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Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury
Internal Revenue Service

Note: The found.

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements ar beginning 2009, and ending

FOI Care	endar year 2009, or tax year beginning	, 2003	, and ending	· · · · · · · · · · · · · · · · · · ·			
G Che	eck all that apply. 🔲 Initial return 📙 Initi	al Return of a former p	· —	∐ Fın	al return		
	Amended return	Address of	change Name	e change			
Use th	he Name of foundation	1	A Employer identification number				
IRS lab	TITOINION LIMITUL LOCKBRILLO			20-1807893			
Otherw print		delivered to street address)	Room/suite	•	•		
or typ	e. C/O 2990 LONG PRAIRIE RO			(972) 691-34			
See Spe Instructi			ZIP code	• • • • • • • • • • • • • • • • • • • •	· —		
	FLOWER MOUND			1 Foreign organizations, che			
H Č		(c)(3) exempt private f		2 Foreign organizations mee here and attach computati	ting the 85% test, check		
	Section 4947(a)(1) nonexempt charitable t	ounting method: X C	orivate foundation ash Accrual	E If private foundation statu			
		Other (specify)		under section 507(b)(1)(A			
⊳ s		column (d) must be or		If the foundation is in a 60 under section 507(b)(1)(B))-month termination		
Part.I					i		
I, al to	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable		
	columns (b), (c), and (d) may not neces-	expenses per books	income	HICOTTIE	purposes		
	sarily equal the amounts in column (a) (see the instructions)				(cash basis only)		
	Contributions, gifts, grants, etc, received (att sch)	7,340.	42, 14, 18, 18, 18, 14,	1 - 2782 2 - 4,2 1 4 - 274 7 2 12	200 C C C C C C C C C C C C C C C C C C		
	2 Ck ► if the foundn is not req to att Sch B	医一种 经通过	ここができないが ち		The Port		
	3 Interest on savings and temporary	0.5		07	是是"这个"的"是有一个是有一个。		
	cash investments	87. 15,230.	15,230		1 m. FYr M		
	4 Dividends and interest from securities	13,230.	13,230	15,250.			
	b Net rental income or (loss)	and the father of the second of the	o to E Butter of the s	20 24 5 W. W.	1980 Care 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
R	6a Net gain/(loss) from sale of assets not on line 10		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a strain to			
E	b Gross sales price for all assets on line 6a .	高级建筑 建筑	文····································	S WAR IN THE STATE	1982 · 1881 · 1881		
¥ E	7 Capital gain net income (from Part IV, line 2) .). [1] \$ 1. L 10 L			
N I	8 Net short-term capital gain	、一つ、資産は企業に	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Ų	9 Income modifications	は一本を一方には、また。	17, 5 & 5, 855-3		/ED: A. J. Cast. 21		
-	10 a Gross sales less returns and allowances				i jo		
	h Less: Cost of	公司的	A. B. Mary		2010		
	c Gross profit/(loss) (att sch)	The read the part were "Set. "			1 (2) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		
ĺ	11 Other income (attach schedule)		N 2 - 2 23 3 3 C 2 3-3	, \	100 100 100 100 100 100 100 100 100 100		
	(2.20.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			I OGDEN	7 UT- 1- 44.2		
	12 Total. Add lines 1 through 11	22,657.	15,317	15,317.	· 整理原始 (1) 11 11 11		
	13 Compensation of officers, directors, trustees, etc .						
	14 Other employee salaries and wages						
	15 Pension plans, employee benefits						
A	16a Legal fees (attach schedule)		· · · · · · · · · · · · · · · · · · ·		 		
M	b Accounting fees (attach sch)	14,341.	14,341	0.	0.		
o N	c Other prof fees (attach sch) L-1.6c Stmt 17 Interest	14,041.	14,541	0.			
O I S E T R A A	18 Taxes (attach schedule)(see instr.)						
RRAA	19 Depreciation (attach						
7 7	sch) and depletion				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
N V G E	20 Occupancy						
Į	21 Travel, conferences, and meetings 22 Printing and publications						
A E N X D P	23 Other expenses (attach schedule)						
Ë	See Line 23 Stmt	124.	ي	124.	0.		
Š	24 Total operating and administrative	4 4 4 4 5					
ร	expenses. Add lines 13 through 23	14,465.	14,350		123 750		
	25 Contributions, gifts, grants paid	123,750.	7 72 74 74 74 16 1	A DA CHARLE MARK	123,750.		
j	26 Total expenses and disbursements. Add lines 24 and 25	138,215.	14,350	124.	123,750.0		
		Billion and the same of the sa	VALVE SEED OF A		18.12.13.13.13 A		
ļ	a Excess of revenue over expenses						
ļ	and disbursements .	-115,558.	را در الله المرزول (الله المرزول (الله المرزول) 067	a distribuis de	The state of the s		
	b Net investment income (if negative, enter -0-)		967 \$15,500 \$100 \$100				
!	C Adjusted net income (if negative, enter -0-) .	1. L. A. C. L. L. A. C. L. A	10 1 12 12 12 12 12 12 12 12 12 12 12 12 1	15,193.	5 000 DF (0000)		

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

915,438.

