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

2009Department of the Treasury
Internal Revenue Service

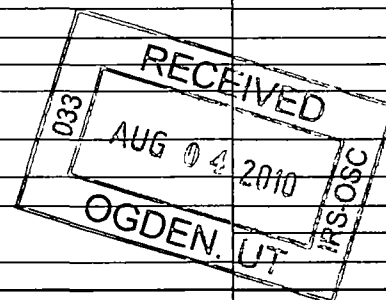
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning , 2009, and ending

G Check all that apply. ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation DUBOSE FAMILY FOUNDATION		A Employer identification number 20-1588677
	Number and street (or P O box number if mail is not delivered to street address) Room/suite P.O. BOX 2990		B Telephone number (see the instructions) (817) 390-2202
	City or town State ZIP code FORT WORTH TX 76113		C If exemption application is pending, check here <input type="checkbox"/>
			D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 6,827,338.			F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions, gifts, grants, etc., received (att sch)	1,372,471.			
	2 <input type="checkbox"/> if the foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	21,510.	21,510.		
	4 Dividends and interest from securities	124,672.	124,672.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain/(loss) from sale of assets not on line 10	31,351.			
	b Gross sales price for all assets on line 6a	31,351.			
	7 Capital gain net income (from Part IV, line 2)		31,351.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit/(loss) (att sch)					
11 Other income (attach schedule) See Line 11 Stmt	1,140.	1,443.			
12 Total. Add lines 1 through 11	1,551,144.	178,976.			
ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc	48,000.	48,000.		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) L-16a Stmt	572.	572.		
	b Accounting fees (attach sch) L-16b Stmt	500.	500.		
	c Other prof fees (attach sch)				
	17 Interest				
	18 Taxes (attach schedule) See Line 18 Stmt	6,843.	4,343.		
	19 Depreciation (attach sch) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	64.	64.			
24 Total operating and administrative expenses. Add lines 13 through 23	55,979.	53,479.			
25 Contributions, gifts, grants paid	502,220.			502,220.	
26 Total expenses and disbursements. Add lines 24 and 25	558,199.	53,479.		502,220.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	992,945.				
b Net investment income (if negative, enter -0-)		125,497.			
c Adjusted net income (if negative, enter -0-)					



Part II Balance Sheets		Beginning of year	End of year	
			(a) Book Value	(b) Book Value
ASSETS	1 Cash — non-interest-bearing	311,783.	1,419,861.	1,419,860.
	2 Savings and temporary cash investments	2,241,159.	2,032,619.	2,032,619.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U S and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule) L-10b Stmt	2,770,640.	2,869,213.	2,520,130.
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment basis			
LIABILITIES	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)			
	14 Land, buildings, and equipment basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe L-15 Stmt)	859,895.	854,729.	854,729.
	16 Total assets (to be completed by all filers — see instructions Also, see page 1, item I)	6,183,477.	7,176,422.	6,827,338.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
NET ASSETS OR FUND BALANCES	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, building, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	6,183,477.	7,176,422.	
	30 Total net assets or fund balances (see the instructions)	6,183,477.	7,176,422.	
	31 Total liabilities and net assets/fund balances (see the instructions)	6,183,477.	7,176,422.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	6,183,477.
2 Enter amount from Part I, line 27a	2	992,945.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	7,176,422.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	7,176,422.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	31,351.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div> <div>If gain, also enter in Part I, line 8, column (c) (see the instructions)</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	414,486.	4,778,659.	0.086737
2007	261,487.	3,739,798.	0.069920
2006	48,099.	2,404,879.	0.020001
2005	75,744.	892,060.	0.084909
2004	0.	264,929.	0.000000

2 Total of line 1, column (d)	2	0.261567
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.052313
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	5,275,999.
5 Multiply line 4 by line 3	5	276,003.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,255.
7 Add lines 5 and 6	7	277,258.
8 Enter qualifying distributions from Part XII, line 4	8	502,220.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	1,255.
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-)		2	0.
3 Add lines 1 and 2		3	1,255.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	1,255.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	397.	
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	4,603.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	5,000.	
8 Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	22.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,723.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	11	3,723.	Refunded

