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Form **990-PF**

Department of the Treasury

Internal Revenue Service (77)

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.

OMB No 1545-0052

	For	caler	idar year 2009, or tax yea	r beginning			, and e	nding		<u> </u>
Use the IRS Name of foundation A Employer identification number 23 - 7416312	G	Check	all that apply:				-	charity		n
Description of the part of the				Amended return		Address chan	ge		1	
Otherwise, E. M. BURGER MEMORTAL FOUNDATION pirit pi	Us	e the	IRS Name of foundation						A Employer identificatio	n number
point if yes. 32 19 H CHMAN 87 8e Specific Control of the control		label								
Set Specific Comparation (Comparation (Compa	Otl									
See Specific City of Jown, state, and ZIP code CALTFORNIA, NO 65018 H. Check type of organization: Station 501(c)(3) exempt private foundation Section 4947(e)(1) nonexempt chantable trust Check type of organization Section 501(c)(3) exempt private foundation		•	,		not delive	red to street address)		Hoom/suite	· '	124
Instructions CAUTIFORNIA, MO 65018 If Check type of organizations: (X Section 501(c)(3) exempt private foundation If Fair market value of all assets at end of year If Tair market value of all assets at end of year If Contributions, gifts, grants, etc., received Dividends and interest from securities If Dividends and interest from securities If Outdordon and interest from securit			355 JEOT J 111 GI							
H Check type of organization: Section 501(c)(3) exempt private foundation Fair market value of all assets at end of year J Accounting method: Class Accrual (from Part II, col. (c), ine 16) Class Accounting method: Class Class Accrual (from Part II, col. (c), ine 16) Class Class		-	ne City or town, state, ar		110					
Section 4947(a)(1) nonexempt charable trust		35 1								
Fair market value of all assets at end of year Accounting method: Cash Accrual Ifrom Part II, cot. (e), line 16) Other (speorly) Other (speor	H	_							check here and attach c	omputation P
Trong Part I, Cot. (c), lone 16								ual		
Name				and or year 3 Acc	`		LJ ACCI	uai		• •
Part Analysis of Revenue and Expenses (a) Revenue and expenses (b) Net investment (c) Adjusted net income (c) Adjusted net income (d) Descriptions (d) Expenses (d) Revenue and expenses per books (e) Revenue and expenses (e) Revenue and expenses per books (e) Revenue and expenses (e) Revenue and expenses per books (e) Revenue and expenses (e) Revenue and expenses (e) Revenue and expenses (e) Revenue and (e) Revenue and expenses (e) Revenue and (e) Revenu			ant II, coi. (c), line 10)	706 (Part I.	column	(d) must be on cash i	basis.)			
The bible of amounts in columns 6), 64, and (g) may not necessary speat the amounts in column (g). Income not colu	_	_ <u>`</u>	Analysis of Revenue and	d Expenses			_	veetment		
1 Contributions, giffs, grants, etc., received 2 Chee			The total of amounts in colur necessarily equal the amount	mns (b), (c), and (d) may	not					for charitable purposes
Check X Interventments Check X Interventments	_	1							N/A	
4 Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 1 A Net gain or (loss) from sale of assets not on line 10 2 B Net short-term capital gain 3 Income modifications 3 Cross sales where returns 4 Dividends and interest from securities 4 Net short-term capital gain 5 Income modifications 6 Cross sport or (loss) 1 Other income 1 Total, Add lines 1 through 11 2 Compensation of officers, decotors, trustees, etc 4 Other employee salaries and wages 5 Pension plans, employee benefits 16a Legal fees 5 Accounting fees 5 TMT 3 6 Other professional fees 1 Tinterst 18 Taxes 5 TMT 4 5 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and disbursements. Add lines 24 and 25 4 Total expenses and lines 12 8 Excess of revenue over expense and disbursements. Add lines 24 and 25 4 Total expenses and lines 12 8 Excess of r	9	L	Check X if the foundation	ıs not required to attach Sch	в					
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c Adjusted net income (if negative, enter -0-)		1	•		<u> </u>	44.				
		1					4	5,5 <u>45.</u>	37/3	
	9235	1 C				Martan and the task	*!		N/A	Form 000 DE (0000)

Add lines 1, 2, and 3
 Decreases not included in line 2 (itemize) ►
 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form **990-PF** (2009)

