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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2009

For	calen	dar year 2009, or tax year beginning		, and en	ding		
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public cl	harity	Final return	1
		Amended return	Address chan	ge		Name change	
Use	the I	RS Name of foundation				A Employer identification	n number
	abel.	L					
	erwi					20-3992108	3
	print r type	Number and street (or P O box number if mail is not de	•		Room/suite	B Telephone number	
	Spec	ica 2303 II II OOIHIDON ROAD	·			270-843-21	
	ructio	City of town, state, and ZIP code	102			C If exemption application is p	
	haak		103			D 1. Foreign organization 2. Foreign organizations me check here and attach of	S, CRECK REFE
n (_		Other taxable private founda-	stion			
L Fa		rket value of all assets at end of year J Accounting		Accru	ıal	E If private foundation sta under section 507(b)(1	
		·	her (specify)		ıaı	, , ,	,, ,,
•	\$	319,803. (Part I, colu		basis)		F If the foundation is in a under section 507(b)(1	
		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net inv	estment/	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	0.			N/A	
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	7,131.	•	7,131.		STATEMENT 1
	4	Dividends and interest from securities	4,377.		4,377.		STATEMENT 2
	5a	Gross rents					
	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10	548.		<u></u>		
)	b	Gross sales price for all assets on line 6a 231,539.	-				
「別と同じの Revenue	7	Capital gain net income (from Part IV, line 2)			548.		<u> </u>
写 二 而	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns				<u> </u>	
	Ι.	and allowances	:		<u></u>		<u> </u>
-	l	Less Cost of goods sold					
<u>'</u>	11	Gross profit or (loss) Other income					
(12	Total. Add lines 1 through 11	12,056.	1 '	2,056.		
<i>y</i>	13	Compensation of officers, directore, trustees, atc	0.		0.		0.
=	14	Other employed Salaries and waters					
	15	Other employed salaries and wages Rension blads, employee benefits					
nses	16a	Legaliees			-		
ë	b	Accounting Years 2 2 2 2 2					
ă	C	Other professional fees					
ĕ.	17	Interest OCDEN					
trat	18	Taxes STMT 3	276.		0.	_	276.
nis.	19	Depreciation and depletion			_		
텵	20	Occupancy			_		
Ř	21	Travel, conferences, and meetings					
a	22	Printing and publications	4 606				1 020
iing	23	Other expenses STMT 4	4,606.		0.		1,039.
Operating and Administrative Expe	24	Total operating and administrative	4 000		^	1	1 215
ŏ	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	4,882. 171,000.		0.		1,315. 171,000.
	1	Total expenses and disbursements.	1/1,000				1/1,000.
	20	Add lines 24 and 25	175,882.		0.		172,315.
_	27	Subtract line 26 from line 12:	1/2,002.		<u> </u>		1,4,313.
		Excess of revenue over expenses and disbursements	<163,826.	>			
	l	Net investment income (if negative, enter -0-)		1:	2,056.		
_	С	Adjusted net income (if negative, enter -0-)				N/A	
0225							

