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. 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

	ndar year 2009, or tax year beginning		, and ending	······································	
G Che	ck all that apply. 🔃 Initial return 📙	Initial Return of a former	oublic charity	☐ Fina	al return
	Amended return	Address	change Name of	change	
Hee th			JA	Employer identification nur	nber
Use th		ILL HARMSEN SR	' '	20-2210574	
Otherwi		in i	В	Telephone number (see the	instructions)
print	3131 E ATAMEDA AVE #20	001	الا	•	msa actions)
or type See Spec	PEREED OF TOTAL		<u> </u>	520-327-7575	
Instruction			C	If exemption application is	· •
				1 Foreign organizations, chec	
H 안		n 501(c)(3) exempt private		2 Foreign organizations meet	ing the 85% test, check
	Section 4947(a)(1) nonexempt charita			here and attach computation If private foundation status	
	r market value of all assets at end of year	Accounting method X	Cash Accrual	under section 507(b)(1)(A)	
(11	om Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60	
\$		Part I, column (d) must be o	n cash basıs)	under section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	7 Levnenses ner honks	income	income	for charitable
	columns (b), (c), and (d) may not ne	ces-			purposes
	sarily equal the amounts in column ((see the instructions).)	a)			(cash basis only)
	1 Contributions, gifts, grants, etc, received (att	sch) 5,943,113.			
	2 Ck If the foundn is not req to att Sc		<u> </u>		
	3 Interest on savings and temporar		· · · · · · · · · · · · · · · · · · ·		
	cash investments.	'			
	4 Dividends and interest from securities	32,623.	32,623.	32,623.	
	5a Gross rents				
1	Net rental income or (loss)	- 2	STATEMENT 1	-	
R	6a Net gain/(loss) from sale of assets not on line	81,810.	244	ř	
E V	b Gross sales price for all 524, 9	65.			
¥	7 Capital gain net income (from Part IV, line 2	· · · · · · · · · · · · · · · · · · ·	81,810.	è	,
E N	8 Net short-term capital gain			131,833.	
U	9 Income modifications		,		
E	10 a Gross sales less returns and			1	
	allowances		<u> </u>		
	b Less Cost of goods sold	*			,
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				*
	SEE STATEMEN	T 2 3,679.			
	12 Total. Add lines 1 through 11	6,061,225.	114,433.	164,456.	······································
	13 Compensation of officers, directors, trustees,	etc 141,000.	21,150.		119,850.
	14 Other employee salaries and wages				<u> </u>
1	15 Pension plans, employee benefits	3			
ام	16 a Legal fees (attach schedule)	•			
A D M	b Accounting fees (attach sch) SEE S'	Г 3 4,240.	1,060.		3,180.
1 1	c Other prof fees (attach sch)				5,250.
0 N	17 Interest	7,412.	7,412.		
PS	18 Taxes (attach schedule)(see instr.) SEE STI		1,320.		10,500.
RRAATT	19 Depreciation (attach	11,020.	1,520.		10,300.
RATIVE E	sch) and depletion				
, N V	20 Occupancy	11,730.	1,760.		9,970.
GE	21 Travel, conferences, and meeting			·	2,7,5,0,
AENX	22 Printing and publications				
? ö 🎒	23 Other expenses (attach schedule)				
Z D E Z E	SEE STATEMEN	<u>r 5</u> 30,393.	29,888.]	_505.
A E X P E N S E S	24 Total operating and administration	/e			
ร์	expenses. Add lines 13 through 2	206,595.	62,590.		144,005.
	25 Contributions, gifts, grants paid PART	207000.			23,000.
REC	26 Fotal expenses and disbursement Add lines 24 and 25	nts.			
\$ \ <u>_</u>	LI V Ade lines 24 and 25	229,595.	62,590.	0.	167,005.
á l	27 Subtract line 26 from line 12:	_	-		
'NOV 1	a Excess of evenue over expense 2 and dispursements	5,831,630.		1	
_ · · •	b Net investing tincome (if negative, enter -0	3,031,030.	51,843.	 	
	C Adjusted net income (if negative, enter -0)	' 	J1,043.	164,456.	
	Privacy Act and Panenwork Reduction	n Act Notice and the inst		104,456.	Farm 000 DE (2000)