6

		osses for Tax on Investm		1 4 5			T-7.8
(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 acqu P - Purcha D - Donati						(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SEE ATTAC	1a SEE ATTACHED SCHEDULE D					01/01/09	12/31/09
b							
<u>c</u>				 			
d e				<u> </u>			
(e) Gross sal	es price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba			(h) Gain or (e) plus (f) m	
	292,413.		34	4,171.			-51,758.
<u>b</u>	232,413.		<u>×</u> :	1,1,1,1			
С							
d							
e							
		g gain in column (h) and owned	(k) Excess of column	2 (1)		(I) Gains (Column (I) ain minus column (I	
(i) Fair Marke as of 12/3		(j) Adjusted basis as of 12/31/69	over column (j), if a		th	an -0-) or Losses (fr	om column (h))
a					<u> </u>		-51,758.
b							
<u>c</u>							
d e							
2 Capital gain net	l income or (net	capital loss).	also enter in Part I, line 7 enter -0- in Part I, line 7	_	2		-51,758.
3 Net short-term o	ranıtal daın or (le	ess) as defined in sections 1222		•			-31,730.
	• • •	8, column (c) (see the instruction	·· ·· ¬	1			
in Part I, line 8	er in Part I, line I	s, column (c) (see the instruction	11s). II (10ss), eliter -0-	- <u>.</u>	3		
Part V Qualific	cation Under	Section 4940(e) for Redu	ced Tax on Net Investme	nt Incom	ie		
(For optional use by of section 4940(d)(2) a	·	foundations subject to the sections part blank.	on 4940(a) tax on net investmer	nt income.)			
		on 4942 tax on the distributable		e period?		. Yes	X No
		y under section 4940(e). Do not each column for each year; see		any entrie			
(a) Base period Calendar year (i		(b) Adjusted qualifying distribution	(c)		(d) Distribution ratio (column (b) divided by column (c))		
beginning) in)	04.03					-
2008 2007		94,83 58,00		7,896. 1,903.			0.141992 0.054619
2006		102,24		7,209.			0.092348
2005		55,00		6,744.			0.050610
2004							
2 Total of line 1,	column (d)				2		0.339569
3 Average distribu	ution ratio for the	5-year base period - divide the		ľ			
number of years	s the foundation l	nas been in existence if less tha	n 5 years		3		0.084892
4 Enter the net va	alue of noncharita	able-use assets for 2009 from Pa	art X, line 5	.	4	· · · · · · · · · · · · · · · · · · ·	871,608.
5 Multiply line 4 b	y line 3				5		73,993.
6 Enter 1% of net	investment inco	me (1% of Part I, line 27b) .			6		10.
7 Add lines 5 and	6				7		74,003.
8 Enter qualifying	distributions from	m Part XII, line 4			8		123,750.
If line 8 is equa Part VI instructi		n line 7, check the box in Part	VI, line 1b, and complete that p	art using a	1% t	ax rate. See the	

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instru	tions)				
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	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,			10.		
	check here ► X and enter 1% of Part I, line 27b					
С	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-)			0.		
_	Add lines 1 and 2			10.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.		
_	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			10.		
6	Credits/Payments					
	2009 estimated tax pmts and 2008 overpayment credited to 2009					
	Exempt foreign organizations — tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld					
_	Total credits and payments Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			10.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.		
11	Enter the amount of line 10 to be Credited to 2010 estimated tax					
Par	t VII-A Statements Regarding Activities	T -				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	Yes	No		
	participate or intervene in any political campaign?	1a		Х		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1b		х		
	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					
c	: Did the foundation file Form 1120-POL for this year?	1 c		X		
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation	-				
е	foundation managers	1				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х		
_	If 'Yes,' attach a detailed description of the activities					
_	·					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X		
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х		
	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or		,			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6		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	7	Х			
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)					
	CO - Colorado					
F	o 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	8ь	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	9		х		
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10 orm 99	O PE	X 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 entit within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	ty 11	x_
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract August 17, 2008?	before 12	x
13 Did the foundation comply with the public inspection requirements for its annual returns an		Х
Website address N/A		
14 The books are in care of F GRIFFITH & COMPANY, CPA, P.C. Located at C/O 2400 BAYSHORE DRIVE, SUITE 100, FLOWER MOUND, TX		349/
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 –	Check here	- <u>-</u>
and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Re		
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?	Yes X No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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)?	Yes X 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 termin of government service, if terminating within 90 days)	e ation Yes X No	
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions of Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see	described in the instructions)?	x
Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than extend that were not corrected before the first day of the tax year beginning in 2009?	cepted acts,	x
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	on was a	
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?	Yes X No	
If 'Yes,' list the years ► 20, 20, 20, 20	_	
b Are there any years listed in 2a for which the foundation is not applying the provisions of s (relating to incorrect valuation of assets) to the year's undistributed income? (If applying s	section 4942(a)(2) ection 4942(a)(2) to	
all years listed, answer 'No' and attach statement — see the instructions)	2b	- X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, lis ▶ 20 , 20 , 20	It the years here.	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No	
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer per by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or b (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form determine if the foundation had excess business holdings in 2009)	riod approved	х
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	s 4a	x
b Did the foundation make any investment in a prior year (but after December 31, 1969) that jeopardize its charitable purpose that had not been removed from jeopardy before the first the tax year beginning in 2009?	day of 4b	x
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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)				
5a During the year did the foundation pay or incu	ir any amount to						
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))?	☐ Yes X	No			
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra		n 4955), or to carry	☐ Yes [X]	No			
(3) Provide a grant to an individual for travel,	Yes X	No					
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	Yes X	No					
(5) Provide for any purpose other than religio educational purposes, or for the prevention			Yes X	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)?							
Organizations relying on a current notice rega	irding disaster assistand	ce check here	▶ 🗌				
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?	,	Yes X	No			
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐ Yes X	No			
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	·			6b	X		
7a At any time during the tax year, was the found							
b If yes did the foundation receive any proceed				7b			
Part VIII Information About Officers, D and Contractors	irectors, trustees,	Foundation Manag	gers, Highly Pald E	.mpioyees,			
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see inst	ructions).				
	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	account.		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow			
RICHARD L. MICHAUX							
C/O 2400 BAYSHORE DR., #100, FLOWER MOUND, TX 75022	DIRECTOR 2.00	0.	0.		0.		
VIRGINIA J. MICHAUX							
C/O 2400 BAYSHORE DR., #100, FLOWER	1						
MOUND, TX 75022	2.00	0.	0.		0.		
RICHARD L. MICHAUX, JR.							
5321 WOODSCAPE DR. SE,	DIRECTOR						
SALEM, OR 97306	2.00	0.	0.		0.		
ALISON_M. REYNOLDS 4722 Rodman Street NW	DIRECTOR						
WASHINGTON, DC 20016	5.00	0.	0.		0.		
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1– see ir	structions). If none, er	nter '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 other allow			
NONE			, , , , , , , , , , , , , , , , , , ,				
0							
0							
0							
0							
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>	•		None		
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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Er	
3 Five highest-paid independent contractors for professional services — (see instruenter 'NONE.'	ctions). If 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	<u>▶</u>	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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 <u>N/A</u>		
2 11/2		0.
2 <u>N/A</u>		0.
3 N/A		0.
		0
4 N/A		0.
		0.
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 <u>N/A</u>		
	·	0.
2 <u>N/A</u>		
		0.
All other program-related investments. See instructions		
3		
See Line 3 Statement	·	0.
Total. Add lines 1 through 3	•	None
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Part X Minimum Investment Return (All domestic foundations must complete this part. For		
see instructions.)		· · · · · · · · · · · · · · · · · · ·
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		224 422
a Average monthly fair market value of securities	1 a	884,192.
b Average of monthly cash balances	1ь	689.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	884,881.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	-	
2 Acquisition indebtedness applicable to line 1 assets.	2	
3 Subtract line 2 from line 1d	3	884,881.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	13,273.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	871,608.
6 Minimum investment return. Enter 5% of line 5	6	43,580.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► □ and do not complete this pa		
1 Minimum investment return from Part X, line 6	1	43,580.
2a Tax on investment income for 2009 from Part VI, line 5	1 1	
b Income tax for 2009 (This does not include the tax from Part VI)	_	
c Add lines 2a and 2b	2c	10.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	43,570.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	43,570.
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	43,570.
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	123,750.
b Program-related investments — total from Part IX-B	1 b	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)	3 a	
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	123,750.