Fo	m 99	70-PF (2009) THE RISE FOUNDATION, IN	C	20-3	3992108	Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of		
	art -	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market V	alue
	1	Cash - non-interest-bearing	2,739.	7,194.		194.
	2	Savings and temporary cash investments	472,754.	304,455.	312,	609.
	3	Accounts receivable ►			-	
		Less; allowance for doubtful accounts ▶				
	4	Pledges receivable ►			···-	
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7					
	'	Less: allowance for doubtful accounts				
Ø	8	Inventories for sale or use			·	
Assets	i	Prepaid expenses and deferred charges				
As		Investments - U.S. and state government obligations	···			
		Investments - corporate stock				
	ŀ	Investments - corporate bonds				
	11	·				
	''					
	12	Less accumulated depreciation Investments - mortgage loans		1		
	13	Investments - other				
	l					
	14	Land, buildings, and equipment: basis				
	4.5	·				
	10	Other assets (describe	_			
	16	Total assets (to be completed by all filers)	475,493.	311,649.	319,	803
			413,433.	311,049.	J1 <i>J</i> ,	003.
	ı	Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons				
Ë	21	Mortgages and other notes payable				
	22	Other liabilities (describe >)	-			
	22	Total liabilities (add lines 17 through 22)	0.	0.		
_	23	Foundations that follow SFAS 117, check here				
		·				
S	0.4	and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted Temperatus restricted				
ala	25	Temporarily restricted				
9	26	· 1				
5	ł	· ·				
5		and complete lines 27 through 31.	0.	0		
ets	27	Capital stock, trust principal, or current funds	0.	0.		
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
at A	29	Retained earnings, accumulated income, endowment, or other funds	475,493.	311,667.		
ž	30	Total net assets or fund balances	475,493.	311,667.		
		Total linking and an acceptational haloman	475 402	211 667		
=	31	Total liabilities and net assets/fund balances	475,493.	311,667.		
P	art	Analysis of Changes in Net Assets or Fund B	alances			
-	Tota	I not accepts or fund halanoge at horizoning of year. Part II column (a) line	20			
ı		I net assets or fund balances at beginning of year - Part II, column (a), line	JU		475	102
	•	st agree with end-of-year figure reported on prior year's return)			475,	
		r amount from Part I, line 27a		2	<163,	
3		r increases not included in line 2 (itemize)	· · · · · · · · · · · · · · · · · · ·	3	211	<u>0.</u>
4		lines 1, 2, and 3		4	311,	
5		eases not included in line 2 (itemize)	duma (h) lina 00	5	211	$\frac{0.}{667}$
6_	1012	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numn (D), line 30	6	211,	667.

Part IV Capital Gains	and Losses for Tax on I	nvestmen	t Income				
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e. arehouse; or common stock, 200 st	g., real estate, hs. MLC Co.)		(b) How P - Pui D - Do	acquired chase nation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a VARIOUS CHARLE	S SCHWAB				P	VARIOUS	VARIOUS
b VARIOUS CHARLE				_	P	VARIOUS	VARIOUS
c LORD ABBOT FLO	ATING		~		P	VARIOUS	VARIOUS
<u>d</u>				ļ <u> </u>			ļ
e (e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss (e) plus (f) minus	
a 62,052.			61,94	7.			105.
b 169,394.		1	169,04				350.
c 93.							93.
d							
<u>e</u>				_			
Complete only for assets showing	ng gain in column (h) and owned by	1) Gains (Col. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		COI	. (k), but not less tha Losses (from col.	
a	·	ļ					105.
<u>b</u>		ļ					350.
<u>C</u>	•						93.
<u>d</u>							
<u>e</u>		1		_	1		
2 Capital gain net income or (net ca	$ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter} \end{cases} $			} 2	<u> </u>		548.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		and (6):		٦			
If (loss), enter -0- in Part I, line 8	nder Section 4940(e) fo			<u> </u>		N/A	<u> </u>
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the sectio	tion 4942 tax on the distributable a	complete this pa	rt.				Yes X No
(a) Base period years	(b)			(c)			(d) bution ratio
Calendar year (or tax year beginni	ng in) Adjusted qualifying di		Net value of nor			(00: (0) an	vided by col. (c))
2008		4,393.			55,663		.009434
2007		22,000.			<u>37,373</u>		.045140
2006		15,833. 50,000.			96 <u>,472</u> 92,689		.031891 .101484
2004	`	30,000.			74,003		•101404
2 Total of line 1, column (d) 3 Average distribution ratio for the		I on line 2 by 5,	or by the number	of years		2	.187949
the foundation has been in existe	nce it less than 5 years					3	.046987
4 Enter the net value of noncharitat	lle-use assets for 2009 from Part X	, line 5				4	299,888.
5 Multiply line 4 by line 3						5	14,091.
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)					6	121.
7 Add lines 5 and 6						7	
8 Enter qualifying distributions from						+ + -	14,212.
, , ,	•					8	14,212. 172,315.
, , ,	n Part XII, line 4 I line 7, check the box in Part VI, lin	e 1b, and comp	olete that part using	g a 1% tax	rate.	8	

