCE | C | GROSS | AMOUNT | | ITAL GAINS IVIDENDS | COLUMN (AMOUNT | |
| DIVIDEND INCOME INTEREST INCOME LESS: ACCR INT ON PURCHASES | _ | | 30,721. 5,675. <1,071.> | • | 0. 0. 0. | 5, | 721. 675. 071. |
| TOTAL TO FM 990-PF, PART I, I | LN 4 | | 35,325. | | 0. | 35, | 325. |
| FORM 990-PF C | THER PI | ROFES | SIONAL FE | EES | | STATEMENT | <u> </u> |
| DESCRIPTION | (A) EXPENS PER BO | SES | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | ABLE |
| INVESTMENT ADVISORY FEES | 6, | ,648. | | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 6, | ,648. | | 0. | | | 0. |
| FORM 990-PF | | TAX | ES | | | STATEMENT | ' 3 |
| DESCRIPTION | (A) EXPENS PER BO | SES | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | ABLE |
| EXCISE TAX OTHER TAXES | 1, | ,085. 38. | | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 1, | ,123. | | 0. | | | 0. |

| FORM 990-PF. U.S. AND | STATE/CITY GOV | ERNMENT | OBLIGATIONS | STATEMENT | 4 |
|------------------------------|----------------|----------------|-------------|---------------------|---------------|
| DESCRIPTION | U.S. GOV'T | OTHER GOV'T | BOOK VALUE | FAIR MARKE | т |
| CAPITAL SECURITIES | x | | 119,753. | 119,7 | 53. |
| TOTAL U.S. GOVERNMENT OBLIGA | TIONS | • | 119,753. | 119,7 | 53. |
| TOTAL STATE AND MUNICIPAL GO | VERNMENT OBLIG | ATIONS | | | |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10A | | 119,753. | 119,7 | 53. |
| FORM 990-PF | CORPORATE | STOCK | | STATEMENT | 5 |
| | | | | | |
| DESCRIPTION | | | BOOK VALUE | FAIR MARKE VALUE | Ί. |
| CAPITAL SECURITIES | | • | 689,571. | 689,5 | 71. |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10B | • | 689,571. | 689,5 | 71. |

FORM 990-PF

STATEMENT

| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | AMOUNT |
|---|--|-----------|---------|
| AMERICAN RED CROSS 2001 CANTU CT SARASOTA, FL 34232 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| BISHOP WATERSON HIGH SCHOOL 99 EAST COOKE ROAD COLUMBUS, OH 43214 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,500. |
| BOY SCOUTS OF AMERICA 1801 BOY SCOUT DRIVE FORT MYERS, FL 33907 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 1,500. |
| CHRISTIAN FELLOWSHIP MISSION P.O. BOX 50035 SARASOTA, FL 34232 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| EDUCATION FDN OF SARASOTA CTY P.O. BOX 15920 SARASOTA, FL 34277 | | 501(C)(3) | 2,000. |
| EDUCATION FDN OF SARASOTA CTY P.O. BOX 15920 SARASOTA, FL 34277 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 25,000. |
| FLORIDA SHERIFFS YOUTH RANCH P.O. BOX 2000 BOYS RANCH, FL 32064 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| POLICE ATHLETIC LEAGUE 2071 RINGLING BLVD SARASOTA, FL 34236 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

| SWIFT FAMILY FOUNDATION, INC. | | : | 20-0102620 |
|---|--|-----------|------------|
| RESURRECTION HOUSE 507 KUMQUAT CT SARASOTA, FL 34230 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| ROTARY FOUNDATION P.O. BOX 2766 SARASOTA, FL 34230 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| UNITED FIRST METHODIST 3224 BEE RIDGE ROAD SARASOTA, FL 34239 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 5,000. |
| YMCA 1 S SCHOOL AVE, STE 302 SARASOTA, FL 34237 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,000. |
| GULF COAST BUILDERS EXCHANGE 8470 ENTERPRISE CIR, STE 101 LAKEWOOD RANCH, FL 4202 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 2,110. |
| ROTARY CLUB OF SARASOTA SARASOTA, FL | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 1,100. |
| HIGHLANDS PLAYHOUSE P.O. BOX 896 HIGHLANDS, NC 28741 | NONE UNRESTRICTED CHARITABLE CONTRIBUTION | 501(C)(3) | 500. |
| TOTAL TO FORM 990-PF, PART XV, I | INE 3A | | 53,710. |

