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Form **990-PF**

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

OMB No 1545-0052

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

2009

| | | or year 2009, or tax year beginning III that apply: Initial return Ini | , 2009 tial Return of a former p | , and ending oublic charity | , Fin | al return |
|---|---------------------------------------|--|--|--------------------------------|---|--|
| | | Amended return | Address | ´ [| change | |
| Use IRS la Other pri or ty See Sp Instruc | ibel. wise, nt pe. ecific | CASCELLA FAMILY CHARITAB 14 CLAYTON HILLS LN ST LOUIS, MO 63131 | LE FOUNDATION | E C | 20-7489472 Telephone number (see the 314-995-5319 If exemption application is | pending, check here |
| H | | | 11(c)(3) exempt private t | foundation | 2 Foreign organizations mee here and attach computation | ting the 85% test, check |
| | air ma (from P | art II, column (c), line 16) | counting method X C | F | If private foundation status under section 507(b)(1)(A If the foundation is in a 60 | s was terminated), check here |
| | | nalysis of Revenue and | (a) Revenue and | (b) Net investment | under section 507(b)(1)(B | |
| | Ci Si | xpenses (The total of amounts in plumns (b), (c), and (d) may not neces- arily equal the amounts in column (a) see the instructions)) | expenses per books | income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 2 | Contributions, gifts, grants, etc, received (att sch) Ck If the foundn is not req to att Sch B | 70,098. | | | The second of th |
| | 3 | Interest on savings and temporary cash investments | | | | - Control Property |
| | 4 5 | Dividends and interest from securities a Gross rents | 7,493. | 7,493 | . 7,493. | W.C. |
| n R | | Net rental income or (loss) | | | | The state of the s |
| | | Net gain/(loss) from sale of assets not on line 10 Gross sales price for all 5, 850. | -40,352. | - | | RECEIVED |
| E V E N U E | 7 8 | assets on time oa | | 0 | | 8 |
| E | 10: | Income modifications a Gross sales less returns and | | | 338 | MAY 1.77 2010 |
| | | allowances b Less Cost of goods sold | | | | GDEN, UT |
| | | Gross profit/(loss) (att sch) Other income (attach schedule) | | | | |
| | 12 | Total. Add lines 1 through 11 | 37,239. | 7,493 | 7,493. | |
| | 13 14 | | 0. | | | |
| | 15 | Other employee salaries and wages Pension plans, employee benefits | | ··· | - | |
| A | 1 . | a Legal fees (attach schedule) | | 275 | | 101 |
| M | | b Accounting fees (attach sch) See. St. 1 c Other prof fees (attach sch) | 500. | 375 | • | 125 |
| O I | 17 | Interest . | 5. | . 5 | • | |
| N-STRAT | 18 19 | Taxes (attach schedule/(see instr.) See Stm 2 Depreciation (attach sch) and depletion | 265. | <u> </u> | | · · · |
| N V | 20 | Occupancy . | | | | |
| | 21 22 | Travel, conferences, and meetings Printing and publications . | | | - | |
| AND EX | 23 | Other expenses (attach schedule) See Statement 3 | 18. | | | |
| N S E S | 24 | Total operating and administrative | 788. | 200 | | 105 |
| S | 25 | expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV | 29,524. | 380 | · | 125 29,524 |
| | | Total expenses and disbursements. Add lines 24 and 25 | 30,312. | 380 | . 0. | 29,649 |
| | | Subtract line 26 from line 12: Excess of revenue over expenses | | | | , |
| | | and disbursements | 6,927. | | | S. J. S. Mar. S. |
| | | O Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) | - | 7,113 | 7,493. | A STATE OF THE STA |
| DAA I | | ivacy Act and Paperwork Reduction A | at Notice, see the instru | -4: | I,433. | Form 990-PF (200 |