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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123,740.

10.

5

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				43,570.
2 Undistributed income, if any, as of the end of 2009:			-	1973.0.
a Enter amount for 2008 only			33,362.	
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2009				
a From 2004 0.				
b From 2005 55,000.				
c From 2006 102, 435.				
d From 2007 58,000.				
e From 2008 94,836.				
f Total of lines 3a through e	310,271.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 123,750.				
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				
e Remaining amount distributed out of corpus	123,750.			
5 Excess distributions carryover applied to 2009				
(If an amount appears in column (d), the same amount must be shown in column (a))		*		
Same amount must be shown in column (by)				
6 Enter the net total of each column as			,	
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	434,021.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed 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			33,362.	<u></u> .
f Undistributed income for 2009 Subtract lines			İ	
4d and 5 from line 1. This amount must be				42 570
distributed in 2010				43,570.
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	434,021.		-	
10 Analysis of line 9				
a Excess from 2005 55,000.				
b Excess from 2006 102, 435.				
c Excess from 2007 58,000.				
d Excess from 2008 94,836.				
e Excess from 2009 123,750.				Form 990-PF (2009)

a The name, address, and telephone number of the person to whom applications should be addressed N/A

b The form in which applications should be submitted and information and materials they should include N/A

c Any submission deadlines

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: N/A

3 Grants and Contributions Pa	aid During the Te	ear or Approved for Fut	ure Paymen	1			
Recipient	an harasa a sa	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
Name and address (home or business)		Substantial contributor					
a Paid during the year NATIONAL PKU ALLIANCE	2					ŀ	
PO BOX 501	•		501C3				
romahawk	WI 54487			PKU	RESEARCH		110,000
FLORIDA PKU FOUNDATIO							
5718 SW BALD EAGLE DE			501C3	ļ			10.000
PALM CITY SAVE BABIES THROUGH SCREENI	FL 34990			PKU	RESEARCH		10,000
PO BOX 281	ING FOUNDATION		501C3				
LOUDONVILLE	он 33182			PKU	RESEARCH		3,750
			ļ				
			1				
		<u> </u>	<u> </u>	<u> </u>		2 -	100 750
Total b Approved for future paymen		1	1			3a	123,750
b Approved for future payment	· C						
						Ì	
				1			
Total					▶	3b	