_	m 990-PF (2009) THE RISE FOUNDATION, INC		20-	3992	<u> 108</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	(e), or 4	948	- see in	strı	ıctio	ns)
1a	a 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	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	}	1	}		1	21.
	of Part I, line 27b						
c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	J					
		-	2				0.
3			3			1	21.
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			1	21.
6	and the second s						
	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
	b Exempt foreign organizations - tax withheld at source 6b		1				
	c Tax paid with application for extension of time to file (Form 8868)		1				
	d Backup withholding erroneously withheld 6d		1				
	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
		•	9			1	21.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				<u> </u>
	,	nded 🕨	11				
	art VII-A Statements Regarding Activities	ilada P					
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate o	r intervene	ın			Yes	No
	any political campaign?				1a		Х
ь	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for de	finition)?		ļ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		d or	Ī			
	distributed by the foundation in connection with the activities.	,					
c	c Did the foundation file Form 1120-POL for this year?				1c		x
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			Ī			
	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$	0.					
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on found		•				
	managers. ►\$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		х
	If "Yes," attach a detailed description of the activities.			Ī			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incor	poration, o	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	a 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?		N	/A	4b		
				·	5		X
	If "Yes," attach the statement required by General Instruction T.						
6	and the second of the second o						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict will	th the state	law	- 1			
	remain in the governing instrument?			Ì	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			Ī			
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶				:		
	KY				Ì		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designation)	te)					
	of each state as required by General Instruction G? If "No," attach explanation	•			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5) for cale	ndar	ſ			
	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 addre	sses			10	Х	
				Form	990	-PF	2009)

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orm 990-PF (2009) THE RISE FOUNDATION, INC			20-39921	08 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 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 (section	1 4945(e))?	Y6	es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			8 X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗶 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 f			
the prevention of cruelty to children or animals?		Ye	es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the exceptions described i	n Regulations	1	
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		▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned	i	
expenditure responsibility for the grant?	N	/A Ye	es 🔲 No 📗	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).			
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	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b 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?	Y6	s X No	
b If yes, did the foundation receive any proceeds or have any net income attributa	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trustors Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
A November 1 de la constantina	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	allowances
TOM A. PENNINGTON	PRESIDENT, DI	RECTOR		
2309 H.E. JOHNSON ROAD				
BOWLING GREEN, KY 42103	5.00	0.	0.	0.
HANNAH L. PENNINGTON	SECRETARY, DI	RECTOR		
2309 H.E. JOHNSON ROAD				
BOWLING GREEN, KY 42103	5.00	0.	0.	0.
	VP, TREASURER	, DIRECTO	R	
2309 H.E. JOHNSON ROAD				
BOWLING GREEN, KY 42103	5.00	0.	0.	0.
Companyation of five highest poid appleads (athough an though	luded on time 4). If many	BNONE B		
Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
NONE				
			·	
	· · · · · · · · · · · · · · · · · · ·			
			<u></u>	<u> </u>
Total number of other employees paid over \$50,000			>	0

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	16	304,455.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	304,455.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	304,455.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,567.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	299,888.
6	Minimum investment return. Enter 5% of line 5	6	14,994.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	14,994.
2a	Tax on investment income for 2009 from Part VI, line 5		
Ь	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	121.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,873.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,873.
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	14,873.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>172,315.</u>
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:		
а	Suitability test (prior IRS approval required)	3a	
þ	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	172,315.
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	121.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	172,194.
	Mate. The amount on line 6 will be used in Part V, column (h), in subsequent years when calculating whether the foundation of	unalified for t	he cection

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,	<u> </u>			
line 7				14,873.
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 20,123.				
c From 2006			:	
d From 2007				
e From 2008	20 122			
f Total of lines 3a through e	20,123.			·
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 172,315.			0	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus		U •		
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	U•			14,873.
e Remaining amount distributed out of corpus	157,442.			14,073.
5 Excess distributions carryover applied to 2009	0.		-	0.
(If an amount appears in column (d), the same amount must be shown in column (a))			· · · · · · · · · · · · · · · · · · ·	<u> </u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	177,565.			
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		İ		
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.	177 565			
Subtract lines 7 and 8 from line 6a	177,565.		· · · · · · · · · · · · · · · · · · ·	
10 Analysis of line 9: a Excess from 2005 20 . 123 .				
a Excess from 2005 b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009 157, 442.				
1011 1421				Form QQO-DE (2000)