| Pari | Attached schedules and amounts in the description column should be for end-of-year amounts only | | Beginning of year | | End of year | | |
|-----------------------|---|---|----------------------------|-----------------|--|--|--|
| I ROLL | | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value | | |
| | 1 | Cash – non-interest-bearing | 31,362. | 29,140. | 29,140. | | |
| | 2 | Savings and temporary cash investments | | | | | |
| | 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 (attach schedule) (see the instructions) | | | | | |
| | 7 | Other notes and loans receivable (attach sch) | | | | | |
| ŝ | | Less allowance for doubtful accounts | | | | | |
| A S S E T | 8 | Inventories for sale or use . | | | | | |
| Ŧ | 9 | Prepaid expenses and deferred charges . | | · | | | |
| S | | a Investments – U.S. and state government obligations (attach schedule). | | | | | |
| | l . | Investments — corporate stock (attach schedule) Statement 4 | 123,208. | 128,044. | 172,070. | | |
| | 9 | Investments — corporate bonds (attach schedule) | | | 76.52 | | |
| | 11 | Investments – land, buildings, and equipment: basis | | | | | |
| | ļ | Less: accumulated depreciation (attach schedule) | | | | | |
| | 12 | Investments - mortgage loans. | | | | | |
| | 13 | Investments — other (attach schedule) Statement 5 | 276,054. | <u>280,367.</u> | 241,568. | | |
| | 14 | | | | * | | |
| | | Less: accumulated depreciation (attach schedule) | | | | | |
| | 15 16 | Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item I) | 430,624. | 437,551. | 442,778. | | |
| Ļ | 17 | Accounts payable and accrued expenses | | | 1 | | |
| Å | 18 | Grants payable | | | The state of the s | | |
| В | 19 | Deferred revenue | | | | | |
| L | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | | | |
| ł | 21 | Mortgages and other notes payable (attach schedule) | | | | | |
| ı | 22 | Other liabilities (describe | | _ | ACT THE TOTAL OF | | |
| E S | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. | | | | | |
| NF | 24 | Unrestricted | | | | | |
| N F E U T N | 25 | Temporarily restricted . | | | | | |
| D | 26 | Permanently restricted . | | | | | |
| A B A L A | | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | | | | | |
| ĒL | 27 | Capital stock, trust principal, or current funds | | | | | |
| ŚÑ | 28 | Paid-in or capital surplus, or land, building, and equipment fund | | | | | |
| o E | 29 | Retained earnings, accumulated income, endowment, or other funds | 430,624. | 437,551. | 44 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | |
| RS | 30 | Total not assets or fund balances (see the instructions) | 430,624. | 437,551. | | | |
| | 31 | Total liabilities and net assets/fund balances (see the instructions) | 430,624. | 437,551. | | | |
| Part | 411" | Analysis of Changes in Net Assets or Fund Balanc | es | | | | |
| 1 | Total end- | I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return) | umn (a), line 30 (must a | gree with | 430,624. | | |
| | | r amount from Part I, line 27a | | 2 | 6,927. | | |
| 3 | Other | increases not included in line 2 (itemize) | | 3 | | | |
| 4 | Add | lines 1, 2, and 3 | | 4 | 437,551. | | |
| 5 | Decrea | ases not included in line 2 (itemize) | | 5 | | | |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) |) - Part II, column (b), I | ine 30 6 | 437,551. | | |

| 2 | Total of line 1, column (d) | 2 | |
|---|--|-------|------------------|
| 3 | Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | |
| 4 | Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 | 4 | |
| 5 | Multiply line 4 by line 3 | 5 | |
| 6 | Enter 1% of net investment income (1% of Part I, line 27b) | 6 | |
| 7 | Add lines 5 and 6 | 7 | |
| • | Enter qualifying distributions from Part XII, line 4 | 8 | |
| 8 | Enter qualifying distributions from Part XII, line 4 | 8_ | |
| | If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using Part VI instructions | ja 1% | tax rate See the |