G18 \

Dart	1162	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		l of year
ran		Dalance Sheets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	22,461.	2,718,402	2,718,402.
	2	Savings and tempor	ary cash investments			
	3	Accounts receivable	>	Bur San Bur Bar San Sant E	e to is all st.	. 1. 3. 2. 2. 2. 3
		Less allowance for	doubtful accounts ►			
	4	Pledges receivable	•		* ,	
		Less [,] allowance for	doubtful accounts ►			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see the instructions)			
_	7	Other notes and loans rec	eivable (attach sch)	the Andrew Co	William Falor Book Steel Steel	
S		Less allowance for	doubtful accounts ►			
A S E T	8	Inventories for sale	or use			,
	9	Prepaid expenses ai	nd deferred charges .	600.	600	. 600.
S	ĺ	obligations (attach s	•		280,452	
	ı	b Investments — corporate		2,487,239.	5,166,276	4,809,569.
	۱ ۱	c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis.	buildings, and	查费多量		<i>¾</i>
		Less: accumulated deprec (attach schedule)	ation			
	12	Investments - morte	gage loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and e				
		Less accumulated deprec (attach schedule)				
		Total assets (to be	be <u>SEE STATEMENT 6</u>) completed by all filers –		177,700	
	<u> </u>		o, see page 1, item I)	2,510,300.	8,343,430	7,986,722.
l		Accounts payable ar	nd accrued expenses			- *
A	18	Grants payable				-
B	19	Deferred revenue	han touchen O other described according			- →
Ļ	20		tors, trustees, & other disqualified persons s payable (attach schedule)			\dashv ,
Ţ	22		the SEE STATEMENT 7		1,500	\dashv
E	~~	·				
E S	23	Total liabilities (add		0.	1,500	」 `
	į		llow SFAS 117, check here X 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted		2,510,300.	8,341,930	<u>.</u>
TN	25	Temporarily restricted	ed			_ 1
, D	26	Permanently restrict				_
A B S A L T A		Foundations that do and complete lines	o not follow SFAS 117, check here 27 through 31.			
EL	27	Capital stock, trust p	orincipal, or current funds			
SN	28	Paid-in or capital surplus,	or land, building, and equipment fund			
ΟĒ	29	Retained earnings, accum-	ulated income, endowment, or other funds			
R S	30		fund balances (see the instructions)	2,510,300.	8,341,930	
	31	Total liabilities and (see the instructions	net assets/fund balances	2,510,300.	8,343,430	
Part	111	•	ges in Net Assets or Fund Balanc		0,313,430	•1
	Tota	I net assets or fund ba	alances at beginning of year - Part II. colu		igree with	
	end-	of-year figure reported	d on prior year's return)		<u> </u>	
2		er amount from Part I,			2	
პ 4		increases not included in li	ne z (itemize)			
4		lines 1, 2, and 3 ases not included in line 2 ((stamuza)	•	4	
<u>ح</u>			alances at end of year (line 4 minus line 5)) _ Part II _ column (h)	Ine 30	
	i Ula	i not assets of fully be	aiances at enu oi year (iiile 4 minus iine 5,	, — rait II, CUIUIIIII (D),	111E 30 E	8,341,930.

(a) List and descri	be the kind(s) of property sold (e.g., rouse, or common stock, 200 shares ML	eal estate,	(b) How acquire P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SEE STATEMENT 8			D Donation		
b				 	
c				1	
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		(h) Gain or (e) plus (f) m	
а					
b					
С		_			
d					
e					
Complete only for assets sho	wing gain in column (h) and owned by	the foundation on 12/31/69	9	(I) Gains (Col	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (I han -0-) or Losses (fi	(), but not less
a					
b					
С					
d					
е					
Capital gain net income or (n Net short-term capital gain or	et capital loss) If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		81,810.
	ne 8, column (c) (see the instructions)	··· ¬	.		131,833.
	er Section 4940(e) for Reduce	d Tay on Net Investm		<u> </u>	131,033.
If 'Yes,' the foundation does not qu	this part blank ection 4942 tax on the distributable amalify under section 4940(e) Do not co	mplete this part	·	Yes	☐ No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution olumn (b) divided	
2008	- 				
2007					
2007	+				
2005			- 		
2004					
2 Total of line 1, column (d)	<u> </u>		2		
3 Average distribution ratio for number of years the foundation	the 5-year base period – divide the to on has been in existence if less than 5	tal on line 2 by 5, or by the	3		
4 Enter the net value of noncha	aritable-use assets for 2009 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8		
Part VI instructions.	than line 7, check the box in Part VI,	line 1b, and complete that	part using a 1		
BAA				For	n 990-PF (2009)

