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## Form **990-PF**

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

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

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

2009

OMB No 1545-0052

For c	alendar	year 2009, or tax yea	r beginning				, and e	nding			
G CI	neck all	that apply	Initial return			Initial return of a f	•	charity	Final return	n	
		Name of foundation	Amenueu It	AUIII		Audiess ciidli	ğ <sub>e</sub>	<u> </u>	A Employer identification	n numbi	 Br
	the IRS ibel.	Name of foundation							La comproyer recommendation		
	rwise,	WALKER FAM	ILY F	radnu <u>o</u>	ION,	INC.			20-2999046	5	
p	rint	Number and street (or P	O box number	if mail is not d	elivered to s	treet address)		Room/suite	B Telephone number		
		2150 LOGAN		. NORT	'H				239-591-38	353	
	Specific uctions.	City of town, State, at							C If exemption application is		
		NAPLES, FI				_			D 1. Foreign organization	s, check	there
H C						rate foundation			Foreign organizations m check here and attach co	omputation	on Date less,
<u> </u>		n 4947(a)(1) nonexem				able private found	X Accr		E If private foundation sta	tus was	terminated
		t value of all assets at e t II, col. (c), line 16)	end of year	J Account	ing metno ther (spec		ACCI	uai	under section 507(b)(1		
( <i>ii</i> 0			3.907.			nust be on cash	basis )		F If the foundation is in a under section 507(b)(1		
· · · · · · ·	rt I A	nalysis of Revenue an he total of amounts in colu- ecessarily equal the amoun	nd Expenses	d (d) may not	(a)	Revenue and nses per books	(b) Net in	vestment	(c) Adjusted net	(I	Disbursements chantable purposes
		ntributions, gifts, grant		<del></del>	<u> </u>	200,000.			N/A	<del> </del>	(cash basis only)
			n is not required to					••••••	477 #4	1	······································
-	- Inte	erest on savings and tempo				• • • • • • • • • • • • • • • • • • • •			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·····	,
	- 003	ridends and interest fro	m securities								
	<b>5a</b> Gro	oss rents									
-	D Net	t rental income or (loss)			<u> </u>		H	·			
⊈W W	⊾ Gro	t gain or (loss) from sale of a oss sales price for all sets on line 6a	assets not on li	ne 10							
% €	_	pital gain net income (from	Part IV, line 2)					0.			
	8 Net	t short-term capital gai	n			<del>'</del>	, .,			<u> </u>	···
AUG	Gro	come modifications ess sales less returns									,,,,,
		d allowances s Cost of goods sold				***************************************				+-	· · · · · · · · · · · · · · · · · · ·
		oss profit or (loss)			<u> </u>			·····		<b>†</b>	
奚		ner income					1			<u> </u>	
<b>3</b>	12 To	tal Add lines 1 throug	h 11			200,000.		0.			
SCANNED	<b>13</b> Cor	mpensation of officers, dire	ectors, trustees	, etc	<u> </u>	0.		0.		ļ <u>.</u>	0.
		ner employee salaries a	•				-				
		nsion plans, employee	benefits								
Sus	16a Leg	~	ST	Morr 1	<b>—</b>	800.		0 -			0.
Operating and Administrative Expenses		counting fees ner professional fees	31			000.		٦.	DECE		
ē.		erest			-			-	RECEIVED	+-}	
aţi.	18 Tax				_					181	
nist		preciation and depletio	n					99	AUG 1 6 2010		
<u> </u>	<b>20</b> Occ	сирапсу								S	
¥	<b>21</b> Tra	ivel, conferences, and i	meetings						OCDEN LIT	E.	
and		nting and publications	a			1 070	-		OGDEN, UT	┷	
ing		ner expenses		MT 2		1,970.		0.		ļ	0.
era		t <mark>al operating and adm</mark> penses. Add lines 13 tl				2 770		0.			0.
하		ntributions, gifts, grant	_			2,770. 101,013.		· · ·		-	101,013.
1		ial expenses and disb	=			101/0101					10170101
		d lines 24 and 25				103,783.		0.			101,013.
<u></u>		btract line 26 from line	12		1	. ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· ·		1	<del> </del>
	8 Exc	ess of revenue over expens	ses and disbur	sements	,	96,217.		<del></del>			······································
		t Investment Income (						· 0 <b>.</b>			
92350		justed net income (if ne							N/A	<u> </u>	000 57
92350 02-02-	10 LI	HA For Privacy Act a	nd Paperwo	rk Heduction	Act Notic	e, see the instruc	tions.		-	Fori	m <b>990-PF</b> (2009)
										22	-