| | 990-PF (2009) CASCELLA FAMILY CHARITABLE FOUNDATION 20-7489472 | | Р | age 4 |
|------|--|------------------|------------|--------------|
| Räft | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc | tions) | | |
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. | יין בייל איי ייי | - '1256. h | 71. A |
| | Date of ruling or determination letter: (attach copy of letter if necessary - see instr.) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | | 1 | 42. |
| | check here ▶ ☐ and enter 1% 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, column (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | |
| _ | foundations only Others enter -0-) | | | 0. |
| 3 | Add lines 1 and 2 | | 1 | 42. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 1 | 42. |
| 6 | Credits/Payments: | | | |
| а | 2009 estimated tax pmts and 2008 overpayment credited to 2009 | | - | - |
| b | Exempt foreign organizations — tax withheld at source 6b | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 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 | | 1 | 42. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| | Enter the amount of line 10 to be: Credited to 2010 estimated tax . Refunded 11 | | | |
| Part | VII-A Statements Regarding Activities | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | ļ | Yes | No |
| | participate or intervene in any political campaign? | 1 a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | 16 | : | х |
| | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published | | - | |
| | or distributed by the foundation in connection with the activities | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1 c | | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| | (1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow 0. | 1 1 | | , , |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \triangleright \$ 0. | | | |
| 2 | | 2 | | Х |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 4 | | |
| | If 'Yes,' attach a detailed description of the activities. | 1 1 | | |
| 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 | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? If 'Yes,' has it filed a tax return on Form 990-T for this year? | 4b | N | /A |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | 111 | X |
| 5 | 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 | | | |
| O | By language in the governing instrument, or | | | |
| | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | | Х |
| | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | 7 | <u> X</u> | ļ |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see the instructions) | | | , |
| | N/A | | | |
| b | If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | v | |
| | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation | 8b | Х | 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 calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names | | | |
| | and addresses | 10 | | Х |

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| | • | | | | | |
|-----|--|------------------|--------|--|---------------------------------------|---|
| | 1 990-PF (2009) CASCELLA FAMILY CHARITABLE FOUNDATION CARRY Statements Regarding Activities Continued | 20- | 748947 | 2 | F | Page 5 |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | | | 11 | | х |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | | | 12 | | х |
| | Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address • N/A | applica | tion? | 13 | Х | |
| 14 | The books are in care of ► GUY & EVE CASCELLA Telephone Located at ► 14 CLAYTON HILLS LN ST LOUIS MO ZIP + 4 ► | no. ► 631 | | 95-5 | 319 | |
| | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year | | 15 | N/A | \ | ∏ N/A |
| Par | Statements Regarding Activities for Which Form 4720 May Be Required | | _ | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | | 2 | Yes | No |
| ıa | During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | Yes | XNo | 1.00 | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | Yes | XNo | , | | (1 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | Yes | X No | ١., | A | и. |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | Yes | X No | ر مرونه . | 12 | et ro |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | Yes | XNo | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) | Yes | XNo | ************************************** | | |
| b | If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruction | ns)? | | 1b | STOP N | / <u>^</u> /A |
| | Organizations relying on a current notice regarding disaster assistance check here | > | | | | 禁止 |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? | | | 1c | X 12 | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)). | | | 17.5 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 6 3 |
| | At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If 'Yes,' list the years 20, 20, 20, 20 | Yes | XNo | ئے 1 | | 1, 1, 1 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1 |
| | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions) | a)(2))(2) to | | 2b | N. | /A |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he 20 , 20 , 20 | ere | | 1,12 | e or | , e |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | Yes | X No | e grigori | | *** |
| b | If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose 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, Form 4720, to | | | | | |
| | determine if the foundation had excess business holdings in 2009.) | | | 3 b | N | /A |