Part VII-A Statements Regarding Activities

	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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
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		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
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?	X	
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	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) TX – Texas		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities Continued

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>CHRISTOPHER J. KEYLAND</u> Telephone no <u>(817) 390-2202</u> Located at <u>2624 WEST FREEWAY</u> <u>FORT WORTH</u> <u>TX</u> ZIP + 4 <u>76102</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1 b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see the instructions)	2 b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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, Form 4720, to determine if the foundation had excess business holdings in 2009)	3 b	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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
JAMES S. DUBOSE 2624 WEST FREEWAY FORT WORTH TX 76102	DIRECTOR 1.00	0.	0.	0.
JAMES E. DUBOSE 2624 WEST FREEWAY FORT WORTH TX 76102	DIRECTOR 1.00	0.	0.	0.
GWYNNE M. DUBOSE KEYLAND 2624 WEST FREEWAY FORT WORTH TX 76102	DIRECTOR 1.00	0.	0.	0.
CHRISTOPHER J. KEYLAND 1314 POSSUM TROT AUSTIN TX 78703	PRESIDENT 20.00	48,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
0				
0				
0				
0				

Total number of other employees paid over \$50,000

None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

None

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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE IN CURRENT YEAR	
	0.
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
	0.
2	
All other program-related investments See instructions	
3 NONE	
	0.
Total. Add lines 1 through 3	None

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	4,412,712.
b Average of monthly cash balances	1b	88,953.
c Fair market value of all other assets (see instructions)	1c	854,679.
d Total (add lines 1a, b, and c)	1d	5,356,344.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	5,356,344.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	80,345.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,275,999.
6 Minimum investment return. Enter 5% of line 5	6	263,800.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	263,800.
2a Tax on investment income for 2009 from Part VI, line 5	2a	1,255.
b Income tax for 2009 (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	1,255.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	262,545.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	262,545.
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	262,545.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	502,220.
b Program-related investments — total from Part IX-B	1b	0.
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		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	502,220.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	1,255.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	500,965.

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

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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, line 7				262,545.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	0.			
b From 2005	0.			
c From 2006	0.			
d From 2007	37,753.			
e From 2008	179,667.			
f Total of lines 3a through e	217,420.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 502,220.				
a Applied to 2008, but not more than line 2a				
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				262,545.
e Remaining amount distributed out of corpus	239,675.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	457,095.			
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				
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 instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	457,095.			
10 Analysis of line 9				
a Excess from 2005	0.			
b Excess from 2006	0.			
c Excess from 2007	37,753.			
d Excess from 2008	179,667.			
e Excess from 2009	239,675.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
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				
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 (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

- a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

N/A

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

N/A

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

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

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

CHRISTOPHER J. KEYLAND

2624 WEST FREEWAY

FORT WORTH

TX

76102

(817) 390-2202

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

WRITTEN REQUEST IN LETTER FORM, PURPOSE OR PROPOSED USE OF GRANT OR DONATION.