Part XIV Private Operating F	CUNDATIONS (See in		A question Q)		992108 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	•	•	P L	4040(4)(2) ==	0.40(.)(5)
b Check box to indicate whether the found		ng touridation described t		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(4) 2005	(0) 2000	(6) 2007	(4) 2000	(6) 10(4)
investment return from Part X for					
each year listed				<u> </u>	
b 85% of line 2a				·	
c Qualifying distributions from Part XII,					
line 4 for each year listed				ļ	· · · · · · · · · · · · · · · · · · ·
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				-	
e Qualifying distributions made directly					
for active conduct of exempt activities.					}
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed		_			
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		· · · · · · · · · · · · · · · · · · ·			
(4) Gross investment income		A - 40-1 A - B - 1		1 105 000	
Part XV Supplementary Info at any time during t			it the foundation	nad \$5,000 or m	ore in assets
		instructions./			
1 Information Regarding Foundation	-	4ba- 00/ -f 4b- 4-4-14-			
a List any managers of the foundation wh year (but only if they have contributed n	o nave contributed more nore than \$5,000), (See s	tnan 2% of the total contr ection 507(d)(2).)	ibutions received by the	toundation before the cic	ise of any tax
NONE	, , , , , , , , , , , , , , , , , , , ,	(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(
b List any managers of the foundation wh	o own 10% or more of th	a stock of a corporation /	or an oqually large porte	on of the ownership of a	eartearchin ar
other entity) of which the foundation has			or an equally large portion	on or the ownership of a p	arthership of
NONE	Q				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Dr.	narame:	 :	
Check here X if the foundation o				int accept unsolicited reci	lests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations ui	nder other conditions, co	omplete items 2a, b, c, an	d d.
a The name, address, and telephone num					·
, and toopholio lidili		appression officere ou			
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Agu rootriotions of leadanness of	n auch an his said			Abo - foots ::	
d Any restrictions or limitations on awards	s, such as by geographica	ai areas, charitable fields,	kinas of institutions, or c	otner factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 1,000. ALVATON ELEMENTARY SCHOOL NONE PUBLIC TO ASSIST WITH SCHOOL **#1 ROBERT MORGAN LANE** ORGANIZATION'S ALVATON, KY 42122 EDUCATIONAL AND PHYSIC ST JUDE CHILDREN'S 15,000. NONE CHARITABLE TO PROVIDE ASSISTANCE HOSPITAL ORGANIZATOro the organization's 262 DANNY THOMAS PLACE GOALS OF HELPING MEMPHIS, TN 38105 CHILDREN WESTERN KY UNIVERSITY NONE PUBLIC 150,000. TO ASSIST WITH 1906 COLLEGE HEIGHTS BLVD SCHOOL ORGANIZATION'S BOWLING GREEN, KY 42101 EDUCATIONAL AND PHYSIC ELIZABETHTOWN CHRISTIAN NONE PRIVATE 5,000. TO ASSIST WITH **ACADEMY** SCHOOL ORGANIZATION'S 401 WEST POPLAR ST EDUCATIONAL AND PHYSIC ELIZABETHTOWN, KY 42701 171,000. ➤ 3a Total b Approved for future payment NONE ▶ 3b Total

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

nter gross amounts unless otherwise indicated.		ousiness income		by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
·	Code		1000		
a b	-				
	-		+ +		
d	l f	 			·
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					7 131
Dividends and interest from securities					7,131. 4,377.
5 Net rental income or (loss) from real estate:		 	1		270776
a Debt-financed property		···			~
b Not debt-financed property					
Net rental income or (loss) from personal property					
7 Other investment income					
B Gain or (loss) from sales of assets other than inventory					548.
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b	_				
C	_				
d	_		\bot		
e	_				
2 Subtotal. Add columns (b), (d), and (e)		0		0.	12,056.
3 Total. Add line 12, columns (b), (d), and (e)				13	12,056.
See worksheet in line 13 instructions to verify calculations.)					