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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

| Rank LB Statements Regarding Activit | | <u>1 4720 May Be Req</u> | uired (continued) | |
|---|--|---|--|---------------------------------------|
| 5a During the year did the foundation pay or incu | • | | □ | |
| (1) Carry on propaganda, or otherwise attemp | _ | ` | ∐ Yes X | No |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | ilic election (see sectior ation drive? | 1 4955), or to carry | Yes X | No No |
| (3) Provide a grant to an individual for travel, | | | ∐ Yes X | No |
| (4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section | han a charitable, etc, o 4940(d)(2)? (see instri | rganization described uctions) | Yes X | No |
| (5) Provide for any purpose other than religio educational purposes, or for the prevention | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes X | No |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in | the transactions fail to | qualify under the excep | tions | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| (see instructions)? | - | _ | _ | 5b N/A |
| Organizations relying on a current notice rega | ırdıng dısaster assıstanı | ce check here | ▶ _ | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg | sibility for the grant? | | N/A Yes |] No |
| 6a Did the foundation, during the year, receive a | | • • | s | |
| on a personal benefit contract? | | | ∐Yes X | No A |
| b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870. | iums, directly or indirec | ctly, on a personal bene | fit contract? | 6b X |
| 7a At any time during the tax year, was the found | dation a party to a prob | ubited tax shelter transa | iction? Yes X | No |
| b If yes, did the foundation receive any proceed | s or have any net incor | me attributable to the tra | ansaction? | 7b N/A |
| Part VIII Information About Officers, D | irectors, Trustees, | Foundation Manag | gers, Highly Paid | Employees, |
| and Contractors 1 List all officers, directors, trustees, foundation | n managers and their | compensation (see inst | ructions). | |
| | (b) Title and average | (c) Compensation | (d) Contributions to | (e) Expense account, |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | other allowances |
| GUY_CASCELLA | Trustee | 0. | 0. | 0 |
| 14 CLAYTON HILLS LN | 0 | | | |
| ST LOUIS, MO_63131 | | | | <u> </u> |
| EVE CASCELLA | Trustee | 0. | 0. | 0. |
| 14 CLAYTON HILLS LN ST LOUIS, MO 63131 | 0 | | | |
| ST BOOTS, NO COTOT | | | | |
| | | | | |
| | | | | |
| | | | _ | |
| 2 Compensation of five highest-paid employee | | | | enter 'NONE.' |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| None | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 |) | | | 0 |
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Rankilla Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.' (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation None 0 Total number of others receiving over \$50,000 for professional services Partix A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses N/A Partix B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 **Amount** N/A All other program-related investments. See instructions.

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Total. Add imes 1 through 3

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Part Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes; a Average monthly fair market value of securities 1 a 332,949. 34,242. 1 b b Average of monthly cash balances c Fair market value of all other assets (see instructions) 1 c 367,191. d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0 1e (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 0. 3 367,191. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 5,508. (for greater amount, see instructions) 4 5 361,683. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 18,084. 6 Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part. 18,084. 1 Minimum investment return from Part X, line 6 1 2a Tax on investment income for 2009 from Part VI, line 5 2a 142 b Income tax for 2009 (This does not include the tax from Part VI.) 2b 2 c c Add lines 2a and 2b 142 17,942 3 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions. 4 5 Add lines 3 and 4 5 17 942 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 17. 942 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc.— total from Part I, column (d), line 2629,649. 1 a b Program-related investments - total from Part IX-B 1 b 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) За **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 29,649

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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29,649.