	1 990-PF (2009) DOROTHY HARMSEN AND BILL HARMSEN SR. 20-22				Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	e instru	ctions)		
1 8	Exempt operating foundations described in section 4940(d)(2), check here	<u>-,~</u>	Mr. 12 .	9 sv	
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
ŧ	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		1,	037.
	check here ► and enter 1% of Part I, line 27b	a star		, e	; .' ·
C	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	No.	か *** *** ** さ ::	\$.7	. 1
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	, ,,,	· · · · · · · · · · · · · · · · · · ·		
		2			0.
3	Add lines 1 and 2	3		1,	037.
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,	037.
6	Credits/Payments Credits/Payments	- k :		k- ,	
ā	2009 estimated tax pmts and 2008 overpayment credited to 2009	- 1	'A', =	2 ³ 7	,
t	Exempt foreign organizations — tax withheld at source 6b		. 7 4	^	4
C	: Tax paid with application for extension of time to file (Form 8868)	ن و ر	,	in ,	
c	Backup withholding erroneously withheld	. *	··, '		<u> </u>
7	Total credits and payments. Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			32.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 9 ►	9		1,	126.
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	1			
Par	t VII-As Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		1.1	Yes	No
	participate or intervene in any political campaign?		1 a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed	- ,	* -	<u>}</u> , , , , ,
_	or distributed by the foundation in connection with the activities			-	
	Did the foundation file Form 1120-POL for this year?. Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1c		X
Ī	(1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow \$	0		2	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		7 1	, 34	
	foundation managers $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				لــــا.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	<u> </u>	X
	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				لـــــــــــــــــــــــــــــــــــــ
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	L	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	<u> </u>	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If 'Yes,' attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conf	flict			
	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	ļ
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) CO				
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		8b	X	
9		0404545	—		
J	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete F	742(J)(5) Part XIV	9	Х	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan and addresses	nes	10	ĺ	X
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Forn	m 990-PF (2009) DOROTHY HARMSEN AND BILL HARMSEN SR.	20-22105	74	F	age 5
Par	rt 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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemp	tion application?	13	Χ	
14	The books are in care of ► J DENNIS BARTLETT Telephore	one no ► <u>520-3</u>	<u>26-8</u>	200	
15	Located at ► 6075 E GRANT RD TUCSON AZ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check he				- FT -
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	,	-	N/A
Par	rt VII-B ² Statements Regarding Activities for Which Form 4720 May Be Required	1.0	-		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		1	Yes	No
1:	a During the year did the foundation (either directly or indirectly)			1.03	110
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	14	; '	· ~ .
	(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	3	,
	(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 termination of government service, if terminating within 90 days)	Yes X No	, ,		
1	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instru	in ctions)?	1 b	· N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	~ 4'	di.	
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted ac that were not corrected before the first day of the tax year beginning in 2009?	ts,	1c		Х
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 $4942(j)(5)$)		·		ą.
•	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				
Į	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 49)	942(a)(2) 42(a)(2) to		-	,
	all years listed, answer 'No' and attach statement - see the instructions)		2b	N	/A
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year 20, 20, 20	rs here	3	,	
9.					
	a 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			
l	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 appropriate Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, (2) the lapse of the la	oved 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)		3b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	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?		4b		Х

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Form **990-PF** (2009)

Form 990-PF (2009) DOROTHY HARMSEN AN	**			20-22:	10574	4	Р	Page 6
Part VII-B Statements Regarding Activiti	_	14/20 may be keq	uireu (conti	nueu)		, 1	;	,
5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	-	on (section 4945(e))?		res X	No	16. / 17. / 27. /	1 10, 11 11 12	. s
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?		Δ,		No			*
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	□'	res X	No	* 3	3.	, , ,
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)		res X	No	* *	# ** ** **	,
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?		res X	No	13 1	# # 7	* * * * * * * * * * * * * * * * * * * *
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions			5 b	- N	/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here		▶ _		2	-	,
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi	sibility for the grant?	,	N/A	Yes 🗌	No			;
6a Did the foundation, during the year, receive an			•			~		,
on a personal benefit contract?	ly fullus, difectly of file	meetry, to pay premium		res X	No	,	·	ļ!
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indired	ctly, on a personal bene	fit contract?			6b		X
7a At any time during the tax year, was the found	dation a party to a prof	ubited tax shelter transa	oction?	res X	No		~	
b If yes, did the foundation receive any proceed					,	7b	N	/A
Part VIII Information About Officers, D	rectors, Trustees,	Foundation Manag	gers, Highly	Paid E	mplo	yees	5,	
and Contractors 1 List all officers, directors, trustees, foundation	n managers and their	compansation (see inst	ructions)					
List an officers, uncetors, trustees, foundation				uono to	(a) E			
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribute employee by plans and decompensations	enefit eferred		xpens ner allo		
ZIAD MEZIAB	PRESIDENT	141,000.	_	0.				0.
2204 E 4TH STREET	25.00							
TUCSON, AZ 85719	mpma grapup				<u> </u>			
	TREASURER	0.		0.				0.
TUCSON, AZ 85712	1.00							
							-	
2 Compensation of five highest-paid employee	Les (other than those inc	luded on line 1— see in	structions). If	none. e	nter 'N	ONE.	1	
(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) Contribute employee to plans and d	tions to benefit eferred	(e) E	xpens ner all	e acc	
NONE			compensa	ation				
					<u> </u>			
								-
			-					
Total number of other employees paid over \$50,000	<u></u>	1	L		 			0
BAA	TEEA0306L	07/06/09				rm 99	0-PF	(2009)