Part XVI-A Analysis of Income-Producing Ac	ctivities
--	-----------

Enter gross amounts unless otherwise indicated		Unrelated b	usiness income	Excluded by	section 512, 513, or 514	
•	ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a				 		
					- <u>-</u>	
d						
						, -,
g Fees	and contracts from government agencies					
2 Memb	bership dues and assessments					
3 Interes	t on savings and temporary cash investments	900001	87.			
4 Divid	ends and interest from securities	900001	15,230.			
	ental income or (loss) from real estate					
	financed property					···· ·
	ebt-financed property					
	ntal income or (loss) from personal property	22222				
	r investment income	900001			· · · · · · · · · · · · · · · · · · ·	
	r (loss) from sales of assets other than inventory				·	
	ncome or (loss) from special events					- 11
	s profit or (loss) from sales of inventory			 	·	
	revenue		.			· · · · · · · · · · · · · · · · · · ·
		l I				
		1 1				
e					· · · · · · · · · · · · · · · · · · ·	
	otal Add columns (b), (d), and (e)	"	15,317.			
	. Add line 12, columns (b), (d), and (e)	\			13	15,317.
	sheet in the instructions for line 13 to verify ca	alculations)				·
Part XVI.	-B Relationship of Activities to the	- Δccomplish	ment of Evemnt	Purnose		
Line No.						to the
▼	Explain below how each activity for which in accomplishment of the foundation's exempt	purposes (other	than by providing fu	nds for sucl	n purposes) (See the	e instructions)
	N/A					
		<u> </u>				
					<u> </u>	
. 						
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						http://www.
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<i>.</i> Form 990-P	' F '(2009) ΜΙCHAU)	X FAMILY FO	UNDATION			20-1	1807893	Pa	age 1 3
Part XVII	Information Re Exempt Organ	egarding Trans	sfers To and Transact	ions an	d Relationsl	nips With No	oncharitable		<u> </u>
			······································					Yes	No
descri	e organization directly bed in section 501(c) on ng to political organizat	of the Code (other	nge in any of the following with the thick that the	vith any o anizations	ther organization or in section	on 527,			
	- ·		oncharitable exempt organ	ization of			-		ĺ
(1) Ca		iodiladiloli to a ti	ionichantable exempt organ	12011011 01			1a(1)		v
• •	ther assets						1a(1)		X
	transactions						14 (2)		
	ales of assets to a non	icharitable exempl	t organization				1b(1)		х
• •	urchases of assets from		·				1b (2)		X
* -	ental of facilities, equip						1b (3)		X
1.1	eimbursement arrangei	•					1b (4)	_	X
(5) Lo	oans or loan quarantee	es					1b (5)		X
(6) Pe	erformance of services	or membership o	r fundraising solicitations				1b (6)		X
c Sharır	ng of facilities, equipme	ent, mailing lists,	other assets, or paid emplo	yees			1c		X
the ac	ods, other assets, or s	services aiven by f	nplete the following schedu the reporting foundation If in column (d) the value of	the found the goods	ation received s, other assets,	less than fair n or services rea	narket value in ceived	·- <u>-</u>	
(a) Line no	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d)	Description of tra	nsfers, transactions	s, and sharing arrar	ngement	is
	· · · · · · · · · · · · · · · · · · ·		······································						
			· · · · · · · · · · · · · · · · · · ·						
		A/ (A		_			· · · · · · · · · · · · · · · · · · ·		
		N/A							
			 						
				-					
-			· · · · · · · · · · · · · · · · · · ·						

						 	• • • • • • • • • • • • • • • • • • • •		
			· <u>-</u>	-					
				-					
descri	foundation directly or bed in section 501(c) of s,' complete the following	of the Code (other	d with, or related to, one or than section 501(c)(3)) or	more tax in section	exempt organi 527?	zations	Yes	X	No
	(a) Name of organizati	ion	(b) Type of organization	on	((c) Description (of relationship		
			N/A						
							·		
									
s complete D	lities of perjury, I declare that I beclaration of preparer (other to be little to	I have examined this ret than taxpayer or fiduciar	iurn, including accompanying scheduly) is based on all information of white	ch preparer h	ments, and to the bi as any knowledge		e and belief, it is true		t, and
G Signa	and or officer of flustees			Date		Title	Preparer's Identifyi	no oum	ber
H Paid	Preparer's signature	10/11	7-114.00			Check if self-	(See Signature in		
P Pre-			IMAN UT TO	106	/25/10	employed •	466-15	<u> 517</u>	<u>د</u>
e parer's	Firm's name (or GRIF)	FITH & COMP	ANY CPX, P.C.			EIN > 26	<u> </u>	8	

BAA

parer's Use Only

Firm's name (or yours if self employed), address, and ZIP code

GRIFFITH & COMPANY 2990 LONG PRAIRIE RD

FLOWER MOUND

Form **990-PF** (2009)

- 972-691-3497

TX_

75022-4845

Phone no

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		Employer identification number
MICHAUX FAMILY FOUNDATIO	ON	20-1807893
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tre 527 political organization	eated as a private foundation
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated 501(c)(3) taxable private foundation	d as a private foundation
Check if your organization is covered b Note: Only a section 501(c)(7), (8), or	by the General Rule or a Special Rule (10) organization can check boxes for both the General Ru	ule and a Special Rule See instructions
General Rule – X For an organization filing Form 990	, 990-EZ, or 990-PF that received, during the year, \$5,000	0 or more (in money or property) from any one
contributor (Complete Parts I and	")	
Special Rules -		
509(a)(1)/170(b)(1)(A)(v _i) and rece	n filing Form 990 or 990-EZ, that met the 33-1/3% support ived from any one contributor, during the year, a contribut line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	tion of the greater of (1) \$5,000 or (2) 2% of the
aggregate contributions of more that	organization filing Form 990 or 990-EZ, that received from \$1,000 for use exclusively for religious, charitable, scie animals. Complete Parts I, II, and III	m any one contributor, during the year, entific, literary, or educational purposes, or the
contributions for use exclusively for this box is checked, enter here the	organization filing Form 990 or 990-EZ, that received from r religious, charitable, etc., purposes, but these contribution total contributions that were received during the year for the parts unless the General Rule applies to this organization	ons did not aggregate to more than \$1,000 If an exclusively religious, charitable, etc.
religious, charitable, etc. contribution	ons of \$5,000 or more during the year.	► \$
990 PF) but it must answer 'No' on Pa	overed by the General Rule and/or the Special Rules does int IV, line 2 of their Form 990, or check the box on line H the filing requirements of Schedule B (Form 990, 990-EZ	of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork for Form 990, 990EZ, or 990-PF.	Reduction Act Notice, see the Instructions Sc	chedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
_	IX FAMILY FOUNDATION	1 ' '	807893
Part I	Contributors (see instructions) NONE OV 5000		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	N/A	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

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

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

1	i	n	۵	23	C	tmt	
L	J			2.5			

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
WIRE FEES	115.	0.	115.	0.
FOREIGN SECURITY FEES	9.	9.	9.	0.