5 6 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, | | - | | 17 042 |
| 2 | Undistributed income, if any, as of the end of 2009: | ₹ | | | 17,942. |
| | a Enter amount for 2008 only | | | 0. | معد في الشكارية |
| 1 | • Total for prior years: 20, 20, 20 | -१४केटेज्य - ग्रीपाल्यु पंजार । | 0. | | 17 18 24 18 24 24 24 24 24 24 24 24 24 24 24 24 24 |
| | Excess distributions carryover, if any, to 2009. | | * | | and the state of |
| | a From 2004 | | | • | h street |
| | From 2005 | | | | |
| | From 2006 . 13.157 | - | | | , |
| | #From 2007 13, 157. a From 2008 13, 008. | | | | |
| | Total of lines 3a through e | 26,165. | | | |
| | Qualifying distributions for 2009 from Part | 20,103. | | | |
| · | XII, line 4: ► \$ 29, 649. | | | | |
| i | Applied to 2008, but not more than line 2a | | | 0. | |
| | Applied to undistributed income of prior years | | | | · |
| | (Election required — see instructions) | | 0. | | |
| (| Treated as distributions out of corpus (Election required — see instructions) | 0. | | | , |
| (| Applied to 2009 distributable amount | | | · · · · · · · · · · · · · · · · · · · | 17,942. |
| | Remaining amount distributed out of corpus | 11,707. | | | |
| 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).) | | | | , |
| | ``` | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 27 072 | | | |
| | · | 37,872. | | | |
| t | 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. | | |
| c | Subtract line 6c from line 6b. Taxable | | | | , |
| | amount – see instructions | | 0. | | |
| e | Undistributed income for 2008. Subtract line 4a from | | | _ | |
| | line 2a. Taxable amount — see instructions . | | | 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 | | | | 0. |
| | corpus to satisfy requirements imposed | | | | |
| | by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | 0. | | | |
| Ω | Excess distributions carryover from 2004 not | | , | | • |
| Ū | applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 | Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a | 37,872. | | | Mill Seed the seed of the seed |
| 0 | Analysis of line 9: | | | | |
| а | Excess from 2005 | | | | |
| | Excess from 2006 | İ | | | |
| | Excess from 2007 13, 157. | | ļ | | |
| | Excess from 2008 13, 008. | | | | |
| e | Excess from 2009 11, 707. | | | | |

| Form 990-PF (2009) CASCELLA FAMILY (| | | | 20-7489472 | Page 10 |
|---|--|--|--|---|----------------------------------|
| Private Operating Foundations (see instructions and Part VII-A, question 9) | | | | | N/A |
| 1 a If the foundation has received a ruling or on its effective for 2009, enter the date of the | ruling . | • | | n, and the ruling | - |
| b Check box to indicate whether the foundate | | erating foundation of | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | |
| investment return from Part X for each year listed | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| 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 | | | | | |
| 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 | | | ļ | | |
| (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 | | ł | | | |
| c 'Support' alternative test – enter: | | | | | Ville |
| (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 | | L | | | |
| Part XV Supplementary Information assets at any time during the | (Complete this e year – see in | part only if the structions.) | organization ha | d \$5,000 or more | e in |
| 1 Information Regarding Foundation Managers are List any managers of the foundation who close of any tax year (but only if they have See Statement 6 | | ore than 2% of the than \$5,000) (See | total contributions resection 507(d)(2)) | eceived by the found | ation before the |
| b List any managers of the foundation who a partnership or other entity) of which the None | own 10% or more of foundation has a 1 | of the stock of a cor 0% or greater inter | rporation (or an equa est. | ally large portion of t | ne ownership of |
| 2 Information Regarding Contribution, Gran Check here > X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d | nakes contributions | to preselected cha | aritable organizations | s and does not accep anizations under othe | ot unsolicited er conditions, |
| a The name, address, and telephone number | er of the person to | whom applications | should be addressed | 1: | |
| b The form in which applications should be | submitted and infor | mation and materia | als they should ınclu | de: | |
| c Any submission deadlines: | | | | | , |
| d Any restrictions or limitations on awards, | such as by geograp | hical areas, charita | able fields, kınds of ı | nstitutions, or other f | actors: |

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or status of **Amount** contribution recipient Name and address (home or business) a Paid during the year THE ROCK CHURCH NONE N/A CHARITABLE 6,000. P.O. BOX 570 DANVILLE, IL 61834 ARTS & EDUCATION NONE N/A CHARITABLE 1,100. 3547 OLIVE ST ST LOUIS, MO 63103 UNITED WAY NONE N/A CHARITABLE 7,224. 910 N 11TH ST ST LOUIS, MO 63101 NEW CITY FELLOWSHIP NONE N/A CHARITABLE 15,000. 1142 HODIAMONT AVE ST LOUIS, MO 63112 100 NEEDIEST CASES NONE N/A CHARITABLE 200. PO BOX 955925 ST LOUIS, MO 63195 **Total** 3a 29,524. **b** Approved for future payment