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Form 990-PF (2009)

Rart 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 J DENNIS BARTLETT, CPA, P.C. 6075 E GRANT RD TUCSON, AZ 85712 ACCOUNTING AND TAXES 4,240. Total number of others receiving over \$50,000 for professional services 0 PartilX 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 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> All other program-related investments. See instructions. Total. Add lines 1 through 3

Par	Minimum Investment Return (All domestic foundations must complete this part. f see instructions.)	Foreign for	undations,
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. Average monthly fair market value of securities.	1 a	
	Average of monthly cash balances	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	0.
е	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	
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
	Minimum investment return. Enter 5% of line 5	6	0.
Par	tiXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► X and do not complete this process.		ndations
1	Minimum investment return from Part X, line 6 . N/A	1	
2 a	Tax on investment income for 2009 from Part VI, line 5	- ^	
b	Income tax for 2009 (This does not include the tax from Part VI)		
c	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Pår	Qualifying Distributions (see Instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	167,005.
b	Program-related investments – total from Part IX-B	1Ь	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)		
þ	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	167,005.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	167,005.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	nether the for	undation
BAA			orm 990-PF (2009

Part XIII Undistributed Income (see Instr		N/A		·
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7	>			
2 Undistributed income, if any, as of the end of 2009:	***	,		4
a Enter amount for 2008 only	, , , , , , , , , , , , , , , , , , ,	, ,		
b Total for prior years. 20, 20, 20	* .			
3 Excess distributions carryover, if any, to 2009:	f / /	. ,		
a From 2004 .				
b From 2005		4 , 2 ,		,
c From 2006	, , , , ,	£ ,	,	•
d From 2007	, , <u></u>	* , / , * * *	,	
e From 2008				
f Total of lines 3a through e		~ ·		
4 Qualifying distributions for 2009 from Part	*			
XII, line 4· ► \$				
a Applied to 2008, but not more than line 2a		, ,		
b Applied to undistributed income of prior years	2 •			
(Election required – see instructions)	. 9			
c Treated as distributions out of corpus				
(Election required – see instructions)		* * * * * * * * * * * * * * * * * * * *	. , , , , ,	
d Applied to 2009 distributable amount	4 ^ / 8 Y '		. 3 3 % > 1	
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2009			J , 4 X 9	
(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			*	
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006]			
c Excess from 2007				
d Excess from 2008]			
e Excess from 2009	1			

Form 990-PF (2009) DOROTHY HARMSEN				20-2210574	Page 10
Part XIV Private Operating Foundation					
1a If the foundation has received a ruling or c is effective for 2009, enter the date of the	ruling	·			<u> </u>
b Check box to indicate whether the foundat		rating foundation de		4942(j)(3) or	X 4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(F) 2009	Prior 3 years	(4) 2006	(a) Takal
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total N/A
b 85% of line 2a	_	· · · · · · · ·		· -	N/A
c Qualifying distributions from Part XII, line 4 for each year listed	167,005.	158,353.	33,305.		358,663.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	167,005.	158,353.	33,305.		358,663 <u>.</u>
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					/-
(1) Value of all assets					N/A
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					N/A
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). 					N/A
(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					NI / 7
an exempt organization (4) Gross investment income					N/A N/A
Part XV Supplementary Information	(Complete this	nart only if the	organization ha	d \$5 000 or mor	
assets at any time during th			organization na	u 45,000 or mor	·
Information Regarding Foundation Manage List any managers of the foundation who leads of any tax year (but only if they have NONE	nave contributed mo e contributed more t	han \$5,000) (See	section 507(d)(2).)	·	
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	f the stock of a corp)% or greater intere	poration (or an equa est	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions is gifts, grants, etc,	to preselected cha (see instructions) to	ritable organizations o individuals or orga	anızatıons under oth	pt unsolicited er conditions,
a The name, address, and telephone number	er of the person to w	vhom applications s	should be addressed	i	
b The form in which applications should be	submitted and inform	mation and materia	ils they should inclu	de·	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograpl	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors
BAA	TEE	EA0310L 07/06/09		 F	orm 990-PF (2009)

