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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

6 Check all that apply:	FOI	çaien	dar year 2009, or tax year beginning		, and ending		
Use the IRS Name of foundation A Employer identification number 20 - 3795088	G (Check			· · · · · · · · · · · · · · · · · · ·		ı
Ball			——————————————————————————————————————	Address chan	ge		
Otherwise, HAVENS FOUNDATION INC 10401 BLAKE ROAD **RESPECTIVE CONTROLLING TO THE PROPERTY OF THE PROPERTY O	Use	the	IRS Name of foundation			A Employer identification	number
point in the control of the control				•		20, 270,000	
Of 10 Set Section Set Section Set Section	Otl		· 				·
See Specific Clay of Town, statin, and ZIP code WADESVILLER. IN 47638 H Check type of organization: XI Section 501(c)(3) exempt private foundation Section 4947(e)(1) nonexempt charitable trust Other tisable private foundation of a material value of all sasets at end of year. J Accounting method: XI Cash Account of the foundation of a material value of all sasets at end of year. J Accounting method: XI Cash Acco	^	•	1	elivered to street address)	Room/suite	1 '	.00
Instruction Name			" TOTOL DURKE KORD				
## Check type of organization: Section 901(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Farr market value of all assets at end of year J Accounting method: Si Cash Accrual (from Part II, cot (c), ler 16) Other (spooth) Other (spooth)		-	one City of towir, State, and ZIP code	•			•
Section 4947(a)(1) nonexempt charable trust □ Other taxable private foundation Ell private foundation states was terminated inform Part II, col (e), line 16) Country of the first information Color (e), line 16)			· 			D 1 Foreign organizations	s, check here
Fair market value of all assets at end of year Fair market value of all assets at end of year Fair market value of all assets at end of year Fair market value of (o), line 16 Sair market value of (o), line 16 Sair market value of (o), line 16 Sair market value (H_(_				check here and attach co	imputation
### April (not (c), line 16) Say 2, 969 Part I, column (d) must be on cash basis) Part II Analysis of Revenue and Expenses Part II Analysis of Revenue and Expenses							
Part I Analysis of Revenue and Expenses The forte of amounts in column (a), and (a) may not necessary equal the amounts in column (b). (b) the investment (c) Adjusted net (c) A			′ I —	_	Accrual	1	• •
Part					\\		
The lotal of anounts in columns 80, it. and (of may not a expenses per books income in	_		3=13331	ımn (a) must be on casn i	oasis)		1
2	Pa	art i	☐ (The total of amounts in columns (b), (c), and (d) may not				for charitable purposes
Interest on asungs and temporary		1	Contributions, gifts, grants, etc., received	7,852.	· · · · · · · · · · · · · · · · · · ·		
Seash investments A Dividends and interest from securities Season Cross rents A Dividends and interest from securities Season Cross rents Season		2	-				
Sa Gross rents		3	Interest on savings and temporary cash investments				
Description		4	Dividends and interest from securities				
Section Company Comp		5a	Gross rents		-		
		b	Net rental income or (loss)				
8 Net short-term capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 7, 852. 0. 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Pension plans, employee benefits 16a Legal fees 16 C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 11,007. 0. 6,619. 4,388. 25 Other professional fees 26 Total expenses and disbursements Add lines 24 and 25 11,007. 0. 6,619. 4,388. 26 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, onter-0-) C Adjusted net income (if negative, onter-0-)	a	6a					
8 Net short-term capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 7, 852. 0. 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Pension plans, employee benefits 16a Legal fees 16 C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 11,007. 0. 6,619. 4,388. 25 Other professional fees 26 Total expenses and disbursements Add lines 24 and 25 11,007. 0. 6,619. 4,388. 26 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, onter-0-) C Adjusted net income (if negative, onter-0-)	Š	Ь	Gross sales price for all assets on line 6a				
8 Net short-term capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 7, 852. 0. 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Pension plans, employee benefits 16a Legal fees 16 C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 11,007. 0. 6,619. 4,388. 25 Other professional fees 26 Total expenses and disbursements Add lines 24 and 25 11,007. 0. 6,619. 4,388. 26 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, onter-0-) C Adjusted net income (if negative, onter-0-)	eve	7	Capital gain net income (from Part IV, line 2)	VED	0.		
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14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees STMT 1 875. 0. 0. 875.)	12	Total Add lines 1 through 11	7,852.		0.	
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16a Legal fees		14	Other employee salaries and wages				
C Other professional fees Interest	w	15	Pension plans, employee benefits				
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26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	tive	17					
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26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	퉏	20				<u> </u>	
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	Ψþ	21	•				
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	a	22		2 542			2.542
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	ting	23	·	3,513.	0.	<u> </u>	3,513.
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	erat	24	-	11 007	^		4 200
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.	ŏ			11,007.	0.	6,619.	4,388.
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.		26		11 007	•	C (10	4 200
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) 0.		07		11,00/.	0.	6,619.	4,388.
b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) O .				2 155			
c Adjusted net income (if negative, enter -0-)		l	•	-3,155.			
00050		l					
	9235	01		Ant Notice and the instruct	lines	<u> </u>	Form 900 DE (0000)