Total

ightharpoons3b

Raid Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | | Unrelated (a) Business code | (b) Amount | (c) Exclu- sion | section 512, 513, or 514 (d) Amount | (e) Related or exempt function income |
|--|--|--|----------------|--|---|---------------------------------------|
| 1 | Program service revenue: | | | code | | (see the instructions) |
| á | a | | =_+- | | | |
| | o | | | | | |
| • | C | | | | | |
| | d | | *** | | | ,, <u>,</u> , |
| | | | | | | |
| 1 | Food and contracts from accomment con- | | | + | | |
| | g Fees and contracts from government agencies Membership dues and assessments | 1 | | + | | |
| 3 | | | | | | <u> </u> |
| 4 | Dividends and interest from securities | | | 14 | 7,493. | |
| 5 | | | | 1 - 1 - 1 | 7,455. | |
| á | a Debt-financed property | | | 1 1 | | |
| | Not debt-financed property | | | | | |
| 6 | Net rental income or (loss) from personal property | | | | | · |
| 7 | Other investment income | | | | | |
| 8 | Gain or (loss) from sales of assets other than inventory | | | | | -40,352. |
| 9 | Net income or (loss) from special events | <u> </u> | | | | |
| 10 | Gross profit or (loss) from sales of inventory | | | <u> </u> | | |
| | Other revenue | | | | | |
| _ |) | | | | | |
| | | 1 | | + | | |
| ì | : | | <u></u> | + | | |
| ì | d | | · · · · · | + + + | | |
| | Subtotal. Add columns (b), (d), and (e) | | | | 7,493. | -40,352. |
| | Total. Add line 12, columns (b), (d), and (e) | —————————————————————————————————————— | | <u> </u> | 13 | -32,859. |
| | worksheet in the instructions for line 13 to verify ca | alculations) | | | | |
| | worksheet in the instructions for line 13 to verify ca | | | | | |
| | | | hment of Evenu | at Purpose |) C | |
| Par | t XVI-B Relationship of Activities to the | Accomplis | | | | |
| Par | t XVI-B Relationship of Activities to the | Accomplis | | | | ly to the |
| Par | Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt | Accomplis | | | | ly to the he instructions) |
| Par | t XVI-B Relationship of Activities to the | Accomplis | | | | ly to the he instructions) |
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| Par | Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt | Accomplis | | | | ly to the he instructions) |
| Par | Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt | Accomplis | | | | ly to the he instructions) |
| Par | Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt | Accomplis | | | | ly to the he instructions) |