	Carperonic Lary Michigan				
3.	Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	t	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	substantial contributor	recipient		
	Paid during the year				
SEE	STATEMENT 10				
		1			
	Total	<u> </u>		► 3a	23,000.
	Approved for future payment				
	, •				1
				ļ	
					1
	·				
	Total			► 3b	

Form **990-PF** (2009)

P

BAA

r gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions
b	+				
1					
2					
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			400 000		32,62
Net rental income or (loss) from real estate	7 7779 157799t	ing grant of the transfer of the second	· %. 39.		
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property	<u> </u>				
Other investment income			<u> </u>		3,67
Gain or (loss) from sales of assets other than inventory			<u> </u>		81,810
Net income or (loss) from special events.	ļ				
Gross profit or (loss) from sales of inventory	manna.c	.20 mm2 2	13 11873	C	
Other revenue	^#\$ \$2776869	Přasy Yorko 182	100	(1 1 mg 1 1 mg 1 1 mg 1 mg 1 mg 1 mg 1	
1	1				
9			 		
			-		
<u></u>	_			 	
	1.1 1/4 1/2		-		110 11
Subtotal Add columns (b), (d), and (e)	11 10 14		l	12	118,112
Total. Add line 12, columns (b), (d), and (e)				13 .	118,112
worksheet in the instructions for line 13 to verify	calculations)				
t XVI-B Relationship of Activities to th	e Accompl	ishment of Exemp	t Purp	oses	
ne No. Explain below how each activity for which	income is ren	orted in column (e) of P	Part XVI	A contributed important	ly to the
e No. Explain below how each activity for which accomplishment of the foundation's exempt	ot purposes (o	ther than by providing fi	unds for	such purposes) (See the	he instructions)
I/A					
		····		· -	
					
					<u> </u>

TEEA0502L 07/06/09

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	descrive relation relation relation relation (1) C. (2) O. (2) b Other (1) S. (2) P.	ther assets transactions ales of assets to a nor urchases of assets fro	of the Code (o tions? g foundation to ncharitable exe m a noncharita	ther than section ! a noncharitable e empt organization able exempt organ	501(c)(3) organ	izations) or in sec	zation tion 527,	1a (1) 1a (2) 1b (1) 1b (2)	Yes No X X X X
	(4) R (5) Lo (6) P c Sharii d If the	ental of facilities, equi eimbursement arrange pans or loan guarantee erformance of services ing of facilities, equipm answer to any of the a bods, other assets, or	ements es s or membersh ent, mailing lis above is 'Yes,'	nip or fundraising s sts, other assets, o complete the folic by the reporting f	or paid employed	ees Column (b) shoul	ved less than fair ma	arket value in	X X X X X X X X
(a) N/	Line no	ansaction or sharing a	1	how in column (d) of noncharitable exemp			sets, or services rece of transfers, transactions, a		gements
	descr	foundation directly or ibed in section 501(c) s,' complete the follow	of the Code (o	ated with, or relati ther than section !	ed to, one or m 501(c)(3)) or in	ore tax-exempt or section 527?	ganizations	Yes	XNo
N/	A	(a) Name of organizat	ion	(b) Type	of organization		(c) Description of	relationship	
S I G	omplete t	alties of perjury, I declare that Declaration of preparer (other	I have examined the than taxpayer or fice	las return, including accoductary) is based on all in	ompanying schedules information of which	and statements, and to preparer has any knowle	edge 🖍	and belief, it is true	
HERE	Paid Pre- parer's Use Only	Preparer's signature Firm's name (or yours if self employed), address, and		T SERVICES,	LLC	Date IIIZ/10	Check if self- employed I	Preparer's Identifyi See Signature in N/A	the instrs)
BA	<u> </u>	ZIP code TUCS	, on, na oc				Phone no P	520) 326 Form 99	-8200 0-PF (2009)

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 DOROTHY HARMSEN AND BILL HARMSEN SR. Employer identification number CHARITABLE FOUNDATION 20-2210574 Organization type (check one): Filers of: Section: Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 -X 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, 990EZ, or 990-PF. Schedule 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
Name of org	anization	Employe	r identification number
	Y HARMSEN AND BILL HARMSEN SR.	[20-2]	210574
	Contributors (see instructions)		1
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	ESTATE_OF_DOROTHY_HARMSEN	-	Person X Payroll
	2204 E 4TH STREET	\$5,730,524.	Noncash X
	TUCSON, AZ 85719	-	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ESTATE OF DOROTHY HARMSEN	_	Person
	2204 E 4TH STREET	\$41,740.	Payroll X
	TUCSON, AZ 85719	_	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	ESTATE OF DOROTHY HARMSEN	_	Person
	2204 E 4TH STREET	\$ <u>_170,849.</u>	Payroll Noncash X
	TUCSON, AZ 85719	_	(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 Payroll Noncash

(Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page :	1 of 1	<u>l</u> o	of Part II
lame of organization		Employer identi	fication num	ber
DOROTHY HARMSEN AND BILL HARMSEN SR.		20-22105	<u> </u>	

DONOTH	HARMSEN AND BILL HARMSEN SK.	20 2210	7 7 4
Part II 滚	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	MARKETABLE SECURITIES;		
1]	
		\$ 2,746,693.	12/31/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	ARTWORK;		
2			
		\$ 41,740.	VARIOUS
	45	(-)	4.5
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	MASTER LIMITED PARTNERSHIPS;		
3			
		\$ 170,849.	VARIOUS
	42	4-3	4.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1	
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
·			
		1	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1.	
		\$	
			<u> </u>

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

Name of organization

DOROTHY HARMSEN AND BILL HARMSEN SR.

Employer identification number

20-2210574

Partill Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry)

	For organizations completing Part III, enter to contributions of \$1,000 or less for the year	otal of <i>exclusively</i> religious, cha Enter this information once – s	aritable, etc, see instructions) ►\$ N	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	N/A			
	Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address	Relationship of transferor to transferee		
(0)	(b)	(c)	(d)	
(a) No. from Part I	Purpose of gift	Use of gift	Description of how gift is held	
	Transferee's name, addres	t Relationship of transferor to transferee		

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FEDERAL STATEMENTS

DOROTHY HARMSEN AND BILL HARMSEN SR. CHARITABLE FOUNDATION

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STATEMENT 1 FORM 990-PF, PART I, LINE 6A NET GAIN (LOSS) FROM NONINVENTORY SALES PER BOOKS ASSETS NOT INCLUDED IN PART IV

DESCRIPTION:

ARTWORK

DATE ACQUIRED:

VARIOUS

HOW ACQUIRED:

PURCHASE

DATE SOLD:

VARIOUS

TO WHOM SOLD: GROSS SALES PRICE:

41,740.

COST OR OTHER BASIS:

41,740.

BASIS METHOD:

COST

GAIN (LOSS)

0.

0.

TOTAL \$

STATEMENT 2 FORM 990-PF, PART I, LINE 11 OTHER INCOME

> (A) REVENUE

(B) NET INVESTMENT

(C) ADJUSTED

PER BOOKS

INCOME

NET INCOME

OTHER INVESTMENT INCOME

3,679 3,679.\$

0.

STATEMENT 3 FORM 990-PF, PART I, LINE 16B **ACCOUNTING FEES**

> (A) **EXPENSES** PER BOOKS

(B) NET INVESTMENT

(C) ADJUSTED

(D) CHARITABLE

INCOME

NET INCOME

PURPOSES <u>3,18</u>0.

3,180.

7,485.

3,015.

10,500.

4,240. \$ 4,240. \$ 1,060. TOTAL \$ 1,060. \$

STATEMENT 4 FORM 990-PF, PART I, LINE 18 **TAXES**

PAYROLL TAXES REAL ESTATE TAXES

(A) **EXPENSES** PER BOOKS

(B) NET INVESTMENT INCOME NET INCOME

(C) ADJUSTED

(D) CHARITABLE **PURPOSES**

\$ 8,805. \$ 1,320. \$ 3,015. TOTAL \$ 11,820. \$ <u>1,320.</u> \$ 0. \$

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Z	U	u	IJ

FEDERAL STATEMENTS

DOROTHY HARMSEN AND BILL HARMSEN SR. CHARITABLE FOUNDATION

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STATEMENT 5 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES <u>PER BOOKS</u>	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEES INVESTMENT MANAGEMENT FEE	\$ 28. 29,735.	\$ 7. 29,735.		\$ 21.
OFFICE TELEPHONE	36. 594.	27. 119.		9. 4 75.
	TOTAL \$ 30,393.	\$ 29,888.	\$ 0.	\$ 505.

STATEMENT 6 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

					ВО	OK VALUE	F7	AIR MARKET VALUE
PARTNERSHIPS ROUNDING	AND	LLC'	S		\$. 1	\$	177,699.
ROOMDING				TOTAL	\$	177,700.	\$	177,699.

STATEMENT 7 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

PAYROLL TAXES PAYABLE

\$ 1,500.

TOTAL \$ 1,500.