- c** Any submission deadlines

NONE

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

NONE

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
ALZHEIMER'S ASSOCIATION 101 SUMMIT AVENUE FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIVITY	1,000.
AMERICAN CANCER SOCIETY 3301 WEST FREEWAY FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIVITY	500.
AMERICAN HEART ASSOCIATION 2630 WEST FREEWAY FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIVITY	500.
AMERICAN RED CROSS 1515 S. SYLVANIA AVENUE FORT WORTH TX 76111		PUBLIC	SUPPORT CHARITABLE ACTIVITY	1,000.
ARTHRITIS FOUNDATION 6080 S. HULEN ST. FORT WORTH TX 76132		PUBLIC	SUPPORT CHARITABLE ACTIVITY	500.
ARTS COUNCIL OF FORT WORTH AND TARRANT COUNTY 1300 GENDY ST. FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIVITY	3,000.
BOY SCOUTS OF AMERICA P.O. BOX 54190 HURST TX 76054		PUBLIC	SUPPORT CHARITABLE ACTIVITY	1,000.
BOYS AND GIRLS CLUB OF GREATER FORT WORTH 3218 E. BELKNAP FORT WORTH TX 76111		PUBLIC	SUPPORT CHARITABLE ACTIVITY	900.
CAMP FIRE USA 2700 MEACHAM BLVD FORT WORTH TX 76137		PUBLIC	SUPPORT CHARITABLE ACTIVITY	250.
See Line 3a statement				493,570.
Total			3a	502,220.
<i>b Approved for future payment</i>				
Total			3b	

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► **Attach to Form 990, 990-EZ, or 990-PF**

OMB No 1545-0047

2009

Name of the organization

DUBOSE FAMILY FOUNDATION

Employer identification number

20-1588677

Organization type (check one).

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)() (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule –

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

DUBOSE FAMILY FOUNDATION

20-1588677

Part I Contributors (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JS & JL DUBOSE CHARITABLE LEAD ANNUITY TRUST P.O. BOX 2990 FORT WORTH TX 76113	\$ 48,913.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	JS & JL DUBOSE 2005 CHARITABLE LEAD ANNUITY TRUST P.O. BOX 2990 FORT WORTH TX 76113	\$ 1,323,558.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
FROM K-1	-303.		
FROM K-1	1,443.	1,443.	
Total	<u>1,140.</u>	<u>1,443.</u>	

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
FOREIGN TAXES	615.	615.		
EXCISE TAXES	2,500.	0.		
PAYROLL TAXES	3,728.	3,728.		
Total	<u>6,843.</u>	<u>4,343.</u>		

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
OTHER DEDUCTIONS FROM K-1'S	64.	64.		
Total	<u>64.</u>	<u>64.</u>		