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

1 Did the organization directly or indirectly engage in any of the following with any other organization

| | relatir | ibed in section ig to political c | rganızatı | i the Code (o ions? | ther than section 5 | UI(c)(3) organiz | zations; |) or in | section | 527, | | | | |
|------------|-------------------|--|------------------------|------------------------------|---|---|---------------------|--|----------------------|----------------------------|----------------|---|-------------|----------|
| а | Trans | fers from the r | eporting | foundation to | a noncharitable ex | empt organizat | tion of | | | | | | , ` | |
| | (1) C | ash . | | | | | | | | | | 1a (1) | | X |
| | (2) O | ther assets | | | | | | | | | | 1a (2) | | X |
| b | Other | transactions: | | | | | | | | | | | | |
| | (1) S | ales of assets | to a none | charitable exe | mpt organization | | | | | | | 16(1) | | X |
| | (2) P | urchases of as | sets fron | n a noncharita | ble exempt organiz | zation | | | | | | 1 b (2) | | X |
| | (3) R | ental of facilitie | es, equip | ment, or othe | r assets | • | | | | | | 1 b (3) | | X |
| | (4) R | eımbursement | arranger | nents | | | | | | | | 1 b (4) | | X |
| | (5) Lo | oans or loan gi | uarantees | s | | | | | | | | 1 b (5) | | X |
| | (6) P | erformance of | services | or membersh | ip or fundraising so | olicitations | | | | | | 1 b (6) | | X |
| c | Sharıı | ng of facilities, | equipme | ent, mailing lis | its, other assets, or | r paid employee | es. | | | | | 1c | Ĺ, | <u> </u> |
| | the go any tr | oods, other ass | sets, or s | ervices aiven | complete the follow by the reporting for now in column (d) | undation If the | founda | ation i | received | less than | fair m | arket value in | ue of | |
| | ine no. | (b) Amount in | nvolved | (c) Name (| f noncharitable exempt | organization | (d) | Descri | ption of tra | nsfers, transa | actions, | and sharing arrai | ngement | ts |
| <u>N/A</u> | ١ | | | | | | | | | | | | | |
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| | | | | | | | | | | - | | | | |
| | descri If 'Yes | foundation dir ibed in section s,' complete th (a) Name of oi | 501(c) o e followir | f the Code (on g schedule | ated with, or relate ther than section 5 | d to, one or mo 01(c)(3)) or in s | ore tax- section | exem 527? | | | tion of | Yes | X | No |
| N/A | 1 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| co | mplete [| Declaration of prepa | arer (other the | have examined the | is return, including accon sciary) is based on all in | npanying schedules formation of which p | reparer h | ments, as any | and to the knowledge | <u> </u> | owledge | and belief, it is tru | e, corre | ect, and |
| SIGN | Signa | ure of officer or tru | ustee | - 13 | <i>h</i> | | Date | | | Title | · 1 | <u>-</u> | | |
| | aid | Preparer's signature | Gate | L Willia | mson | > | Date 5 | 16 | /10 | Check if self- employed | | Preparer's Identify (See Signature in N/A | | |
| 112 | rer's | Firm's name (or | GARY | L WILLIA | MSON CPA LLC | | | | | EIN ► | N/A | | | |
| U | se nly | yours if self- employed). | 4027 | | ESS DR SUITE | E 203 | | | | | | | | |
| | ··· · | address, and ZIP code | SHEBO | OYGAN, WI | 53081 | | | | | Phone no | > | (920) 78 <u>3</u> | <u>-073</u> | 33 |
| BAA | | | | | | | | | | · ——————— | | Form 99 | 0-PF (| (2009) |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

| Name of the organization | | Employer identification number |
|---|--|--|
| CASCELLA FAMILY CHARITAB | LE FOUNDATION | 20-7489472 |
| Organization type (check one) | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not tr 527 political organization | eated as a private foundation |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treate | ed as a private foundation |
| | 501(c)(3) taxable private foundation | |
| Check if your organization is covered be Note: Only a section 501(c)(7), (8), or | by the General Rule or a Special Rule . (10) organization can check boxes for both the General R | tule and a Special Rule. See instructions. |
| General Rule – X For an organization filing Form 990 contributor (Complete Parts I and |), 990-EZ, or 990-PF that received, during the year, \$5,00 II.) | 0 or more (in money or property) from any one |
| Special Rules - | | |
| 509(a)(1)/170(b)(1)(A)(vi) and received | n filing Form 990 or 990-EZ, that met the 33-1/3% suppor from any one contributor, during the year, a contribution of the line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and | greater of (1) \$5,000 or (2) 2% of the |
| aggregate contributions of more that | organization filing Form 990 or 990-EZ, that received fro an \$1,000 for use <i>exclusively</i> for religious, charitable, scie animals Complete Parts I, II, and III | m any one contributor, during the year, entific, literary, or educational purposes, or the |
| contributions for use exclusively for this box is checked, enter here the | organization filing Form 990 or 990-EZ, that received fro r religious, charitable, etc, purposes, but these contribution total contributions that were received during the year for ne parts unless the General Rule applies to this organizat | ons did not aggregate to more than \$1,000 If an exclusively religious, charitable, etc. |
| religious, charitable, etc, contribution | ons of \$5,000 or more during the year | ▶ \$ |
| 990-PF) but it must answer 'No' on Pai | overed by the General Rule and/or the Special Rules does rt IV, line 2 of their Form 990, or check the box on line H the filing requirements of Schedule B (Form 990, 990-E2 | of its Form 990-EZ, or on line 2 of its Form |
| BAA For Privacy Act and Paperwork for Form 990, 990EZ, or 990-PF. | Reduction Act Notice, see the Instructions | Schedule B (Form 990, 990-EZ, or 990-PF) (2009 |