Total <u>124. 9. 124.</u> 0.

Form 990-PF, Page 7, Part IX-B, Summary of Program Related Investments Line 3 Statement

All other program-related investments. See instructions. N/A	
N/A	0.
	0.

Total _______0.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WP STEWART	INVESTMENT MANAGEMENT	14,341.	14,341.		

Total <u>14,341.</u> <u>14,341.</u>

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

	End of	Year
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
COMMON STOCK - SEE ATTACHED SCHEDULE	789,240.	884,304.
Total	789,240.	884,304.

Form 990-PF, Page 2, Part III,	Line 5
Other Decreases Stmt	

NET C	APITAL	LOSS	 51,758	<u>3.</u>
FIT E	XPENSE	· — — —	 156	<u>; .</u>
Total			 51,914	 !.

REALIZED GAINS AND LOSSES MICHAUX FAMILY FOUNDATION

RWP645964 From 01-01-09 Through 12-31-09 Gain Or Loss

Reporting Currency: US Dollar

1	Long Term	2,667 18	-321 95	-1,089 37	-2,636 63	-1,250 17	-3,91196	4,364 41			00 0				-1,246 03					-2,422 01		-240 47	-18 76	-2 94	2,574 49													-7,565 90
202 1	Short Term								0 57@	-1,150 36		1 22@	-1,371 92	-8 84@		(0.52@	3 63@	8 20@							17 08@	37 66@	18 80@	22 63@	0 0 0 0	23 34@	27 04@	7 06@	0 10@	-3,779 62	-2,054 34	-2,169 54	
1	FX Gam	000	00 0	000	00 0	000	00 0	116 51	0 57	00 0	00 0	1 22	000	-8 84	00 0		0 52	3 63	8 20	00 0		0 0	00 0	00 0	00 0	17 08	37 66	18 80	22 63	160	23 34	27 04	2 06	0 10	00 0	00 0	000	-4,942 82
	Price Gain	2,667 18	-321 95	-1,089 37	-2,636 63	-1,250 17	-3,91196	-4,480 92	00 0	-1,150 36	00 0	00 0	-1,371 92	00 0	-1,246 03		00 0	000	00 0	-2,422 01		-240 47	-18 76	-2 94	2,574 49	00 0	00 0	00 0	00 0	00 0	00 0	000	00 0	000	-3,779 62	-2,054 34	-2,169 54	-2,623 08
	Proceeds	13,412 81	1,868 03	6,771 59	3,327 35	1,588 05	3,865 56	9,061 10	140 16	00 0	00 0	239 46	6,227 45	530 61	3,553 91		413 95	82 59	446 69	7,177 87		717 79	2 121 24	2,651 56	5,377 84	619 12	880 10	334 63	3,199 39	713 17	401 02	1,050 20	108 65	7 70	6,593 69	4,632 32	6,176 42	16,282 19
Cost	Basis	10,745 63	2,189 98	7,860 96	5,963 98	2,838 22	7,777 52	13,425 51	139 59	1,15036	00 0	238 24	7,599 37	539 45	4,799 94	:	413 43	78 97	438 50	88 665'6		928 26	2 140 00	2.654 50	2,803 35	602 04	842 44	315 83	3,176 76	712 26	377 68	1,023 16	101 59	2 60	13,373 31	99 989'9	8,345 96	23,848 09
	Quantity Security	375 00 Qualcomm Inc	40 00 PepsiCo Inc	145 00 PepsiCo Inc	220 00 Staples Inc	105 00 Staples Inc		4,000 00 Li & Fung HKD		666 00 HSBC Holdings PLC Issue 09	666 00 HSBC Holdings PLC Issue	Cash Account Balance	175 00 Fastenal Co	Dividend Accrual	100 00 Automatic Data Processing	Inc	Dividend Accrual	Cash Account Balance	Cash Account Balance	200 00 Automatic Data Processing	Inc	20 00 Automatic Data Processing	40 00 Procter & Gamble Co		300 00 Schwab Charles Corp		Cash Account Balance	300 00 McGraw Hill Cos Inc	150 00 McGraw Hill Cos Inc	200 00 McGraw Hill Cos Inc	2,780 00 Tesco GBP							
Close	1	02-13-09	03-05-09	03-02-09	03-05-09	03-05-09	03-05-09	03-06-09	03-25-09	04-22-09	04-22-09	04-24-09	04-24-09	04-24-09	04-30-09		04-30-09	05-11-09	05-12-09	02-18-09		02-18-09	06-19-00	05-19-09	05-19-09	05-27-09	05-27-09	05-27-09	05-27-09	05-27-09	05-27-09	05-27-09	05-27-09	05-29-09	06-02-09	06-03-09		60-50-90
Open	Date	01-26-04	04-21-05	07-11-05	04-10-07	04-13-07	12-13-07	08-14-07		10-24-08	01-01-20		07-11-08		08-03-07					08-03-07		08-06-07	03.10.05	03-13-05	06-18-04										80-90-90	80-90-90	06-27-08	08-10-07

^{***} This report is intended to be an internal worksheet and should not be relied upon for accuracy, unless it conforms with the official records of the firm *** Mortgage backed factors are updated on the 8th business day of the month *** We encourage you to compare this report to the account statement you receive from your custodian for the corresponding period