	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Pai	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	1 Cash - non-interest-bearing	582,690.	678,907.	678,907
	2 Savings and temporary cash investments			
	3 Accounts receivable ►_			
	Less allowance for doubtful accounts		Ì	
١,	Pledges receivable ►			
1	Less allowance for doubtful accounts ▶		ĺ	
1	5 Grants receivable			<del></del>
	6 Receivables due from officers, directors, trustees, and other		İ	
	disqualified persons			
.	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts		1	
, ,	Inventories for sale or use			
5	Prepaid expenses and deferred charges			
2 1	Da Investments - U S and state government obligations		·· · · · · · · · · · · · · · · · · · ·	
["	b Investments - corporate stock			
	c Investments - corporate bonds			
<sub>4</sub> ,	Investments - land, buildings, and equipment basis			······································
ľ	Less: accumulated depreciation		1	
1:				
1:				
1	`			
'	Less: accumulated deprecation		ì	
1	5 Other assets (describe ►			
''	Other 833013 (describe >			
1	5 Total assets (to be completed by all filers)	582,690.	678,907.	678,907
	7 Accounts payable and accrued expenses	332,0301	0,0,00,0	0.0750.
11	i i			
٠. ا	• •			
S 2				
ے ا اور	2 Other liabilities (describe  )			
-	Other habilities (describe			
2	3 Total liabilities (add lines 17 through 22)	0.	0.	
<del>-   - '</del>	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
ဂ္ဂ 2	· · · · · · · · · · · · · · · · · · ·	582,690.	678,907.	
2		302,030.	070,307.	
5 2	5 Temporarily restricted 6 Permanently restricted		<del>·  </del>	
2 2				
5	Foundations that do not follow SFAS 117, check here			
5   3.	and complete lines 27 through 31.			
2	, , , , ,			
21	· · · · · · · · · · · · · · · · · · ·	-		
2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	- · · · · · · · · · · · · · · · · · · ·	582,690.	678,907.	
31	Total net assets or fund balances	302,090.	070,307.	
9.	Total liabilities and set appets found beloness	582,690.	678,907.	
3.	·············		010,301.	
Par	Analysis of Changes in Net Assets or Fund B	alances		
To	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)	<del></del>	1	582,690
	ter amount from Part I, line 27a		2	96,217
	ner increases not included in line 2 (itemize)		3	0
	d lines 1, 2, and 3		4	678,907
	creases not included in line 2 (itemize)		5	0,0,307
	tal net assets or fund halances at end of year (line 4 minus line 5) - Part II. or	olumo /b\ line 30		678.907