1,181,706.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) D	How ac - Purc - Don	equired hase ation	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)	
1a										
b NO	NE		<u>-</u>		ļ					
<u>C</u>	· · · ·	····			-					 -
<u>d</u>								_		
(e) Gross sales price		eciation allowed allowable)		t or other basis xpense of sale					ain or (loss) s (f) minus (
<u>a</u>										
<u>b</u>										
C										
d		<u> </u>								
Complete only for assets showing	a asının colu	mn (h) and owned by	the foundation	on 12/31/60) C==== (C	al (h) ao a	
Complete only for assets shown				cess of col. (1)				(k), but r	ol. (h) gaın ıot less thaı	n -0-) or
(i) F.M.V. as of 12/31/69		djusted basis of 12/31/69		col. (j), if any				Losses	(from col. (h))
a										
b				_						
C										
d										
e							1			
Capital gain net income or (net ca	inital loss)	If gain, also enter	n Part I, line	7	}	2				
Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):				-		-				
If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8					}	2				
Part V Qualification U	nder Sec	tion 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		
Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	lify under sect	ion 4940(e). Do not co or each year; see instri	mplete this pa	rt.	es.					Yes X No
(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dis		Net value of no		ritable-		(60% (5) 4171464 5) 60% (6)/		ided by col. (c))
2008			1,843.				0,931			.060836
2007			1,816.	 			2,769			.046732
2006			6,562.				6,149			.047287
2005 2004			7,166. 3,854.		<u>_</u>	<u>, 45</u>	5,044 2,159	•		.045549
2004	<u> </u>		3,034.			, 10	4,133	+ 1		•040340
2 Total of line 1, column (d)								2		.246744
3 Average distribution ratio for the	5-year base p	eriod - divide the total i	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	nce if less tha	n 5 years						3		.049349
4 Enter the net value of noncharitat	ole-use assets	for 2009 from Part X,	line 5					4		1,057,255
5 Multiply line 4 by line 3								5		52,174
6 Enter 1% of net investment incor	ne (1% of Par	t I, line 27b)						6		455
7 Add lines 5 and 6								7		52,629
8 Enter qualifying distributions from	· ·							8		44,007
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check	the box in Part VI, line	1b, and comp	lete that part usir	ng a 1	% tax	rate.			

923521 07-07-09

		M. BURGER ME								7416			Page 4
Pa	art VI Excise Tax B	Based on Investme	ent Income	(Section 4940)(a), 4	4940(b),	4940(e)	, or 4	948	- see i	nstru	ctio	าร)
1a	Exempt operating foundation	is described in section 494	0(d)(2), check h	ere 🕨 📖 and er	nter "N/A	A" on line 1)					
	Date of ruling or determination	on letter:	(attach	copy of letter if nec	essary-	-see instru	ctions)						-
b	b Domestic foundations that m	eet the section 4940(e) rec	quirements in Pa	rt V, check here 🕨	•	and enter	1%	}	1_			9	<u>11.</u>
	of Part I, line 27b												
C	All other domestic foundation						col. (b)	,					
2	Tax under section 511 (dome	estic section 4947(a)(1) tru	ists and taxable	foundations only. Ot	hers en	nter -0-)			2				0.
3									3			9	<u>11.</u>
4	Subtitle A (income) tax (domi			-	thers er	nter -0-)			4				0.
5	Tax based on investment inc	come. Subtract line 4 from	line 3. If zero or	less, enter -0-					5			9	<u>11.</u>
6	Credits/Payments:				1 _	I							
	a 2009 estimated tax payments	· ·	redited to 2009		6a		;	520.					
	Exempt foreign organizations		2020		6b	ļ							
	Tax paid with application for e	•	orm 8868)		6c	 		_					
	Backup withholding erroneou				6d	l						_	^ ^
_	Total credits and payments. A	•							7			5	20.
8	Enter any penalty for underpa				ched			_	8_	-			
9	Tax due. If the total of lines 5								9				91.
	Overpayment. If line 7 is mor		•	amount overpaid			1		10				
	Enter the amount of line 10 to art VII-A Statement						Refund	ed 🚩	11				
				atata an land land					_			Yes	No
ıa	During the tax year, did the fo	oundation attempt to influe	nce any national	, state, or local legisl	ation of	r did it part	icipate or ir	itervene	ın			162	
_	any political campaign?	during the year (oither dur	مرافع مسافع مسافع مسافع م	\	/			۰۱۵			1a		X
D	Did it spend more than \$100			•	-						1b_		_X_
	If the answer is "Yes" to 18			t the activities and	copie	s or any n	natenais p	ubiisne	a or				l
_	distributed by the foundat		ine activities										37
	Did the foundation file Form 1		. / 4055\								10		<u>X</u>
a	I Enter the amount (if any) of ta							0					l
_	(1) On the foundation. ► \$ Enter the reimbursement (if a			-			n foundatio	0.					l
Е	managers. > \$	0 •	during the year	ioi political expelioli	uie lax	i iiiposeu o	iii iuuliualii	ווע					l
2	Has the foundation engaged i		ot proviouely be	an reported to the ID	100						2		X
2	If "Yes," attach a detailed	-	-	en reported to the in	io!								
2	Has the foundation made any			S in ite agverning in	etrume	ant articles	of incorno	ration o					
٥	bylaws, or other similar instru					ciii, ai livics	or incorpo	ialivii, v	•		3		X
A a	Did the foundation have unrel										4a		X
	o If "Yes," has it filed a tax return			more during the year	•				N	/A	4b		
5				on during the year?					-1	,	5		X
•	If "Yes," attach the statem			• •									 _
6	Are the requirements of section	•			her:								
•	By language in the governir		· · · · · · · · · · · · · ·	,,									
	By state legislation that effe	-	ning instrument s	so that no mandatory	/ directi	ions that co	onflict with t	the state	law				
	remain in the governing ins		ū	·							6		Х
7	Did the foundation have at lea		time during the	year?							7	х	
	If "Yes," complete Part II,		ŭ										
8a	Enter the states to which the		which it is regist	tered (see instruction	ns) 🕨								
	MO	· 		<u> </u>									
b	If the answer is "Yes" to line 7	, has the foundation furnis	shed a copy of Fo	orm 990-PF to the At	torney	General (or	designate))					
	of each state as required by G				-	,	- •				8b	х	
9	is the foundation claiming sta	atus as a private operating	foundation withi	n the meaning of sec	ction 49	942(j)(3) or	4942(j)(5)	for cale	ndar				
	year 2009 or the taxable year										9		X
10	Did any persons become sub	stantial contributors during	g the tax year? if	"Yes," attach a schedul	e listing	their names	and addresse	s S	TMT		10	X	
										For	ո 990	-PF(2009)