REALIZED GAINS AND LOSSES MICHAUX FAMILY FOUNDATION

RWP645964 From 01-01-09 Through 12-31-09

Reporting Currency: US Dollar

SSC	Long Term	-1,867 15	76.100	77 136 1	00 107,1-	05 857.1-									į	-6,401 47		424 91	-1 331 79	(1) (00)	-1,192 68		-528 29	-235 03	•					478 14	;	-719 69	-1,599 61	-45158	17671-	00 8/7,	
Gain Or Loss	Short Term L	((ii) 57 75(0i)			(0 660	3,355 18	-3,339 51	-2,062 39	-2,322 10	-253 77	-1,748 57	-838 88	-2,374 89		3,954 58									23 83@	264 31@	-0 68@	6 37@								
	FX Gam	-1,283 80	22.95	8 6	000	000	66 0	1,297 96	1,788 55	9 35	00 0	00 0	000	000	000	00 0	000	00 0	000	8	00 0	;	000	000		23 83	264 31	-0 68	6 37	00 0		000	00 0	000	000	-114 53	
	Price Gain	-583 35	0000	-201 34	-1,251 66	-1,258 50	00 0	2,057 22	-5,128 06	-2,071 74	-2,322 10	-253 77	-1,748 57	-838 88	-2,374 89	-6,401 47	3,954 58	424 91	1 221 70	67 155,1-	-1,192 68		-528 29	-23503		00 0	000	00 0	000	478 14		-71969	-1,599 61	-451 58	17 977-	1,392 53	
	Proceeds	4,392 68	327 72	5,107.65	5,107.64	5,107 65	1,750 34	15,170 73	14,669 72	15 67	7,448 52	827 61	5,821 09	2,405 26	6,276 15	16,406 68	18,897 27	3,977 39	73 606 7	16 767,1	6,887 42		4,861 71	2 010 80	2001	425 13	2,562 42	267 70	107 33	4,013 53		6,017 81	8,122 29	2,399 44	3,599 15	14,120 98	
Ş	Basis	6,259 83	304 76	5,308 99	6,359 30	6,366 15	1,749 35	11,815 55	18,009 23	2,078 06	9,770 62	1,081 38	7,569 66	3 244 14	8,651 04	22,808 15	14,942 69	3,552 48	71 VC7 0	8,624 36	8,080 10		5,390 00	2 245 83	0001414	401 30	2,298 11	268 38	100 96	4,49167		6,737 50	9,721 90	2,851 02	4,375 86	12,842 98	
	Quantity Security	750 00 Tesco GBP		100 00 Procter & Gamble Co		100 00 Procter & Gamble Co	Cash Account Balance	625 00 CRH EUR	150 00 Synthes Inc CHF	260 00 Danone EUR (S/R 12/06/09)	225 00 Fastenal Co	25 00 Fastenal Co	175 00 Fastenal Co	75 00 Fastenal Co	200 00 Fastenal Co	80 00 Mastercard Inc CI A	700 00 MSCI Inc CI A	50 00 Chipotle Mexican Grill Inc		180 00 Automatic Data Processing Inc	170 00 Automatic Data Processing	Inc	120 00 Automatic Data Processing	50 00 Automatic Data Brocessing	Jo oo Automanic Data Hoccassing	Cash Account Balance	Cash Account Balance	Cash Account Balance	Cash Account Balance	100 00 Automatic Data Processing	Inc	150 00 Automatic Data Processing Inc	125 00 United Technologies Corp	10 00 Mastercard Inc CI A	15 00 Mastercard Inc CI A	225 00 Hennes & Mauritz Ser B NPV	
ō	Close	06-05-09	06-11-00	06-18-09	60-81-90	60-81-90	06-19-09	60-61-90	06-19-09	06-26-09	06-30-09	06-30-09	07-01-09	07-02-09	02-06-09	08-21-09	10-01-09	10-16-09	0000	10-22-09	10-22-09		10-22-09	00.50.01	60-77-01	10-28-09	10-28-09	10-28-09	10-28-09	10-28-09		10-29-09	11-06-09	11-09-09	11-09-09	11-10-09	
(Open	08-29-07		03-23-05	03-26-07	03-27-07		03-02-09	11-14-08	06-11-09	07-11-08	10-02-08	10-02-08	10-02-08	10-02-08	06-12-08	05-19-09	08-15-08		08-06-07	08-10-07		80-80-80	90 90	90-90-90					80-80-80		80-80-80	12-13-07	06-12-08	06-16-08	08-10-07	

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REALIZED GAINS AND LOSSES MICHAUX FAMILY FOUNDATION

RWP645964 From 01-01-09 Through 12-31-09

Reporting Currency: US Dollar

								Gain Or Loss	r Loss
Open	Close			Cost					
Date	Date	Quantity	Security	Basis	Proceeds	Price Gain	FX Gain	Short Term Long Term	Long Term
	-	, ! !		1	:		1		: !
	11-13-09	Cash Acco	Cash Account Balance	7 35	7 42	00 0	0 0 0	0 0 0	(2)
80-80-80	08-08-08 12-22-09	30 00 Polo Ralph	30 00 Polo Ralph Lauren Corp Cl A	2,093 79	2,433 53	339 74	00 0		
TOTAL G	AINS							7,797 02	7 284 31
TOTAL LOSSES	OSSES							-23,475 42	•
				344,171.56	292,413.21	-49,107.30	-2,651.04	-15,678.40	·
TOTAL R.	EALIZED G	TOTAL REALIZED GAIN/LOSS -51,758 35							

An '@' denotes a currency transaction

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*** We encourage you to compare this report to the account statement you receive from your custodian for the corresponding period