Page 2

	KER FAMILY FOUND						20-299	9046	Page 3
<u> </u>	and Losses for Tax on I		income	(b) H	ow acquired	(c) Date	a acquired	(d) Dat	n cold
2-story brick warehouse, or common stock, 200 shs MLC Co )					Purchase Donation		e acquired day, yr )	( <b>d</b> ) Dat (mo , da	
1a NO	NTC	<del> </del>		-		-		ļ	
b NO	N.C.			+				1	
d d						<del> </del>		-	<del></del>
6				1				1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss us (f) minus		
a	· · · · · · · · · · · · · · · · · · ·								
b									
			· · ·				· <u>-</u> - · ·-	_	
<u>d</u>									
θ		<u> </u>							
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69				Col (h) gain		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (I), If any				t not less that s (from col		
а									
b									
С		<u> </u>					<u> </u>		
<u> </u>		<u> </u>							
0		<u> </u>		<del>-</del>					
2 Capital gain net income or (net ca	pital loss) { If gain, also enter-l			}	2				
Net short-term capital gain or (los if gain, also enter in Part I, line 8,		ınd (6)		}					
If (loss), enter -0- in Part I, line 8		. Dl	· · · · · · · · · · · · · · · · · · ·		3				
	nder Section 4940(e) fo					come		<del> </del>	
(For optional use by domestic private	toundations subject to the section	4940(a) tax on	net investment in	icome	)				
f section 4940(d)(2) applies, leave th	nis part blank								
Afan the foundation liable for the cont	tran 4040 tax on the distmbutches as								X No
Was the foundation liable for the sect for the section of the foundation does not qual			•	riou /				L Yes	
	each column for each year, see inst			es					
(a)	(b)		ag ay a	(c)	<del></del>	T		(d)	
Base periód years Calendar year (or tax year beginnii	. Adjusted qualifying du	stributions	Net value of no		table-use asse	ts		bution ratio vided by col	(c))
2008		94,778.			477,19	7.	(44)		98614
2007		93,976.				0.			00000
2006		8,510.			55,92	9.	_		61340
2005		76,178.			4,92				67614
2004			· <b>-</b>						
		•	_						
2 Total of line 1, column (d)						2		17.4	27568
Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	of yea	irs				
the foundation has been in exister	nce if less than 5 years					3	-	4.3	56892
Enter the net value of noncharitab	ele-use assets for 2009 from Part X	, line 5				4		634	,754.
Multiply line 4 by line 3						5		2,765	<u>,555.</u>
3 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6	ļ		0.
7 Add lines 5 and 6						7		2,765	,555.
B Enter qualifying distributions from	n Part XII, line 4					8		101	,013.
If line 8 is equal to or greater than See the Part VI instructions	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	g a 1%	6 tax rate				

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see	instru	ctior	ns)
Į1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%	1				0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<b>↓</b>			0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0.
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7	1			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶	11	<u>, l</u>			
Pε	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	ın e			Yes	No
	any political campaign?			1a	_	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			ŀ		
	(1) On the foundation $\blacktriangleright$ \$ 0 . (2) On foundation managers $\blacktriangleright$ \$ 0	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶ \$0.			Ì		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  SEE STATES	IEN'	г 3	2	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 of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\N	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			-		
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of	e law				
	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			.		
	<u>FL</u>			.		
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	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	<u> </u>	X
10	Did any nersons become substantial contributors during the tax year? If "yes" ettech a schedule listing their names and addresses			10	ΙX	1