Beginning of year

20-3796088

End of year

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Form 990-PF (2009)

HAVENS FOUNDATION INC

8

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

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

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ir	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1.		T -			
	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		N/.	A_	
	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				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				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					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	1			
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	11				
	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 intervei	ne in			Yes	No
	any political campaign?		1	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		ļ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish					
	distributed by the foundation in connection with the activities					
c	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
-	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
•	managers. ►\$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			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	ì			
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,	ļ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
	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. 	ite law				
	remain in the governing instrument?			6	х	
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)					
•••	IN					
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)					
J	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
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	llendar				
•	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Forr	n 990	-PF	

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

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Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	Ì	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			s X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			}	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				
the prevention of cruelty to children or animals?		Ye	s X No		-
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined			-
expenditure responsibility for the grant?	N	[∕A	s No		1
If "Yes," attach the statement required by Regulations section 53.494	5-5 <i>(d).</i>				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ь	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	•	
b If yes, did the foundation receive any proceeds or have any net income attribute	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<i>(</i>		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.				
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	to position	enter -0-)	and deterred compensation		vances
JAMES H. HAVENS	PRESIDENT				
10401 BLAKE ROAD					
WADESVILLE, IN 47638	2.00	0.	0.		0.
CAROL S. HAVENS	SECRETARY				
10401 BLAKE ROAD					
WADESVILLE, IN 47638	1.00	0.	0.		0.
				ļ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
() Name and address of each ample as and make than \$50,000	(b) Title, and average	() 0	(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allov	vances
NONE	·	-			
				İ	
	1				
	1				
					
	1				
		 		 	
	1				
Total number of other employees paid over \$50,000		1	•		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	s, Highly			
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."				
	ype of service		(c) Compensa	tion
NONE				
				_
	=			
		1		
Total number of others receiving over \$50,000 for professional services		>		0
Part IX-A Summary of Direct Charitable Activities				
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the	E	xpenses	
1				
SEE STATEMENT 4	44	ļ	3,95	0.
2		1		
		4	4.5	_
SEE STATEMENT 5		 	43	8.
3		1		
		-		
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 lines 1 and 2.		4	Amount	
1 <u>N/A</u>		4		
		-		
2				
•		1		
		1		
All other program-related investments. See instructions.				
3		_		
		4		
T. I. Addit. Attack to O		+		
Total. Add lines 1 through 3	<u> </u>			0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations, see	instructions.)
1	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	1a	0.
	Average of monthly cash balances	1b	1,411.
C		1c	
d	Total (add lines 1a, b, and c)	10	1,411.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	7 2	0.
3	Subtract line 2 from line 1d	3	1,411.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,390.
6	Minimum investment return. Enter 5% of line 5	6	70.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here X and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
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	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a	4,388.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	· · · · · · · · · · · · · · · · · · ·
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,388.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,388.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	n auglifiae for tha	coction