| Schedule Name of org | B (Form 990, 990-EZ, or 990-PF) (2009) | Page 1 | of 1 of Part I |
|-------------------------|---|-----------------------------------|---|
| _ | LA FAMILY CHARITABLE FOUNDATION | 1 ' ' | 189472 |
| | Contributors (see instructions) | 1== | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | GUY & EVE CASCELLA 14 CLAYTON HILLS LN ST LOUIS, MO 63131 | \$70,098. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroil Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

of 1

of Part II

Name of organization

CASCELLA FAMILY CHARITABLE FOUNDATION

Employer identification number

<u>20-</u>7489472

| Pantille | Noncash | Property | (see | instructions.) | , |
|----------|---------|-----------------|------|----------------|---|
|----------|---------|-----------------|------|----------------|---|

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| | N/A | | |
| | | \$\$ | - |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$\$ | |
| RAA | | hedule B (Form 990, 990-F | 7 000 DE) (2000 |

BAA

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

(a) (b) (c) (d)
No. from Part I

Purpose of gift
Use of gift
Description of how gift is held

(e)
Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

BAA

| 2009 | 009 Federal Statements | | |
|--|--|--|--|
| CA | SCELLA FAMILY CHARITABLE FOUNDATION | 20-7489472 | |
| Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees | | | |
| TAX PREPARATION | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 500. \$ 375. \$ 0. Total \$ 500. \$ 375. \$ 0. | (d) Charitable Purposes 3 125. 5 125. | |
| Statement 2 Form 990-PF, Part I, Line 18 Taxes | | | |
| FEDERAL TAXES | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 265. Total \$ 0. | (d) Charitable Purposes 0. | |
| Statement 3 Form 990-PF, Part I, Line 23 Other Expenses | | | |
| BANK FEES | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 18. Total \$ 18. \$ 0. \$ 0. | (d) Charitable Purposes 0. | |
| Statement 4 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks | | | |
| Corporate Stocks | Valuation Book F | air Market Value | |
| 2000 AMBAC FINANCIAL GROUD 1000 CITIGROUP 1034.74736 KRAFT FOODS 1035.30522 HOME DEPOT 525 EMERSON ELECTRIC 202.15896 GOLDMAN SACHS GI 501.95053 JPMORGAN CHASE & 2000 POWER ENERGY SYSTEMS | Cost \$ 0. \$ Cost 0. Cost 32,239. Cost 29,381. Cost 17,861. ROUP Cost 17,488. | 0. 0. 28,124. 29,951. 22,366. 34,133. 20,916. 36,580. 172,070. | |

, .

2009

Federal Statements

Page 2

CASCELLA FAMILY CHARITABLE FOUNDATION

20-7489472

Statement 5 Form 990-PF, Part II, Line 13 Investments - Other

| | Valuation | Book | Fair Market | |
|--|---------------|-------------|-------------|--|
| | <u>Method</u> | Value | Value | |
| Other Securities | | | | |
| CAPITAL INCOME BUILDER EUROPACIFIC GROWTH FUND FUNDAMENTAL INVESTORS FUND GROWTH FUND OF AMERICA NEW PERSPECTIVE FUND WASHINGTON MUTUAL INVESTORS FUND | Cost | \$ 33,717. | \$ 24,919. | |
| | Cost | 50,616. | 45,869. | |
| | Cost | 48,042. | 42,780. | |
| | Cost | 47,610. | 42,775. | |
| | Cost | 51,292. | 45,747. | |
| | Cost | 49,090. | 39,478. | |
| | Total | \$ 280,367. | \$ 241,568. | |

Statement 6
Form 990-PF, Part XV, Line 1a
Foundation Managers - 2% or More Contributors

GUY CASCELLA EVE CASCELLA