of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

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

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

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

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X

3ь

4a

N/A

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Part VII-B Statements Regarding Activities for Which	h Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	tion 4945(e))?	Ys	s X No		
(2) Influence the outcome of any specific public election (see section 4955	), or to carry on, directly or indire				
any voter registration drive?		Ye	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpos	ses?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	ition described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or f	for			
the prevention of cruelty to children or animals?	• • • • • • • • • • • • • • • • • • • •		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described i	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see ins		· ·	N/A	5b	
Organizations relying on a current notice regarding disaster assistance chec					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemptio		ined			
expenditure responsibility for the grant?		_ /	as 🔲 No		
If "Yes." attach the statement required by Regulations section 53.4		,			
6a Did the foundation, during the year, receive any funds, directly or indirectly,	, ,				
a personal benefit contract?	to pay promising on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a narennal hanafit contract?	···		6b	x
If "Yes" to 6b, file Form 8870.	a personal benefit contract.			-	+
7a At any time during the tax year, was the foundation a party to a prohibited ta	av chaltar transaction?		es X No		
• • • • • • • • • • • • • • • • • • • •			/_ <del> </del>	7b	
b If yes, did the foundation receive any proceeds or have any net income attrib		nogoro Highly	•	70	
Part VIII Information About Officers, Directors, Tru Paid Employees, and Contractors	stees, roundation wa	inagers, nigni	y		
1 List all officers, directors, trustees, foundation managers and the	eir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	accou	Expense unt, other wances
CULLEN WALKER	PRESIDENT	enter-0-)	compensation	allo	WallCos
2150 LOGAN BLVD. NORTH					
NAPLES, FL 34119	8.00	0.	0.		0.
CONSTANCE WALKER	TREASURER	· ·	· ·	-	
2150 LOGAN BLVD. NORTH	-IKEASUKEK				
	8.00	0.	0.		٥
NAPLES, FL 34119	SECRETARY	0.	0.	1	0.
DOUGLAS WIEBEL	SECRETARI		ļ		
9420 BONITA BEACH RD, STE 200					0
BONITA SPRINGS, FL 34135	0.00	0.	0.		0.
	_				
	_				
O Commence of the bighest soid and because (ather these those		and an IINONE II		<u> </u>	
2 Compensation of five highest-paid employees (other than those	(b) Title, and average	enter NONE."	(d) Contributions to	(0)	Evnence
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acco	Expense unt, other
MOND	devoted to position	_	compensation	allo	wances
NONE					
			1		
	_				
	_				
		-			
			<u> </u>		
Total number of other employees paid over \$50,000			<b></b>		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics number of organizations and other beneficiaries served, conferences convened, research papers produc	al information such as the sed, etc	Expenses
1 N/A		
2		<del></del>
	<u>.</u>	
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin  1 N/A	es 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<u></u>	0.

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Ρź	rt X Minimum Investment Return (All domestic foundations m	nust complete this part	. Foreign four	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes			
а	Average monthly fair market value of securities			1a	0.
	Average of monthly cash balances			1b	0. 644,420.
C	Fair market value of all other assets			10	
d	Total (add lines 1a, b, and c)			1d	644,420.
8	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	18	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	644,420.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,	see instructions)		4	9,666.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.				634,754.
6	Minimum Investment return. Enter 5% of line 5				31,738.
Pε	Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here		foundations ar	id certain	
1	Minimum investment return from Part X, line 6			1	31,738.
2a	Tax on investment income for 2009 from Part VI, line 5	2a			· -
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
	Add lines 2a and 2b			20	0.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	31,738.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	31,738.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	XIII, line 1		7	31,738.
Pá	rt XII Qualifying Distributions (see instructions)				
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	ooses			101 010
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	101,013.
	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitab	ile, etc., purposes		2	<u> </u>
3	Amounts set aside for specific charitable projects that satisfy the				
а	Suitability test (prior IRS approval required)			3a	
	Cash distribution test (attach the required schedule)			3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, ar			4	101,013.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	stment			_
	income Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	101,013.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years w	hen calculating whether t	he foundation i	qualifies for th	e section

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4940(e) reduction of tax in those years

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		······	· · · · · · · · · · · · · · · · · · ·	
line 7				31,738.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		<b>****</b>	0.	
b Total for prior years		_		
	***************************************	0.	······································	
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005 75,987.				
c From 2006 95, 714.				
d From 2007 193,976.				
e From 2008 70,918.	426 505	•		
f Total of lines 3a through e	436,595.	······································		······
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 101,013.			,	
a Applied to 2008, but not more than line 2a			0.	·····
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	^			
(Election required - see instructions)	0.		The state of the s	21 720
d Applied to 2009 distributable amount	60 275			31,738.
e Remaining amount distributed out of corpus	69,275. 0.		<del>'</del>	0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as Indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	505,870.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1 This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	505,870.	***************************************		
O Analysis of line 9				
a Excess from 2005 75,987.				
b Excess from 2006 95,714.				
c Excess from 2007 193, 976.				
d Excess from 2008 70,918.				
e Excess from 2009 69, 275.		<u></u>		