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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				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ N/A				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	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	0.			
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	0.			
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				
			·	- 000 DE (0000)

Check here \(\sum \big| \big| \big| \big| \big| 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:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3	Grants and Contributions Paid During the Ye	ar or Approved for Future I	Pavment	· · ·	
<u> </u>	Recipient	If recipient is an individual,		5	
_	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a	Paid during the year	or substantial contributor	rooipione	<u>. </u>	
•	, ald caring the year				
	NONE				
				:	
	Total		· · · · · · · · · · · · · · · · · · ·	▶ 3a	0.
b	Approved for future payment				
	NONE				
	Total		l	▶ 3b	0.

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
	1				
9	1 1				
Fees and contracts from government agencies			<u> </u>		
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events				·	
Gross profit or (loss) from sales of inventory					
Other revenue;					
a					
b					
c					
d				_	
e		·			
Subtotal. Add columns (b), (d), and (e)		0		0.	
Total. Add line 12, columns (b), (d), and (e)					
	s.)				
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie		plishment of E	xempt l	Purposes	
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities	es to the Accom	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			plishment of
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e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			plishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of
e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	es to the Accom	olumn (e) of Part XVI-			iplishment of

Form 990-PF (2009) HAVENS FOUNDATION INC 20-3796088 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Х X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No □Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/AUnder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge

Date

HARDING SHYMANSKI & CO., PSC

IN 47735

P.O. BOX 3677

EVANSVILLE,

Form **990-PF** (2009)

Preparer's identifying number

812-464-9161

Check if selfemployed

Phone no.

EIN **▶35-1346211**

Sign Here

Preparer's Use Only

chature of officer or trustee

Preparer's

signature

Firm's name (or yours if self-employed),

address, and ZIP code

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

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

2009

Employer identification number

H2	AVENS FOUNDATION INC	20-3796088
Programization type (check one) Filers of: Section: Form 990 or 990 EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF \$\text{So1(c)(3)} exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule \$\text{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. \$\text{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)(w), 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		
Filters of: Section: Form 990 or 990 EZ		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule		
ters of: Section: Imm 990 or 990 EZ Sot(o)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 4947(a)(1) nonexempt charitable trust treated as a private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 100 private foundation 101 private foundation 102 private foundation 103 private foundation 103 private foundation 104 private foundation 105 private foundation		
•		
509(a)(1) and 170((b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the	
Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable frust not treated as a private foundation 527 political organization 4947(a)(1) nonexempt charitable frust not treated as a private foundation 4947(a)(1) nonexempt charitable frust iterated as a private foundation 4947(a)(1) nonexempt charitable frust iterated as a private foundation 501(c)(3) taxable private foundation 501(c)(3) taxable private foundation 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions 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)(v), 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 VIIII, line 1 to r (ii) Form 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, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 for use exclusively for religious, charitable, etc., purposes, but th		
	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

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

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

	(Form 990, 990-EZ, or 990-PF) (2009) rganization		Page 1 of 1 of Part I
			Employer identification number
	NS FOUNDATION INC		20-3796088
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ons Type of contribution
1	JAMES AND CAROL HAVENS 10401 BLAKE ROAD WADESVILLE, IN 47638	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d)
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ons 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 contributi	(d) ons 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 contributi	(d) ons Type of contribution
		 s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ons Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
923452 02-0	01-10	Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

						 _
Current Year Deduction	3,694.	924.	543.	1,458.	6,619.	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
Current Sec 179					0	mercial Revital
Accumulated Depreciation	9,235.	2,310.	814.		12,359.	age, Bonus, Com
Basis For Depreciation	36,938.	6,468.	3,800.	1,250.	48,456.	Section 179, Salv
Reduction In Basis				1,250.	1,250.	* ITC,
Bus % Excl						
Unadjusted Cost Or Basis	36,938.	6,468.	3,800.	2,500.	49,706.	(D) - Asset disposed
No Oct	17	17	17	19A) (<u>0</u>
Life	10.001	7.00	7.00	3.00		
Method						
Date Acquired	021006SL	122006SL	092907SL	012609SL		
Description	E-PLANETARIUM 6M 11PORTABLE	22FULL DOME VIDEO	33CARDBOARD ROCKET	ATIO:	DEPR	
Asset	11	22	 	44		928102 06-24-09