MICHAUX FAMILY FOUNDATION 12/31/2009 Portfolio Summary - Book Value

Equities	Shares	Total
BHP BILLITON PLC SHS	1250	N/A
AMPHENOL CORP NEW CL A	700	22,418.32
ANSYS INC COM	550	23,153.65
BECTON DICKINSON & CO	450	37,916.38
CHIPOTLE MEXICAN GRILL INC COM	350	24,867.36
GOOGLE INC CL A	75	26,346.80
INFOSYS TECHNOLOGIES LTD SPON ADR REPSTG	550	22,520.47
INTERCONTINENTAL EXCH ANGE INC COM	100	10,274.76
MASTERCARD INC CL A COM	240	54,902 25
MCAFEE INC COM	585	23,218.79
PEPSICO INC	455	26,671.06
POLO RALPH LAUREN CORP CL A	240	16,750.35
PRAXAIR INC	350	19,444.32
QUALCOMM INC	595	21,226.69
CHARLES SCHWAB CORP COM NEW	1650	28,602.69
STAPLES INC	995	25,361.79
UNITED TECHNOLOGIES CORP DEL COM	335	24,582.52
YUM BRANDS INC COM	450	16,143.62
DEUTSCHE BANK AG LONDON WTS ON SHS	4100	43,096.94
BOOK VALUE OF TOTAL EQUITIES		467,498.76
CASH		578.00
GLOBAL SECURITIES (BV=MV)		321,741.00
TOTAL PORTFOLIO Book Value		789,817.76

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 bo filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II plete Part II unless you have already been granted an automatic 3-month extension on a	(on page 2	 of this fori ed Form 8	. ▶ 🔽 m). 8868
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies need	eded).		
A corporation Part I only	on required to file Form 990-T and requesting an automatic 6-month extension—chec	k this box a	nd comple	ete . ▶ 🔲
	rporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form ncome tax returns.	7004 to req	uest an e.	xtension of
one of the in electronically returns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month at returns noted below (6 months for a corporation required to file Form 990-T). However, if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed a ore details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you ca is 990-BL, 6 nd signed pa	nnot file i 069, or 8 age 2 (Part	Form 8868 870, group t II) of Form
Type or	Name of Exempt Organization	Employer i	dentificati	on number
print	MICHAUX FAMILY FOUNDATION C/O GRIFFITH & COMPANY, CPA, P.C.	20	1807	7893
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions 2990 LONG PRAIRIE ROAD			
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions FLOWER MOUND, TX 75022			
Check type	of return to be filed (file a separate application for each return):			
☐ Form 99	0 Form 990-T (corporation)		Form 472	20
☐ Form 99	0-BL Form 990-T (sec 401(a) or 408(a) trust)		Form 522	27
☐ Form 99	00-EZ Form 990-T (trust other than above)		Form 606	59
✓ Form 99	00-PF		Form 887	70
Telephone If the orga If this is for the who	s are in the care of ► TODD M. GRIFFITH No ► (972) 691-3497 FAX No. ► () anization does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN) le group, check this box ► □ . If it is for part of the group, check this box ne names and EINs of all members the extension will cover.	s box .	 lf t	this is
until for the ► ☑	uest an automatic 3-month (6 months for a corporation required to file For AUGUST 15 , 20 10 , to file the exempt organization return for the	n named abo	ove. The e	extension is
▶ □	tax year beginning, 20, and ending		, 2	20
2 If this	tax year is for less than 12 months, check reason: Initial return Final return	☐ Change	ın accour	nting period
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tany nonrefundable credits. See instructions	ах, За	\$	0
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tents made. Include any prior year overpayment allowed as a credit	ax 3b	\$	0
depos	ce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if require it with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymen). See instructions.	ed, ent 3c	٦ ـ	0
	you are going to make an electronic fund withdrawal with this Form 8868, see Form 8 t instructions.	453-EO and	Form 887	79-EO
For Privacy	Act and Paperwork Reduction Act Notice, see Instructions. Cat No 27916D	F	orm 8868	(Rev 4-2009)

Form 8	368 (Rev 4-2009)																	Page
Noté.	ou are filing fo Only complete ou are filing fo	Part II	if you ha	ave alread	dy been	grante	d an a	utomati	c 3-mo	nth e	xten	sion o	n a pr	and c revious	heck ti ly filed	nis bo Form	8868	▶
Part				tomatic)										al (no	copie	s nee	eded).	
Type print	or Name MICH	HAUX F		FOUNDA						, P.C) .			2	0	1	ication 80789	numbe 3
File by extend due da	ed 2990	LONG	PRAIR	oom or sui)									For	IRS use	only		
filing the return instruc	e Crty, to See	City, town or post office, state, and ZIP code. For a foreign address, see instructions FLOWER MOUND, TX 75022																
□ F	k type of retu orm 990	ırn to b	☑ Fo	(File a se orm 990-l orm 990-7	PF							rm 10 rm 47)41-A				n 6069 n 8870	
☐ F	orm 990-BL orm 990-EZ		☐ Fo	orm 990-	T (trust	other	than al	oove)			Fo	rm 52	227					
	! Do not comp books are in						ranted	an au	omatic	3-m	onth	exte	nsion	on a	previou	sly fil	ed For	m 8868
• If the for the list w	e organization is is for a Gro e whole group ith the names	oup Rete p, chect and Ell	urn, ento k this be Ns of all	er the orgox ox I membe	ganizati . ► [rs the e	ion's fo] . If it extension	our dig t is for on is fo	it Grou part o or.	p Exem the gi	nptio roup,	n Nu , che	mber ck th	(GEN is box	(. ▶ [. If this	► □ sis ha
4	I request an a	ddition	al 3-moi	nth exten	nsion of	f time u	until		NOVE	MB	ER 1	5		, 20_	10			
5	For calendar y	ear 20	09_, or 0	other tax	year be	eginning	g			, 2	20	, and	d endi	ing				, 20
6 7	If this tax yea State in detail DOCUMENT:	l why yo	ou need ESSARY	the exte	nsion £	ADDIT	IONAL	TIME	IS REC	UIR	ED I	N OR	DER	TO OE	hange STAIN			
	ACCURATE	TAX RE	EIURN.	-														
8a	If this applications and the second s						D-T, 47	'20, or	6069,	ente	r the	tenta	ative t	ax,	8a	\$	··	
b	If this applica estimated tax amount paid	ition is to	for Form	n 990-PF de. Includ	, 990-T le any p	, 4720									8h	\$		-
С	Balance Due.	Subtract	t line 8b	from line 8	8a Inclu	ude you	r payme	ent with	this for	m, or	r, if reem).	equired See ins	d, dep	osit ons		\$		
Under	penalties of perjuie, correct, and co	ıry, I decla	are that I h	nave examır	ned this fo	Signa form, incl	ture a	and Ve	rificat	tion					best of	my kne	owledge	and belie