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section  2 a Enter the lesser of the adjusted net income from Part I or the minimum  (a) 2009  (b) 2008  (c) 2007  (d) 2006  (e) To	lal
foundation, and the ruling is effective for 2009, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section  2 a Enter the lesser of the adjusted net income from Part I or the minimum  (a) 2009  (b) 2008  (c) 2007  (d) 2006  (e) To	tal
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)  2 a Enter the lesser of the adjusted net income from Part I or the minimum (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) To	lal
2 a Enter the lesser of the adjusted net income from Part I or the minimum (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) To	tal
Income from Part I or the minimum (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) To	tal
	tal
investment return from Part X for	
each year listed	
b 85% of line 2a	
c Qualifying distributions from Part XII,	
line 4 for each year listed	
d Amounts included in line 2c not	
used directly for active conduct of	
exempt activities	
e Qualifying distributions made directly	
for active conduct of exempt activities	
Subtract line 2d from line 2c	
3 Complete 3a, b, or c for the	
alternative test relied upon	
a "Assets" alternative test - enter	
(1) Value of all assets	<del>.</del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	
b "Endowment" alternative test - enter	
2/3 of minimum investment return shown in Part X, line 6 for each year	
listed	
c "Support" alternative test - enter	
(1) Total support other than gross	
investment income (interest,	
dividends, rents, payments on securities loans (section	
512(a)(5)), or royalties)	
(2) Support from general public	
and 5 or more exempt	
organizations as provided in section 4942(j)(3)(B)(iii)	
(3) Largest amount of support from	
an exempt organization	
(4) Gross investment income	
Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in ass	ets
at any time during the year-see the instructions.)	
1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax	
year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
SEE STATEMENT 4	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or	
other entity) of which the foundation has a 10% or greater interest	
NONE	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here 🕨 🔀 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds	If
the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
a The name, address, and telephone number of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	
c Any submission deadlines	<u> </u>
e ring datamotion detailined	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	

	ear or Approved for Future	Payment		
	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Grants and Contributions Paid During the Year or Approved for Future Payment	101,013.			
· · · · · · · · · · · · · · · · · · ·	7		<b>▶</b> 3a	101,013.
b Approved for future payment				
NONE				
NONE				
,				
				:
Total		I — — . — . —	<b>▶</b> 3h	0.

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated business income			ded by section 512, 513, or 514	(8)		
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income		
1 Program service revenue	COUP		-				
ā			-		<u> </u>		
b		<del></del>	-				
<u> </u>							
d			<u> </u>				
8	-						
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments 4 Dividends and interest from securities							
		Vaccination of the second of t			***************************************		
5 Net rental income or (loss) from real estate							
a Debt-financed property							
b Not debt-financed property			-		·		
6 Net rental income or (loss) from personal			1				
property			├				
7 Other investment income							
8 Gain or (loss) from sales of assets other		:					
than inventory							
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory	<u> </u>	<u> </u>	ļ				
11 Other revenue	ŀ						
a							
b			ļ				
C							
d							
e							
12 Subtotal Add columns (b), (d), and (e)		0.	L	0.	0.		
13 Total Add line 12, columns (b), (d), and (e)				13 _	0.		
(See worksheet in line 13 instructions to verify calculations )							
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which incor	me is renorted	in column (a) of Part YVI-A	contri	huted importantly to the accor	molishment of		
the foundation's exempt purposes (other than t			Contin	outed importantly to the accor	nphonnon of		
					<del>- · · · · · · · · · · · · · · · · · · ·</del>		
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923621 02-02-10					Form <b>990-PF</b> (2009)		