FORM 990-PF	ACCOUNTI	NG FEES			ST	'ATEMENT	1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTE NET INCO		(D) CHARITAI PURPOSI	
TAX RETURN PREPARATION	875.		0.		0.	8	75.
TO FORM 990-PF, PG 1, LN 16B	875.		0.		0.	8'	75.
FORM 990-PF	OTHER E	XPENSES			ST	'ATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE	_	(C) ADJUSTE NET INCO		(D) CHARITAI PURPOSI	
INSURANCE INTL PLANETARIUM SOC DUES IN BUSINESS REPORT FILING	2,506. 100.		0.		0.	2,50	06.
FEE CHURCH YOUTH BANQUET BANK DEPOSIT SLIPS	7. 881. 19.		0. 0. 0.		0. 0. 0.		7. 81. 19.
TO FORM 990-PF, PG 1, LN 23	3,513.		0.		0.	3,5	13.
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INVI	ESTMENT	ST	'ATEMENT	3
DESCRIPTION		T OR BASIS		MULATED RECIATION	В	OOK VALUI	E
E-PLANETARIUM 6M PORTABLE FULL DOME VIDEO CARDBOARD ROCKET THEATER SUITE SOFTWARE		36,938. 6,468. 3,800. 2,500.		12,929. 3,234. 1,357. 1,458.		24,00 3,23 2,44 1,04	34. 43.
TOTAL TO FM 990-PF, PART II,	LN 14	49,706.		18,978.		30,7	28.

CAROL S. HAVENS

-					
FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	4		
ACTIVITY ONE					
ADULTS WITH EMPH YOUTH. A PORTAB TEACH ASTRONOMY OR IN CLOSE PROX ALSO PROVIDE ANY EFFECTIVENESS OF	CION OUTREACH: PROVIDE RESOURCES FOR YOUTH AND MASIS ON AT-RISK AND LOWER SOCIO-ECONOMIC BLE PLANETARIUM IS USED TO MORE EFFECTIVELY AND RELATED SCIENCES AT THE STUDENTS' SCHOOL MILTY TO THEIR HOME. THE FOUNDATION WILL TEACHING SUPPLIES TO FURTHER THE THE OUTREACH. NO CHARGE FOR ADMISSION; BUTIONS ARE ACCEPTED.				
TO FORM 990-PF,	3,950				
FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT	5		
ACTIVITY TWO					
HEALTH MINISTRY FOUNDATION WILL HEALTH MINISTRY OTHER RESOURCES	OUTREACH: PROVIDE RESOURCES FOR EXPANDING PROGRAMS WITHIN THE TRI-STATE AREA. THE ASSIST GROUPS WISHING TO BEGIN OR EXPAND PROGRAMMING BY PROVIDING INSTRUCTION AND TO INDIVIDUALS WHO MAY NOT BE INCLUDED IN A PROGRAM. SPECIAL EMPHASIS IS PLACED ON				
		EXPENSES			
TO FORM 990-PF,	PART IX-A, LINE 2	43	38.		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT			
NAME OF MANAGER					
JAMES H. HAVENS					

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990-PF (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Attachment Sequence No 67