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
BREAST CANCER 3-DAY				Person or <input type="checkbox"/>
P.O. BOX 650543				Business <input type="checkbox"/>
DALLAS TX 75265		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
BURTON HILL ELEMENTARY SCHOOL				Person or <input type="checkbox"/>
1000 N. UNIVERSITY DRIVE #260 NW				Business <input type="checkbox"/>
FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
COALITION FOR PULMONARY FIBROSIS				Person or <input type="checkbox"/>
1659 BRANHAM LANE SUITE F #227				Business <input type="checkbox"/>
SAN JOSE CA 95118		PUBLIC	SUPPORT CHARITABLE ACTIV	2,000.
CHILD STUDY CENTER				Person or <input type="checkbox"/>
1300 WEST LANCASTER AVE.				Business <input type="checkbox"/>
FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	500.
COMMUNITY ENRICHMENT CENTER				Person or <input type="checkbox"/>
6250 NE LOOP 820				Business <input type="checkbox"/>
NORTH RICHLAND HILLS TX 76180		PUBLIC	SUPPORT CHARITABLE ACTIV	1,500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
COMMUNITY HOSPICE OF TEXAS 6100 WESTERN PLACE, STE 500 FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,000.
COMMUNITY PARTNERS OF TARRANT COUNTY 2700 BEN AVENUE FORT WORTH TX 76103		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
BREAKTHROUGH AT COUNTRY DAY SCHOOL 4200 COUNTRY DAY LANE FORT WORTH TX 76109		PUBLIC	SCHOLARSHIP	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
COUNTRY DAY SCHOOL 4200 COUNTRY DAY LANE FORT WORTH TX 76109		PUBLIC	SCHOLARSHIP	Person or <input type="checkbox"/> Business <input type="checkbox"/> 140,000.
CHRISTMAS IN THE STOCKYARDS P.O. BOX 64203 FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
FIRST UNITED METHODIST CHURCH 800 WEST FIFTH STREET FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 60,000.
FEED AMERICA P.O. BOX 96749 WASHINGTON DC 20090		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
FWISD 1000 N. UNIVERSITY DR. #260 FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 500.
FORT WORTH MUSEUM OF SCIENCE/HISTORY 1501 MONTGOMERY FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 5,000.
FORT WORTH OPERA 1300 GENDY STREET FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
FORTRESS YDC P.O. BOX 422 FORT WORTH TX 76101		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,000.
FORT WORTH SYMPHONY AND ORCHESTRA P.O. BOX 2587 FORT WORTH TX 76113		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 2,400.
GILL CHILDREN'S SERVICES 1020 SUMMIT AVENUE FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
GOODFELLOWS P.O. BOX 1870 FORT WORTH TX 76101		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 1,000.
HABITAT FOR HUMANITY 3345 S. JONES ST. FORT WORTH TX 76110		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or <input type="checkbox"/> Business <input type="checkbox"/> 500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
HANDLEY-EVERMAN LIONS CLUB 7262 BRENTWOOD STAIR ROAD FORT WORTH TX 76112		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 500.
HISTORIC SOUTHSIDE 1606 MISTLETOE FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 500.
HUGWORKS 752 MARY DRIVE HURST TX 76053		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 2,623.
LIFEGIFT 2510 WESTRIDGE STREET HOUSTON TX 77054		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 5,000.
JULIA HEREFORD SOCIETY 2301 VANDERBILT PLACE NASHVILLE TN 37235		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 1,000.
MANOS DE CRISTO 4911 HARMON AVENUE AUSTIN TX 78751		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 2,000.
MARCH OF DIMES 200 BAILEY STE. 230 FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 2,500.
MOUNTAIN RESCUE-ASPEN, INC. 630 WEST MAIN ST. ASPEN CO 81611		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 200.
MS SOCIETY 2105 LUNA RD. CARROLLTON TX 75006		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 2,000.
PLANNED PARENTHOOD 7424 GREENVILLE AVE. STE. 206 DALLAS TX 75231		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 1,000.
PRESBYTERIAN NIGHT SHELTER P.O. BOX 2645 FORT WORTH TX 76113		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 2,000.
PULMONARY FIBROSIS FOUNDATION 1332 N. HALSTED STREET #201 CHICAGO IL 60622		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 5,000.
JUNIOR ACHIEVEMENT 6300 RIDGLEA PLACE, SUITE 400 FORT WORTH TX 76116		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 250.
SALVATION ARMY P.O. BOX 99400 FORT WORTH TX 76199		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 1,000.
SICKLE CELL DISEASE ASSOCIATION 1400 MAIN ST. #202 FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	Person or Business <input type="checkbox"/> 1,500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
LENA POPE HOME				Person or <input type="checkbox"/>
3131 SANQUINET STREET				Business <input type="checkbox"/>
FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	750.
SPECIAL OLYMPICS TEXAS				Person or <input type="checkbox"/>
7715 CHEVY CHASE DR. #120				Business <input type="checkbox"/>