_	m 990- art X		ER FAMILY FOR legarding Transfer			nd Relations		2999046 ncharitable		ge 13
1	Did th	ne organization directly or ind		following with any	other organizatio	n decombed in secti	on 501(a) of		Yes	No
'		ode (other than section 501(			=		011 50 1(0) 01	<b></b>	163	140
		ifers from the reporting found				izations				
•		. •	vation to a nonchantable ex	tempt organization t	,			1a(1)		Х
	(1) (	Other assets						1a(2)	-	X
	• •	transactions						10(2)		
١		Gales of assets to a noncharit	ahle exempt organization					16(1)	•	Х
		Purchases of assets from a n		ration				1b(2)		X
		Rental of facilities, equipment	· -	220011				1b(3)	-	X
	٠,	Reimbursement arrangement	•					1b(4)		X
	٠,	oans or loan guarantees						1b(5)	t	Х
		Performance of services or m	embership or fundraising s	solicitations				1b(6)	<b></b>	Х
C	٠.	ng of facilities, equipment, m	•					10		Х
		answer to any of the above i	•		nn (b) should alw	vavs show the fair m	narket value of the o		sets.	
	or se	rvices given by the reporting nn (d) the value of the goods	foundation. If the foundation	on received less that					,	
a)	Line no	(b) Amount involved		charitable exempt or	ganization	(d) Description	of transfers, transaction	ons, and shanng a	rangeme	ents
	-			N/A				_		
					•					
								-		
	ın sec	foundation directly or indirection 501(c) of the Code (others, complete the following sci	er than section 501(c)(3)) ( hedule		x-exempt organiz	zations described		Yes	X	] No
		(a) Name of or	rganization	(b) Type	of organization	(	(c) Description of re	elationship		
		N/A								
		<u> </u>								
_										
_										
		renalties of penjury. I declare that I				has any knowledge		elief, it is true, com	ect,	
ا و	<u> </u>	gnature of officer of trustee			até	OFFICE Title	· IV			
ב ב		Branararia K	0	U		ate -   Ch	ęck if	Preparer's identi	ving nun	nber
5	ح ہے	Preparer's signature	Alieber .	PA-		7 / 🔾     Sel	f-	1 / )	730	
ף	Paid Preparer's Use Only	Firm's name (or yours WIEI			P.A.	C VICO Tell	EIN -	14018	. ~	
	rep Jse	if self-employed), 942(	BONITA BEA			0.0	LIIV			
	ر ہے	address, and ZIP code BON	ITA SPRINGS,				Phone no 2	39-992-	621	1
	<b></b>									_

Form **990-PF** (2009)

#### Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No 1545-0047

Employer identification number

2009

20-2999046 WALKER FAMILY FOUNDATION, INC. Organization type (check one): Section: Filers of: 501(c)( 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) and 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 its 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

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

### WALKER FAMILY FOUNDATION, INC.

20-2999046

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CULLEN & CONSTANCE WALKER  2150 LOGAN BLVD. NORTH  NAPLES, FL 34119	\$\$	Person X Payroll
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(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.)

ACCOUNTI	NG FEES	S'.	PATEMENT 1
(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
800.	0.		0.
800.	0.		0.
OTHER E	KPENSES	S	TATEMENT 2
354. 27. 1,589.	0. 0. 0.		0.0
1,970.	0.		0.
I -	OTHER EXPENSES PER BOOKS  800.  OTHER EXPENSES PER BOOKS  354. 27. 1,589.	OTHER EXPENSES  (A) EXPENSES PER BOOKS  (B) EXPENSES PER BOOKS  MENT INVEST- MENT INCOME  354. 27. 1,589. 0.	EXPENSES NET INVEST- PER BOOKS MENT INCOME  800.  0.  OTHER EXPENSES  (A) EXPENSES NET INVEST- PER BOOKS MENT INCOME  354. 27. 1,589.  0.

#### EXPLANATION

NO CHANGES WERE REQUIRED IN THE GOVERNING INSTRUMENTS OF THE FOUNDATION HOWEVER THE FOCUS OF FUTURE CONTRIBUTIONS WILL INCLUDE 501(C)(3) CHARITABLE ORGANIZATIONS THAT SHARE THE FOUNDATION'S RELIGIOUS ENDEAVORS.