STATEMENT 8 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		(B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION	ACQUIRED	ACQUIRED	SOLD
1	1,000 AIG	PURCHASED	9/16/2008	3/23/2009
2	500 BAXTER INT'L	PURCHASED	3/12/2007	2/06/2009
3	1,000 CHESAPEAKE ENERGY CORP	PURCHASED	10/21/2008	6/01/2009
4	5,000 POWERSHARES DB CRUDE OIL DO	PURCHASED	4/13/2009	9/14/2009
5	1,000 ENCANA CORP	PURCHASED	10/21/2008	2/06/2009
6	500 PRECISION CASTPARTS CORP	PURCHASED	3/12/2007	4/06/2009
7	1,000 SOUTHWESTERN ENERGY CO	PURCHASED	10/21/2008	3/23/2009
8	700 TESORO CORP	PURCHASED	7/03/2007	4/06/2009
9	500 ULTRA PETE CORP	PURCHASED	6/27/2007	4/09/2009
10	400 ULTRA PETE CORP	PURCHASED	10/21/2008	4/09/2009
11	600 ULTRA PETE CORP	PURCHASED	10/21/2008	4/09/2009
12	5,000 AAPL JAN 10 CALL 110.00	PURCHASED	2/24/2009	4/09/2009
13	5,000 RIMM JAN 10 CALL 50.00	PURCHASED	2/24/2009	4/06/2009
14	UNTIED STATES OIL 1256 CONTRACTS	PURCHASED	VARIOUS	VARIOUS
15	UNITED STATES NATURAL GAS 1256 CONTACTS	PURCHASED	VARIOUS	VARIOUS

2009

FEDERAL STATEMENTS

DOROTHY HARMSEN AND BILL HARMSEN SR. CHARITABLE FOUNDATION

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STATEMENT 8 (CONTINUED) FORM 990-PF, PART IV, LINE 1

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>ITEM</u>	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I)-(J)	(L) GAIN (LOSS)
1	1,430.		3,080.	-1,650.				\$ - 1,650.
2	30,085.		25,230.	4,855.				4,855.
3	24,290.		23,850.	440.				440.
4	21,826.		15,510.	6,316.				6,316.
5	46,370.		46,309.	61.				61.
6	30,710.		48,716.	-18,006.				-18,006.
7	33,141.		32,859.	282.				282.
8	10,245.		40,337.	-30,092.				-30,092.
9	20,350.		27,130.	-6,780.				-6,780.
10	16,282.		20,620.	-4,338.				-4,338.
11	24,431.		30,930.	-6,499.				-6,499.
12	125,449.		51,797.	73,652.				73,652.
13	95,452.		35,047.	60,405.				60,405.
14	873.		0.	873.				873.
15	2,291.		0.	2,291.				2,291.
	,			,			TOTAL	

STATEMENT 9 FORM 990-PF, PART VI, LINE 9 TAX DUE

TAX_DUE

STATEMENT 10 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
EARTH CARE INT'L PO BOX 885 SANTA FE, NM 87504	NONE		ASSIST THE ORGANIZATION IN IT'S CHARITABLE FUNCTION.	\$ 8,000.
HABITAT FOR HUMANITY 621 W LESTER ST TUCSON, AZ 85705	NONE		ASSIST THE ORGANIZATION IN PROVIDING AFFORDABLE HOUSING TO QUALIFYING LOW INCOME FAMILIES.	4,000.

2009

FEDERAL STATEMENTS

DOROTHY HARMSEN AND BILL HARMSEN SR. CHARITABLE FOUNDATION

PAGE 4

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STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	A	MOUNT
NOOR ASSOCIATION 3401 E LINDEN TUCSON, AZ 85716	NONE		ASSIST THE ORGANIZATION IN HELPING REFUGEE FAMILIES ADJUST TO LIFE IN THE UNITED STATES.	\$	4,000.
THE CANELO PROJECT HC1 BOX 324 ELGIN, AZ 85611	NONE		ASSIST THE ORGANIZAITON IN EXPLORING AND DEVELOPING LIVING SYSTEMS THAT CREATES FRIENDSHIP, BEAUTY AND SIMPLICITY		6,000.
TUCSON REGIONAL BALLET 2100 N WILMOT , STE 302 TUCSON, AZ 85712	NONE		ASSIST THE ORGANIZATION IN PROMOTING BALLET ACTIVITIES IN SOUTHERN ARIZONA		1,000.
			TOTAL	\$	23,000.