Signature > Richard L. Michary by m & via POA

Title - President

50m 2848		OMB No 1545-0150						
(Rev June 2008)	and	Power of Attorney and Declaration of Representative						
Department of the Treasury Internal Revenue Service	► T y	Received by						
	Name							
Part I Power of Atto Caution: Form 28	Telephone							
	······································	and date this form on page		Date / /				
Taxpayer name(s) and addr		and date this form on pag	Social security number(s)	Employer identification number				
MICHAUX FAMILY FO			Joeral Security Humber(3)	Cinployer identification number				
THE CHILD IN THE TO	01101111011			20-1807893				
C/O 2400 BAYSHORE	DRIVE. #100			Plan number (if applicable)				
•, •			Daytime telephone number	1				
FLOWER MOUND , TX	75022		(972) 691-3497					
hereby appoint(s) the follow		attorney(s)-in-fact.						
,	• ,	• • •						
2 Representative(s) mus	st sign and date this fori	m on page 2, Part II.						
Name and address		· • ·	CAF No	03-0080251R				
TODD M. GRIFFITH,	CPA			(972) 691-3497				
c/o GRIFFITH & CO		С.	Fax No.					
2990 LONG PRAIRIE			Check if new Address Telephone No Fax No					
Name and address			CAF No.					
			Telephone No					
			Fax No					
			Check if new Address	Telephone No Fax No				
Name and address			CAF No.					
			Telephone No	· 				
			Fax No					
			Check if new Address	Telephone No Fax No				
to represent the taxpayer(s)	before the Internal Rev	renue Service for the follo	wing tax matters					
3 Tax matters								
Type of Tax (Income, Em	ployment, Excise, etc)	Tax F	orm Number	Year(s) or Period(s)				
or Civil Penalty (see the	instructions for line 3)	(1040,	941, 720, etc)	(see the instructions for line 3				
PRIVATE FOUNDATIO	N INCOME TAY	FORM 990-PF AND	ΔΙ.Ι. STATE	TAX YEAR 2009				
TRIVIII TOURDIII TO	IN THEOTHE TAX	TORT 990 II AND	ABB BIAIB	TAX TEAK 2009				
		AND RELATED FOR	MS					
		<u> </u>						
4 Specific use not recor	rded on Centralized Aut	thorization File (CAF). If the for Line 4. Specific Uses I	ne power of attorney is for a sp	ecific use not recorded				
		-	* - · · · · · · · · · · · · · · · · · ·					
5 Acts authorized. The i	representatives are auth	norized to receive and insp	pect confidential tax information	and to perform any and all acts or sign any agreements, consents				
or other documents T	he authority does not in	clude the power to receive	e refund checks (see line 6 belo	ow), the power to substitute anoth				
representative or add	addıtıonal representatıv	es, the power to sign cert See the line 5 instructions	ain returns, or the power to exe	cute a request for disclosure of ta				
	• •							
Exceptions. An unenre situations. See Unenre	olled return preparer ca olled Return Preparer in	nnot sign any document to n the instructions. An enro	or a taxpayer and may only repolled actuary may only represen	resent taxpayers in limited t taxpayers to the extent provided				
in section 10.3(d) of T	reasury Department Circ	cular No. 230 (Circular 23)	An enrolled retirement plan	administrator may only represent				
taxpayers to the exten	it provided in section 10) 3(e) of Circular 230. See	the line 5 instructions for restri	ctions on tax matters partners. In practice under the supervision of				
another practitioner)	in produtioners (levels	is and if authority is militer	a tion example, they may only p	added direct the supervision of				
List any specific additi	ons or deletions to the	acts otherwise authorized	in this power of attorney					
TODD GRIFFITH IS AUTHORIZED TO SIGN, EXECUTE, AND FILE FEDERAL AND STATE TAX I								
			Y FOUNDATION FOR TAX					
		orize a representative nar name of that representati		OT TO ENDORSE OR CASH, refu				

Name of representative to receive refund check(s)

- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- ! am one of the following:
- a Attorney a member in good standing of the bar of the highest court of the jurisdiction shown below.
- b Certified Public Accountant duly qualified to practice as a certified public accountant in the jurisdiction shown below.
- c Enrolled Agent enrolled as an agent under the requirements of Circular 230.
- d Officer a bona fide officer of the taxpayer's organization
- e Full Time Employee a full-time employee of the taxpayer.
- f Family Member a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).
- g Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10 3(d) of Circular 230),
- h Unenrolled Return Preparer the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See Unenrolled Return Preparer in the instructions.
- k Student Attorney student who receives permission to practice before the IRS by virtue of their status as a law student under section 10 7(d) of Circular 230.
- Student CPA student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10 7(d) of Circular 230.
- r Enrolled Retirement Plan Agent enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

► IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.

Designation — Insert above letter (a - r)	Jurisdiction (state) or identification	Signature	Oate
ь	TX	THM FILL CPA	1/25/2010
			5 0040 /D 5 0000

FD(29312 07*m*0408 Form 2848 (Rev 6-2008)

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CUU. 4