FORM 990-PF PART XV - LINE 1A STATEMENT 4
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

CULLEN WALKER CONSTANCE WALKER

WALKER FAMILY FOUNDATION, INC. 20-2999046 ATTACHMENT TO 2009 990-PF PART XV SUPPLEMENTARY INFORMATION

Company	Address	Purpose of Contribution	Recipient's Relationship	Status	Amount
Chaplain Fellowship Ministries	1116 North 15th Street, Temple, Texas 76501-1953	To further Christian outreach programs	N/A	Public	2,200 00
Christian Financial Counseling	2267 First Street #15, Ft Myes, FL 33901	To further Christian outreach programs	N/A	Public	2,500 00
EMI	5124 East Hyde Ct , Columbus, IN 47203-4597	To further Christian outreach programs	ΑΝ	Public	1,000 00
Faith Bible Church	6464 Immokalee Road, Naples, FL 34119	To further Christian outreach programs	ΑX	Public	52,290 00
First Baptist Academy	3000 Orange Blossom Drive, Naples, FL 34109	To further Christian outreach programs	N/A	Public	100 00
Gideons Danville Camp	PO Box 92, Danville, IL 61834	To further Christian outreach programs	Α'N	Public	1,000 00
Grace Community Church	13248 Roscoe Blvd, Sun Valley, CA 91352	To further Christian outreach programs	N/A	Public	1,000 00
Kevin Cozadd Ministries					
(Mixers For Jesus)	603 Brown Avenue, Attalla, AL 35954	To further Christian outreach programs	A/N	Public	2,500 00
Living Hope Missions	PO BOX 8696 Naples, FL 34101-8696	To further Christian outreach programs	N/A	Public	7,852 00
Motor Racing Outreach	5555 Concord Parkway, South Concord, NC 28027	To further Christian outreach programs	N/A	Public	1,000 00
MROA-Bob Elmore	5555 Concord Parkway, South Concord, NC 28027	To further Christian outreach programs	N/A	Public	12,000 00
New Hope Ministries	7675 Davis Blvd, Naples, FL 34104	To further Christian outreach programs	N/A	Public	00 09
Off Road Racing	78 Dolphin Blvd, Ponte Vedra Beach, FL 32082	To further Christian outreach programs	N/A	Public	12,250 00
Salvation Army	3180 Estey Avenue, Naples, FL 34104-4310	To further Christian outreach programs	N/A	Public	1,000 00
St Matthews House The Wilds Christian	2001 Airport Road South, Napies, Florida 34112-4814	To further Christian outreach programs	N/A	Public	3,000 00
Association, Inc	3201 Rutherford Road P O Box 509, Taylors, SC 29687-0009	To further Christian outreach programs	A/N	Public	61 00
Young Life Ministries	P O Box 520, Colorado Springs, CO 80901	To further Christian outreach programs	A/N	Public	1,200 00

101,013 00

Form **8868** (Rev. Aþril 2009) Department of the Treasury

Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box					
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).					
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.					
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		<del></del>		
A corporation required to file Form 990·T and requesting an automatic 6·month extension - check this box and complete					
Part I only					
•	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	evten	sion of time		
to file ınco	me tax returns.				
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Chanties & Nonprofits					
Type or	Name of Exempt Organization	Empl	loyer identification number		
print			•		
	WALKER FAMILY FOUNDATION, INC.	2	0-2999046		
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 2150 LOGAN BLVD NORTH				
return See Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NAPLES, FL 34119				
Check typ	pe of return to be filed (file a separate application for each return):				
Form	n 990 Form 990-T (corporation) Form 47	20			
	n 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52				
	n 990-EZ Form 990-T (trust other than above) Form 60				
X Forr					
	CONSTANCE WALKER				
• The bo	oks are in the care of > 2150 LOGAN BLVD. NORTH - NAPLES, FL 341	19			
	one No. ► 239-591-3853 FAX No. ►				
	rganization 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					
	. If it is for part of the group, check this box  and attach a list with the names and EINs of all i				
	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time untinated $\overline{AUGUST}$ $\overline{15}$ , $\overline{2010}$ , to file the exempt organization return for the organization named a		The extension		
	r the organization's return for:				
▶[	X calendar year 2009 or				
▶[	tax year beginning, and ending				
2 If thi	is tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period		
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	refundable credits. See instructions.	3a	\$ 0.		
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated				
	payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 0.		
	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,				
	osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	<u> </u>			
See	instructions.	3c	\$ 0.		

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)