LINE NO.								ntribute	d importan	tly to the	accomplishment of	
	the foundation	's exempt purpo	ses (other than	ı by providin	g funds	for such purposes)						
3	INTEREST	INCOME	EARNED	ON C	ASH	DEPOSITS	TO	BE	USED	FOR	ONGOING	
	CHARITABI	LE DONA	TIONS O	F THE	ORG	ANIZATIN						
				•								
				•								
					-							
	<u> </u>											
			_									
									•			
									•			
		<u> </u>		•		•						

923621 02-02-10

	-PF (2009) THE R	RISE FOUNDATION,	INC	20-3	992108	Pa	ge 13
Part >	(VII Information Re Exempt Organ		and Transactions a	and Relationships With Nonc	charitable)	
1 Did		rectly engage in any of the following	ng with any other organization	on described in section 501(c) of		Yes	No
	•	(3) organizations) or in section 5	•	, ,			
	•	ation to a noncharitable exempt or					
	Cash		,		1a(1)		Х
	Other assets				1a(2)		Х
	er transactions:						
(1)	Sales of assets to a noncharita	ible exempt organization			15(1)		X
(2)	Purchases of assets from a no	ncharitable exempt organization			1b(2)		Х
(3)	Rental of facilities, equipment,	or other assets			1b(3)		X
(4)	Reimbursement arrangements	;			1b(4)		X
(5)	Loans or loan guarantees				1b(5)		X
(6)	Performance of services or me	embership or fundraising solicitation	ons		1b(6)		X
		aling lists, other assets, or paid en			1c		X
				ways show the fair market value of the goo		ets,	
				ie in any transaction or sharing arrangeme	ent, show in		
		other assets, or services received. (c) Name of noncharitabl		(4) -			
(a) Line no	(b) Amount involved		e exempt organization	(d) Description of transfers, transactions,	, and sharing arra	angeme	nts
		N/A		-			
	 						
				 			
							
			· · ·				
				1			
				-			
_							
				<u> </u>			
		tly affiliated with, or related to, one r than section 501(c)(3)) or in sec		zations described		T] No
	es," complete the following sch		uon 527 :		Yes	<u> </u>] NO
	(a) Name of org		(b) Type of organization	(c) Description of relati	ionship		
	N/A				•		•
		-					
		have examined this return, including account than taxpayer or fiduciary) is based on		ents, and to the best of my knowledge and belief,	, it is true, correc	at,	
andu	2 Prepare (oute	man taxpayer or ilductary) is based on	all information of which preparer	nas any knowledge			
	ATTEN YE		11-15-10	V.r., Suasu	<u>u</u>		
<u> </u>	Signature of officer or trustee		Date	Title			
Sign Here	Preparer's signature	Kincello h or		Check if self-employed >	eparer's identifyi	ing num	ber
Sign Paid parer's	Firm's name (or yours STIL	ES CARTER & ASS					

(270)769-6371

rf self-employed).

PO BOX 622

address, and ZIP code

PLIZABETHTOWN, KY 42702

Phone no.

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY (CASH I	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
BB&T BANK CHARLES SCHWAB						7,1	3. 28.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			7,1	31.
FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	M SECU	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
CHARLES SCHWAB			4,377	•	0.	4,3	77.
TOTAL TO FM 990-PF, PART I, I	LN 4		4,377	· =	0.	4,3	77.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS			(C) ADJUSTED NET INCOM		
FEDERAL FOREIGN INVESTMENT TAX		245. 31.		0.			45. 31.
TO FORM 990-PF, PG 1, LN 18 =		276.		0.		2	76.
FORM 990-PF	C	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET IN MENT II	/EST-	(C) ADJUSTED NET INCOM		
LEGAL & PROFESSIONAL FEES INVESTMENT FEES		1,039. 3,567.		0.		1,0	39. 0.
TO FORM 990-PF, PG 1, LN 23		4,606.		0.		1,0	39.