AUSTIN TX 78752		PUBLIC	SUPPORT CHARITABLE ACTIV	500.
ST. JUDE CHILDREN'S RESEARCH				Person or <input type="checkbox"/>
P.O. BOX 167				Business <input type="checkbox"/>
MEMPHIS TN 38101		PUBLIC	SUPPORT CHARITABLE ACTIV	100.
TARRANT AREA FOOD BANK				Person or <input type="checkbox"/>
2600 CULLEN ST.				Business <input type="checkbox"/>
FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	2,000.
TARRANT COUNTY ACCESS				Person or <input type="checkbox"/>
P.O. BOX 1461				Business <input type="checkbox"/>
FORT WORTH TX 76101		PUBLIC	SUPPORT CHARITABLE ACTIV	1,500.
TEXAS ASSOCIATION FOR BLIND				Person or <input type="checkbox"/>
P.O. BOX 14200				Business <input type="checkbox"/>
ARLINGTON TX 76094		PUBLIC	SUPPORT CHARITABLE ACTIV	500.
MARINE TOYS FOR TOTS FOUNDATION				Person or <input type="checkbox"/>
P.O. BOX 227				Business <input type="checkbox"/>
QUANTICO VA 22134		PUBLIC	SUPPORT CHARITABLE ACTIV	500.
MENTAL HEALTH ASSOCIATION				Person or <input type="checkbox"/>
3136 W. 4TH				Business <input type="checkbox"/>
FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	3,000.
UNITED COMMUNITY CENTERS				Person or <input type="checkbox"/>
1200 E. MADDOX AVENUE				Business <input type="checkbox"/>
FORT WORTH TX 76106		PUBLIC	SUPPORT CHARITABLE ACTIV	3,000.
UNITED WAY				Person or <input type="checkbox"/>
210 E. NINTH				Business <input type="checkbox"/>
FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	20,117.
UNIVERSITY OF TEXAS				Person or <input type="checkbox"/>
P.O. BOX 7458				Business <input type="checkbox"/>
AUSTIN TX 78713		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
UT SAN ANTONIO HEALTH SCIENCE CENTER				Person or <input type="checkbox"/>
7703 FLOYD CURL DR.				Business <input type="checkbox"/>
SAN ANTONIO TX 78229		PUBLIC	SUPPORT CHARITABLE ACTIV	100,000.
UT SOUTHWESTERN MEDICAL CENTER				Person or <input type="checkbox"/>
5323 HARRY HINES BLVD.				Business <input type="checkbox"/>
DALLAS TX 75390		PUBLIC	SUPPORT CHARITABLE ACTIV	50,000.
VAN CLIBURN FOUNDATION				Person or <input type="checkbox"/>
2525 RIDGMAR BLVD. #307				Business <input type="checkbox"/>
FORT WORTH TX 76116		PUBLIC	SUPPORT CHARITABLE ACTIV	5,000.
WARM PLACE				Person or <input type="checkbox"/>
809 LIPSCOMB				Business <input type="checkbox"/>
FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	2,500.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a <i>Paid during the year</i>				
WESTAR INSTITUTE				Person or <input type="checkbox"/>
P.O. BOX 7628				Business <input type="checkbox"/>
SANTA ROSA CA 95407		PUBLIC	SUPPORT CHARITABLE ACTIV	5,000.
THE WOMEN'S CENTER				Person or <input type="checkbox"/>
1723 HEMPHILL				Business <input type="checkbox"/>
FORT WORTH TX 76110		PUBLIC	SUPPORT CHARITABLE ACTIV	2,900.
YWCA				Person or <input type="checkbox"/>
512 W. 4TH STREET				Business <input type="checkbox"/>
FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	3,200.
MUSCULAR DYSTOPHY ASSOCIATION				Person or <input type="checkbox"/>
101 SUMMIT AVENUE #204				Business <input type="checkbox"/>
FORT WORTH TX 76102		PUBLIC	SUPPORT CHARITABLE ACTIV	500.
NORTHSIDE COALITION				Person or <input type="checkbox"/>
2105 MARKET AVENUE				Business <input type="checkbox"/>
FORT WORTH TX 76154		PUBLIC	SUPPORT CHARITABLE ACTIV	100.
W.C. STRIPLING MIDDLE SCHOOL				Person or <input type="checkbox"/>
2100 CLOVER LANE				Business <input type="checkbox"/>
FORT WORTH TX 76107		PUBLIC	SUPPORT CHARITABLE ACTIV	4,280.
RED WAGON SOCIETY				Person or <input type="checkbox"/>
908 SOUTHLAND AVENUE				Business <input type="checkbox"/>
FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
SAFE HAVEN				Person or <input type="checkbox"/>
6815 MANHATTAN BLVD. #105				Business <input type="checkbox"/>
FORT WORTH TX 76120		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
SAMARITAN HOUSE				Person or <input type="checkbox"/>
929 HEMPHILL				Business <input type="checkbox"/>
FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	2,500.
STARPOINT SCHOOL - TCU				Person or <input type="checkbox"/>
TCU BOX 297410				Business <input type="checkbox"/>
FORT WORTH TX 76129		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.
TARRANT SAMARITAN HOUSE				Person or <input type="checkbox"/>
929 HEMPHILL STREET				Business <input type="checkbox"/>
FORT WORTH TX 76104		PUBLIC	SUPPORT CHARITABLE ACTIV	2,500.
TEXAS BALLET THEATER				Person or <input type="checkbox"/>
6845 GREEN OAKS RD.				Business <input type="checkbox"/>
FORT WORTH TX 76116		PUBLIC	SUPPORT CHARITABLE ACTIV	5,000.
TEXAS STAMPEDE				Person or <input type="checkbox"/>
2914 SWISS AVENUE				Business <input type="checkbox"/>
DALLAS TX 75204		PUBLIC	SUPPORT CHARITABLE ACTIV	450.
TEXAS WESLEYAN UNIVERSITY				Person or <input type="checkbox"/>
1201 WESLEYAN				Business <input type="checkbox"/>
FORT WORTH TX 76105		PUBLIC	SCHOLARSHIP	5,000.
TIERRA SANTA SUPPORT				Person or <input type="checkbox"/>
P.O. BOX 44400				Business <input type="checkbox"/>
EDEN PRAIRIE MN 55344		PUBLIC	SUPPORT CHARITABLE ACTIV	1,000.