As of Date: 2/05/10

Account Number: 7672-4797 SWIFT FAMILY FOUNDATION INC JOHN SWIFT PRES

Realized Gain/Loss Detail for Year

| Short Term DESCRIPTION | QUANTITY | ADJ PRICE/ ORIG PRICE | DATE ACQUIRED CLOSE DATE | LOSE DATE | PROCEEDS | ADJ COST/ ORIG COST | GAIN/LOSS |
|---|-------------|--------------------------|-----------------------------|-----------|-------------|------------------------|--------------|
| GENERAL ELECTRIC COMPANY | 1,000.0000 | 16.3982 | 12/19/08 | 11/25/09 | 16,089.09 | 16,753.28 | -664.19 |
| PRECISION DRILLNG RTS WI EXP 06/03/09 | 994,0000 | 00000 | 05/13/09 | 60/80/90 | 00.00 | 0.00 | 00:00 |
| PRECISION DRILLNG RTSXXX EXP 06/03/09 | 9.0000 | 00000 | 05/13/09 | 06/25/09 | 2.66 | 0.00 | 0.00 |
| Total - Short Term | | | | | \$16,091.75 | \$16,753.28 | -\$664.19 |
| Long Term DESCRIPTION | QUANTITY | ADJ PRICE/ ORIG PRICE | DATE ACQUIRED CLOSE DATE | LOSE DATE | PROCEEDS | ADJ COST/ ORIG COST | GAIN/LOSS |
| FEDERAL HOME LOAN BANK BONDS CALLABLE | | | | | | | |
| CPN 5 000% DUE 06/26/18 DTD 06/26/03 FC 12/26/03 | | | | | | | |
| CALL 06/26/09 @ 100 000 | 50,000.0000 | 99.4880 | 03/15/04 | 03/26/09 | 50,000.00 | 49,744.00 | 256.00 |
| GENERAL ELECTRIC COMPANY | 500.000 | 28.3500 | 06/25/08 | 11/25/09 | 8,044.54 | 14,424 51 | -6,379.97 |
| | 1,000.0000 | 25.1868 | 09/22/08 | 11/25/09 | 16,089.08 | 25,575 25 | -9,486.17 |
| Total - Long Term | | | | | \$74,133.62 | \$89,743.76 | -\$15,610.14 |



Form **8868**

(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

| If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (Do not complete Part II unless you have already been granted an automatic 3-month extension on a part I Part I Automatic 3-Month Extension of Time. Only submit original (no copies nee | on page 2 of this form) oreviously filed Form 8868 |
|---|--|
| A corporation required to file Form 990-T and requesting an automatic 6-month extension—check Part I only | • • |
| All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form time to file income tax returns | 7004 to request an extension of |
| Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au one of the returns noted below (6 months for a corporation required to file Form 990-T). Howe electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed an 8868 For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file to | ver, you cannot file Form 8868 990-BL, 6069, or 8870, group d signed page 2 (Part II) of Form |
| Type or print Name of Exempt Organization Swift Family Found Attor | Employer identification number |
| File by the Number, street, and room of suite no. If a PO box, see instructions | 20 0102620 |
| return See instructions City, town or post office, state, and ZIP code For a foreign address, see instructions ALA 3074. FL 34237 | |
| Check type of return to be filed (file a separate application for each return) Form 990 Form 990-T (corporation) Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 990-EZ Form 990-F Form 990-PF Form 1041-A | ☐ Form 4720 ☐ Form 5227 ☐ Form 6069 ☐ Form 8870 |
| • The books are in the care of ► M. Seuri's Mosak, CAA Telephone No ► (941) 504-4510 • If the organization does not have an office or place of business in the United States, check this • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). for the whole group, check this box ► ☐ If it is for part of the group, check this box a list with the names and EINs of all members the extension will cover | box . ► □ |
| 1 I request an automatic 3-month (6 months for a corporation required to file Foruntil | |
| 2 If this tax year is for less than 12 months, check reason Initial return Final return [| Change in accounting period |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative taxless any nonrefundable credits. See instructions | (, 3a \$ |
| b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated to payments made. Include any prior year overpayment allowed as a credit. | x |
| Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymer System). See instructions | 3b \$ d, display and a second s |
| Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 for payment instructions. | |

| Form 8868 (| (Rev 4-2009) | Page Z |
|--|---|------------------------------------|
| Note. Onl | are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and ally complete Part II if you have already been granted an automatic 3-month extension on a previous are filing for an Automatic 3-Month Extension, complete only Part I (on page 1) | |
| Part II | Additional (Not Automatic) 3-Month Extension of Time. Only file the original (n | o copies needed) |
| Type or print | Name of Exempt Organization | nployer identification number |
| File by the extended due date for | | or IRS use only |
| filing the return See instructions | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |
| Check ty | ype of return to be filed (File a separate application for each return). | |
| Form | 990 | ☐ Form 6069 |
| 🔲 Form | | ☐ Form 8870 |
| 🔲 Form | n 990-EZ | |
| STOP! Do | o not complete Part II if you were not already granted an automatic 3-month extension on a | previously filed Form 8868. |
| Telepho If the o If this is for the w | boks are in the care of ► | x ▶ □ |
| 4 I red | equest an additional 3-month extension of time until |) . |
| 5 For | r calendar year, or other tax year beginning, 20, and ending | |
| 6 If th | his tax year is for less than 12 months, check reason: Initial return Final return | Change in accounting period |
| 7 Sta | ate in detail why you need the extension | |
| | | |
| | this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, is any nonrefundable credits. See instructions. | 8a \$ |
| esti | this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and timated tax payments made. Include any prior year overpayment allowed as a credit and any pount paid previously with Form 8868. | 8b \$ |
| c Bala with | lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c \$ |
| _ | Signature and Verification | |
| Under pena | nalties of perjury. Volorize that I have examined this form, including accompanying schedules and statements, and to the correct, and complete and that I am authorized to prepare this form | ne best of my knowledge and belief |
| Signature I | Title > CSA | Date > 5-17-10 |
| | | Form 8868 (Rev 4-2009) |