Form **8868**• (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

mtemai keven	de Service	The a separate approach for each retain.	
• If you a	are filing for an Automatic 3-Mon	th Extension, complete only Part I and check this box	► [X]
		utomatic) 3-Month Extension, complete only Part II (c	
-	-	eady been granted an automatic 3-month extension or	· ·
		ision of Time. Only submit original (no copie	
A corporat	ion required to file Form 990-T ar	d requesting an automatic 6-month extension — check	this box and complete Part I only
All other co		rs), partnerships, REMICS, and trusts must use Form (7004 to request an extension of time to file
the addition Form 990-	nal (not automatic) 3-month extei	electronically file Form 8868 if you want a 3-month aution required to file Form 990-T). However, you cannonsion or (2) you file Forms 990-BL, 6069, or 8870, groully completed and signed page 2 (Part II) of Form 886 or e-file for Charities & Nonprofits	up returns, or a composite or consolidated
	Name of Exempt Organization		Employer identification number
Type or print	DOROTHY HARMSEN AND CHARITABLE FOUNDATI		20-2210574
File by the due date for	Number, street, and room or suite numb		
filing your return See	3131 E ALAMEDA AVE	#2001	
instructions		code For a foreign address, see instructions	
	DENVER, CO 80209		
Check type	e of return to be filed (file a separ	rate application for each return)	
Form 9	•	Form 990-T (corporation)	Form 4720
Form 9		Form 990-T (section 401(a) or 408(a) trust)	Form 5227
Form 9		Form 990-T (trust other than above)	Form 6069
X Form 9		Form 1041-A	Form 8870
If the oIf this icheck i	s for a Group Return, enter the or	FAX No. ► 520-326-0933 ce or place of business in the United States, check thi ganization's four digit Group Exemption Number (GEN f the group, check this box ► and attach a list wi	I) If this is for the whole group,
		nths for a corporation required to file Form 990-T) exte	ension of time
until The e	8/15 , 20 10 , to fi extension is for the organization's	le the exempt organization return for the organization	
_	X calendar year 20 09 or		
• [tax year beginning	, 20, and ending, 20	
2 If this	s tax year is for less than 12 mon	ths, check reason Initial return Final re	turn Change in accounting period
	s application is for Form 990-BL, fefundable credits. See instruction	990-PF, 990-T, 4720, or 6069, enter the tentative tax, s	ess any 3a \$ 0.
	s application is for Form 990-PF of Include any prior year overpayr	or 990-T, enter any refundable credits and estimated to ment allowed as a credit	3b \$ 0.
depo	nce Due. Subtract line 3b from lin sit with FTD coupon or, if required instructions	e 3a Include your payment with this form, or, if requird, by using EFTPS (Electronic Federal Tax Payment S	ed, ystem) 3c \$ 0.
Caution. If payment in	you are going to make an electronstructions.	onic fund withdrawal with this Form 8868, see Form 84	53-EO and Form 8879-EO for
BAA For F	Privacy Act and Paperwork Redu	ction Act Notice, see instructions.	Form 8868 (Rev 4-2009)

Form 8868	(Rev 4-2009)			Page 2
• If you a	ere filing for an Additional (Not Automatic) 3-Month Extension, complete on	ly Part II and check this be	ox	► X
Note. Only	complete Part II if you have already been granted an automatic 3-month ex	tension on a previously file	ed Form 8868	
● If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no	copies needed	1).
Type or print File by the extended due date for filing the return See instructions.	Name of Exempt Organization		yer identification num	
	DOROTHY HARMSEN AND BILL HARMSEN SR.	TO ALL THE STATE OF THE STATE O		
	CHARITABLE FOUNDATION	20-	2210574	
	Number, street, and room or suite number. If a P O box, see instructions	For IR	S use only	
	CPA MANAGEMENT SERVICES, LLC			•
	6075 E. GRANT ROAD		ANGER BOOK	HERENO!
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	THE REPORT OF	的特别。	经营业的
	TUCSON, AZ 85712	Commence of the state of	"上 身心有人"	
Check type of return to be filed (File a separate application for each return):				
Form 9		Form 1041-A	Form	6069
Form 9	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	Form	8870
Form 9		Form 5227		
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.				
The books are in care of				
Telephone No. ► 520-326-8200 FAX No. ► 520-326-0933				
• If the organization does not have an office or place of business in the United States, check this box				
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the				
whole group, check this box . If it is for part of the group, check this box . If it is for part of the group, check this box .				
members the extension is for.				
4 request an additional 3-month extension of time until 11/15 , 20 10.				
5 For calendar year 2009, or other tax year beginning, 20, and ending, 20				
6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period				
7 State in detail why you need the extensionADDITIONAL TIME IS NEEDED TO ACCUMULATE THE NECESSARY				
INFORMATION TO FILE AN ACCURATE AND TIMELY RETURN.				
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the ten	tative tax less any		,
nonrefundable credits. See instructions			8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax				
paym	ents made. Include any prior year overpayment allowed as a credit and any form 8868.	amount paid previously	8b \$	0.
			3D 7	
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs 8c \$				0.
Signature and Verification				
Under penalty's of penalty's of penalty's declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form				
correct, and complete and matter am authorized to prepare this form				
Signature C	Title Title		Date -	<u> </u>
	· · ·			•