Form 8868*(Rev: 4-2009)			Page 2
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and Note. Only complete Part II if you have already been granted an automatic 3-month extension on a pr If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). 	eviously filed Form		▶ X
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the	onginal (no copies	needed).	
Type or Name of Exempt Organization	Emp	loyer identi	fication number
rint THE RISE FOUNDATION, INC	2	0-3992	108
Number, street, and room or suite no. If a P.O. box, see instructions. STILES CARTER & ASSOC PSC P O BOX 622	For I	RS use only	
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. ELIZABETHTOWN KY 42702-0622			
		orm 5227 orm 6069	Form 8870
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension	on a previously file	ed Form 886	i8.
6 If this tax year is for less than 12 months, check reason. Initial return 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY TO FILE A COMPLETE	If this is for all members of and ending	r the whole overs the extension	group, check this nsion is for.
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any		_
nonrefundable credits See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and est			
tax payments made Include any prior year overpayment allowed as a credit and any amount pa			0
previously with Form 8868.	8b	\$	<u> </u>
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See	•	_	0.
Signature and Verification	instructions. 8c	\$	<u> </u>
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statem it is true, correct, and complete, and that I am authorized to prepare this form.		•	ge and belief,
Signature Title	Date	•	

Form **8868** (Rev. 4-2009)

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

Interna	The a separate application for each return							
• If y	rou are filing for an Automatic 3-Month Extension, complete only Part I and check this box rou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for ot complete Part II unless you have already been granted an automatic 3-month extension on a previously filed	•						
Part I	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and comple	▶□						
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 Charities & Nonprofits.								
Type print		Employer identification number						
File by due dat filing yo	te for Number, street, and room or suite no. If a P.O. box, see instructions.							
instruct								
Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 990-EZ Form 990-EZ Form 990-PF Form 1041-A Form 8870								
PORTIA B. PENNINGTON The books are in the care of ▶ 2309 H.E. JOHNSON ROAD - BOWLING GREEN, KY 42103 Telephone No. ▶ 270-843-2160 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this for part of the group, check this box ■ and attach a list with the names and EINs of all members the extension will cover								
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above is for the organization's return for: X calendar year 2009 tax year beginning, and ending, and ending	ve. The extension						
2	If this tax year is for less than 12 months, check reason:	Change in accounting period						
b	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3 If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3	a \$						
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.							
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 887	9-EO for payment instructions.						

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

Form 8868 (Rev. 4-2009)

923831 05-28-09 Mailed to 1RS 5/17/10

Form 88	68 (Rev. 4-2009)			Page 2		
•` If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and chec	k this box		▶ X		
	Only complete Part II if you have already been granted an automatic 3 month extension on a previous		n 8868.			
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Part	II Additional (Not Automatic) 3-Month Extension of Time. Only file the ongo	nal (no copies	neede	ed).		
Type or	Name of Exempt Organization	Em	ployer	identification number		
print File by the	THE RISE FOUNDATION, INC			992108		
extended due date fi filing the	Number, street, and room or suite no. If a P O. box, see instructions.	For	IRS us	e only		
return Sec	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			-		
F	type of return to be filed (File a separate application for each return): orm 990		orm 52 orm 60			
STOP!	Do not complete Part II if you were not already granted an automatic 3-month extension on a	previously fi	led For	m 8868.		
PORTIA B. PENNINGTON • The books are in the care of ▶ 2309 H.E. JOHNSON ROAD - BOWLING GREEN, KY 42103 Telephone No ▶ 270-843-2160 FAX No ▶ • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for 4 I request an additional 3-month extension of time until NOVEMBER 15, 2010. 5 For calendar year 2009, or other tax year beginning, and ending, and ending 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period 7 State in detail why you need the extension ADDITIONAL TIME IS NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN						
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any enrefundable credits. See instructions.	82	s			
b if t	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate x payments made. Include any prior year overpayment allowed as a credit and any amount paid	8a				
<u>p</u> ı	reviously with Form 8868.	8b	\$			
	alance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, depo th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instr		s	N/A		
	Signature and Verification		1 Ψ	21/22		
Under penalties of pergry, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.						
Signature		Date	. ▶	8/12/10		
	-mailed to 1RS 8/13/10			Form 8868 (Rev. 4-2009)		