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Founda- tion status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a <i>Paid during the year</i>				
USO				Person or <input type="checkbox"/>
P.O. BOX 96860				Business <input type="checkbox"/>
WASHINGTON DC 20077		PUBLIC	SUPPORT CHARITABLE ACTIV	200.
VANDERBILT UNIVERSITY				Person or <input type="checkbox"/>
2301 VANDERBILT PLACE				Business <input type="checkbox"/>
NASHVILLE TN 37203		PUBLIC	SCHOLARSHIP	15,000.

Total

493,570.

Form 990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BWW	LEGAL	572.	572.		

Total

572.572.

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JSD/JLD MANA.	TAX PREP	500.	500.		

Total

500.500.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
VANGUARD HIGH YIELD FUND	325,478.	298,476.
VANGUARD INTERMEDIATE TERM FUND	869,058.	912,714.
VANGUARD MIDCAP INDEX FUND	208,734.	169,214.

Form 990-PF, Page 2, Part II, Line 10b

Continued

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
VANGUARD GLOBAL EQUITY FUND	460,301.	314,775.
VANGUARD 500 INDEX FUND	317,006.	249,348.
VANGUARD SMALL CAP INDEX FUND	208,390.	172,485.
VANGUARD WINDSOR FUND	127,867.	86,558.
VANGUARD INTERMEDIATE TERM TREASURY FUND ADMIRAL	236,798.	240,928.
VANGUARD WINDSOR II FUND	115,581.	75,632.
Total	<u>2,869,213.</u>	<u>2,520,130.</u>

Form 990-PF, Page 2, Part II, Line 15

Other Assets Stmt

Line 15 - Other Assets:	Beginning Year Book Value	End of Year	
		Book Value	Fair Market Value
JSD/JLD INVESTMENTS	859,845.	854,679.	854,679.
ACCRUED INCOME	50.	50.	50.
Total	<u>859,895.</u>	<u>854,729.</u>	<u>854,729.</u>

Supporting Statement of:

Form 990-PF,p12/Line 3 Column (d)

Description	Amount
COLONIAL SAVINGS	224.
K-1 PASS THROUGH - JSD/JLD INVESTMENTS	21,278.
VANGUARD	8.
Total	<u>21,510.</u>

Supporting Statement of:

Form 990-PF,p12/Line 4 Column (d)