OMB No 1545-0172

Name(s) shown on return

Business or activity to which this form relates

Identifying number

HAVENS FOUNDATION INC					PF PAGE		20-3796088		
Part I Election To Expense Certain Propert		· · ·	•	roperty,	complete Part				
1 Maximum amount See the instructions	-		s			1	250,000.		
2 Total cost of section 179 property place	2								
3 Threshold cost of section 179 property b	efore reduction	in limitation				3	800,000.		
4 Reduction in limitation Subtract line 3 fr	om line 2 If zero	or less, enter -0-				4			
5 Dollar limitation for tax year Subtract line 4 from line	I If zero or less, enter	-0- If married filing separat	ely, see instruc	tions		5	 -		
6 (a) Description of prop	perty	(b) Cos	(business use	only)	(c) Elected	d cost			
7 Listed property Enter the amount from I	ine 29	•		7					
8 Total elected cost of section 179 proper	ty Add amounts	ın column (c), lines (and 7		, , , , , , , , , , , , , , , , , , , ,	8			
9 Tentative deduction. Enter the smaller of	of line 5 or line 8	, ,				9			
10 Carryover of disallowed deduction from	10								
11 Business income limitation. Enter the sm	11	 							
12 Section 179 expense deduction Add lin		•	•			12	· · · · · · · · · · · · · · · · · · ·		
13 Carryover of disallowed deduction to 20	-		•	13	-	,			
Note: Do not use Part II or Part III below for				1					
Part II Special Depreciation Allowan			include list	ed pro	perty.)				
14 Special depreciation allowance for qualif									
	ied property (of	iei tilali iisted piopei	ty) placed	III 3 C IVI	ce during	44	1,250.		
the tax year	ation.					14	1,230.		
15 Property subject to section 168(f)(1) elec	tion					15			
Part III MACRS Depreciation (Do not	include listed pr	oparty) (Soc instruc	tions \			16			
WACHS Depreciation (Do not	include listed pr	Section A	tions)						
							F 1.C1		
17 MACRS deductions for assets placed in	-	• •				_ 17	5,161.		
18 If you are electing to group any assets placed in service					•				
Section B - Assets F		(c) Basis for depreciat	1	the Ge	eneral Deprecia	ation Syste	em		
(a) Classification of property	(b) Month and year placed in service	(business/investment only - see instruction	use (C)	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction		
19a 3-year property		1,2	50. 3	YRS	. HY	SL	208.		
b 5-year property		•							
c 7-year property									
d 10-year property									
e 15-year property				_					
f 20-year property									
g 25-year property			2	25 yrs.		S/L			
3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	/			7 5 yrs	ММ	S/L			
h Residential rental property	,	· · · · · · · · · · · · · · · · · · ·		7 5 yrs	MM	S/L			
	,				MM	S/L			
 Nonresidential real property 	, , 			39 yrs.	MM	S/L	· <u> </u>		
Section C - Assets Pl	aced in Service	During 2009 Tay V	ar Heina t	he Alte			tom.		
	doca iii oci vice	During 2005 Tax Te	ai Osing t	ile Aite					
20a Class life	}		- 	10		S/L			
b 12-year				12 yrs.	- 1	S/L			
c 40-year Part IV Summary (See instructions.)	/			10 yrs.	MM	S/L			
									
21 Listed property. Enter amount from line:		40	, ,			21			
22 Total. Add amounts from line 12, lines 1									
Enter here and on the appropriate lines				see in	str	22	6,619.		
23 For assets shown above and placed in s	-	current year, enter	the						
portion of the basis attributable to section 263A costs 23									