Description	Amount
VANGUARD	105,300.
K-1 PASS THROUGH - JSD/JLD INVESTMENTS	19,372.
Total	<u>124,672.</u>

SCHEDULE D
(Form 1041)Department of the Treasury
Internal Revenue Service**Capital Gains and Losses**► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for
Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name of estate or trust

Employer identification number

DUBOSE FAMILY FOUNDATION**20-1588677****Note:** Form 5227 filers need to complete *only* Parts I and II**Part I Short-Term Capital Gains and Losses — Assets Held One Year or Less**

1 a	(a) Description of property (Example 100 shares 7% preferred of 'Z' Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b

1 b

2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824

2

3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts

34 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss
Carryover Worksheet**4**5 **Net short-term gain or (loss).** Combine lines 1a through 4 in column (f) Enter here and
on line 13, column (3) on page 2**5****Part II Long-Term Capital Gains and Losses — Assets Held More Than One Year**

6 a	(a) Description of property (Example: 100 shares 7% preferred of 'Z' Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b

6 b

7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824

7

8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts

8**26,163.**

9 Capital gain distributions

9**5,188.**

10 Gain from Form 4797, Part I

1011 Long-term capital loss carryover Enter the amount, if any, from line 14, of the 2008 Capital Loss
Carryover Worksheet**11**12 **Net long-term gain or (loss).** Combine lines 6a through 11 in column (f). Enter here and on line 14a,
column (3) on page 2**12****31,351.**

Part III Summary of Parts I and II**Caution:** Read the instructions *before* completing this part

	(1) Beneficiaries' (see instructions)	(2) Estate's or trust's	(3) Total
13 Net short-term gain or (loss)	13		
14 Net long-term gain or (loss):			
a Total for year	14a	31,351.	31,351.
b Unrecaptured section 1250 gain (see line 18 of the worksheet in the instructions)	14b		
c 28% rate gain	14c		
15 Total net gain or (loss). Combine lines 13 and 14a	15	31,351.	31,351.

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and **do not** complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of	16
a The loss on line 15, column (3) or b \$3,000	

Note: If the loss on line 15, column (3), is more than \$3,000, **or** if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), **and** Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the worksheet in the instructions if

- Either line 14b, column (2) or line 14c, column (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, **and** Form 990-T, line 34 is more than zero. Skip this part and complete the worksheet in the instructions if either line 14b, column (2) or line 14c, column (2) is more than zero.

17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17	
18 Enter the smaller of line 14a or 15 in column (2) but not less than zero	18	
19 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	19	
20 Add lines 18 and 19	20	
21 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	21	
22 Subtract line 21 from line 20. If zero or less, enter -0-	22	
23 Subtract line 22 from line 17. If zero or less, enter -0-	23	
24 Enter the smaller of the amount on line 17 or \$2,300	24	
25 Is the amount on line 23 equal to or more than the amount on line 24?	25	
<input checked="" type="checkbox"/> Yes. Skip lines 25 and 26, go to line 27 and check the 'No' box		
<input type="checkbox"/> No. Enter the amount from line 23	26	
26 Subtract line 25 from line 24	26	
27 Are the amounts on lines 22 and 26 the same?	27	
<input type="checkbox"/> Yes. Skip lines 27 through 30, go to line 31		
<input checked="" type="checkbox"/> No. Enter the smaller of line 17 or line 22	28	
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)	28	
29 Subtract line 28 from line 27	29	
30 Multiply line 29 by 15% (15)	30	
31 Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	31	
32 Add lines 30 and 31	32	
33 Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	33	
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)	34	

Supporting Statement of:

Schedule D/Line 8f

Description	Amount
K-1 PASS THROUGH - JSD/JLD INVESTMENTS	26,163.
Total	<u>26,163.</u>

Supporting Statement of:**Interest and Dividend Income Worksheet/Part II, Capital gain-1**

Description	Amount
VANGUARD CAPITAL GAIN DISTRIBUTIONS	5,188.
Total	5,188.