Fo	rm 4562 (2009)	HAVI	ENS FOU	NDAT	NOI	INC						20-	3796	088	Page 2
P	art V Listed Proper	ty (Include au	tomobiles, ce	ertain otl	her vehic	les, cell	lular tele	phone	s, certain	compute	ers, and	property	y used fo	r entert	aınmen
	recreation, or a Note: For any		ich vou are u	sına the	standare	d milead	ie rate oi	r dedu	ctına lease	expens	e. comp	eteoni	v 24a. 24	lb. colur	nns (a)
	through (c) of	Section A, all	of Section B,	and Sec	ction C if	applica	ble								
		- Depreciation						ınstruc	tions for l	mits for	passeng	jer autor	mobiles)		
24	Do you have evidence to	support the bus	iness/investme	ent use cl	aimed?	<u> </u>	es L	_ No	24b If "Y	es," ıs tl	<u>ne evide</u>	nce writ	ten?	Yes	N _o
	(a)	(b)	(c)		(d)		(e)		(f)	((g)] ((h)		(i)
	Type of property	Date placed in	Business/ investment	.	Cost or	1750	sis for depr siness/inve		Recovery		thod/		eciation		cted on 179
	(list vehicles first)	service	use percenta		ther basis		use only		period	Conv	ention	deal	uction	1	ost
25	Special depreciation all	owance for qu	alified listed	property	y placed	ın servi	ce durin	g the ta	ax year an	d					
	used more than 50% in	a qualified bu	ısıness use					_	-		25				
26	Property used more that	ın 50% ın a qı	ualified busin	ess use	_									<u> </u>	
				%							·	1			
		· · ·		%								 			
		 		%								<u> </u>			
27	Property used 50% or I	ess in a qualif	·			I				1		L			
	Troperty asea 50% or i			6					l	S/L -		T			
		 		%						S/L -		+		1	
	 -	 		%						t e		 		1	
_	A -l -l	. (-) 05 4								S/L -		 		1	
	Add amounts in column		-				, page 1				28		- T	 	
<u>29</u>	Add amounts in column	1 (I), line 26 Er	•										29	<u> </u>	
_					B - Infor										
	mplete this section for ve														
-	ou provided vehicles to y ise vehicles	our employee	es, first answ	er the q	uestions	in Secti	ion C to	see ir y	you meet a	an excep	otion to	completi	ing this s	section t	or
				1						,		·			
				(a)	(b)		(c)	(d)	(e)	(f)
30	O Total business/investment miles driven during the		iring the	Ve	hicle	Ve	hicle	<u>v</u>	ehicle	Vel	nicle	Vel	hicle	Vehicle	
	year (do not include commuting miles)														
31	31 Total commuting miles driven during the year														
32	Total other personal (no	ncommuting)	miles												
	driven														
33	Total miles driven during	g the year.													
	Add lines 30 through 32									İ		[
34 Was the vehicle available for personal use			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
	during off-duty hours?	•						1				T	1		
35	Was the vehicle used p	rımarılv bv a n	nore		1				T	İ					
	than 5% owner or relate			Ì		Ì									
36	Is another vehicle availa	- · • ·	nal		 				 -	 		1			-
50	use?	tble for persor	iai		1					ļ					
	use	Castina C	O	<u> </u>	<u> </u>	/			<u> </u>	<u> </u>	<u> </u>			L	
۸	nwar than a sweetens to		Questions 1							-					504
	swer these questions to ners or related persons	determine ii y	ou meet an e	xceptioi	i to com	pieting	Section	B IOI V	enicies us	ea by ei	npioyee	s wno a	re not II	ore than	1 5%
	<u>-</u>						, , ,							T	T
37	Do you maintain a writte	en policy state	ement that pr	onibits a	ali persoi	nai use (of vehici	es, inc	luding cor	nmuting	, by you	r		Yes	No
	employees?					_									
38	Do you maintain a writte										our				
	employees? See the ins					ficers, c	lirectors	, or 1%	or more	owners					
39 Do you treat all use of vehicles by employees as personal use?															
40	Do you provide more th	an five vehicle	es to your em	ployees	, obtain	ınformat	tion from	ı your e	employee	s about					
	the use of the vehicles,	and retain the	nformation	received	ქ?										
41	Do you meet the require	ements conce	rning qualifie	d autom	nobile de	monstra	ation use	?							1
	Note: If your answer to	37, 38, 39, 40	, or 41 is "Ye	s," do n	ot compi	ete Sec	tion B fo	or the c	covered ve	hicles.					
P	art VI Amortization														
	(a)			(b)		(c)			(d)			(e)			
			amortization begins		Amortizal amoun	ble t	Code section			Amortization An period or percentage for			mortization or this year		
42	Amortization of costs th	at begins dur	ing your 200		ar										
												$\overline{}$		-	
_				• • •	1				 _	-+					
43	Amortization of costs th	at began befo	ore your 2009	tax vea	ar					I		43			
		•	,	. ,											

44 Total. Add amounts in column (f). See the instructions for where to report