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Form **990-PF** (2009)

Form 990-PF (2009) E.M. BURGER MEMORIAL FO	UNDATION		<u>23-74163</u>	12	Page 6		
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)				
5a During the year did the foundation pay or incur any amount to:	<u> </u>						
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	Y	s X No		1		
(2) Influence the outcome of any specific public election (see section 4955);							
any voter registration drive?	, ,, , .		es X No				
(3) Provide a grant to an individual for travel, study, or other similar purpose	262		es X No				
(4) Provide a grant to an individual for traver, study, or other similar purpose (4) Provide a grant to an organization other than a charitable, etc., organization			3 LZL 110				
• • • • • • • • • • • • • • • • • • • •		es X No					
509(a)(1), (2), or (3), or section 4940(d)(2)?			es Lal No	ļ			
(5) Provide for any purpose other than religious, charitable, scientific, literar	y, or educational purposes, or		[TT]	İ			
the prevention of cruelty to children or animals?			es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	·	in Regulations					
section 53.4945 or in a current notice regarding disaster assistance (see inst	ructions)?		N/A	<u>5b</u>	—		
Organizations relying on a current notice regarding disaster assistance check	here		▶□	i			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	ined						
expenditure responsibility for the grant?	1/A Y	es 🔲 No					
If "Yes," attach the statement required by Regulations section 53.49	45-5(d).			1			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on			İ			
a personal benefit contract?		Y	es X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		1	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	chalter transaction?		es X No		ŀ		
		. –	7b	+-			
Information About Officers Directors Touches Coundation Management Highly							
Part VIII Paid Employees, and Contractors	stees, roundation wis	inagers, migni	y				
List all officers, directors, trustees, foundation managers and their	r compensation						
List an officers, directors, a disters, foundation managers and the	-, 	(c) Compensation	(d) Contributions to	(a) F	Vnanca		
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	xpense int, other		
	to position	enter -0-)	compensation	allov	wances		
ROBERT E. KEIL	PRESIDENT						
205 KELLY		i					
CALIFORNIA, MO 65018	2.00	0.	0.	0			
MARY KEIL	_VICE-PRESIDEN	ήr					
205 KELLY							
CALIFORNIA, MO 65018	1.00	0.	0.		0.		
SARA ROHRBACH	SECRETARY						
114 PENNVIEW DR							
JAMESTOWN, MO 65046	0.00	0.	l o.		0.		
MARY KEIL	TREASURER						
205 KELLY							
CALIFORNIA, MO 65018	1.00	0.	0.		0.		
2 Compensation of five highest-paid employees (other than those in		 		<u> </u>			
2	(b) Title, and average	10112	(d) Contributions to	(e) F	xpense		
(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	accou	ınt, other		
	devoted to position		compensation	allov	wances		
NONE	_	i					
	<u> </u>						
	4		1				
		1					
	_						
	<u> </u>	<u> </u>		<u></u> _			
]	ļ			
Total number of other employees paid over \$50,000	<u></u>		<u> </u>		0		
1 0 total manufacture and annies and annies and annies and annies and annies an				OOA DI	<u>_</u>		

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Form 990-PF (2009) E.M. BURGER MEMORIAL FOUNDATION 23-	-7416	312 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶	(
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 DONATIONS ARE MADE TO PRE SELECTED 401C3 ORGANIZATIONS. (SEE		
ATTACHED LIST)	1	0.
2		
	-	
3	-	
	-	
4	_	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 ALL INVESTMENTS ARE MADE THROUGH AND HANDLED BY: MERRILL	_	
LYNCH & EDWARD D. JONES	-	0.
2	 	
All other program-related investments. See instructions. 3		
]	
Total. Add lines 1 through 3		0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	, see 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	1,074,212.
b	Average of monthly cash balances	1b	1,074,212. 769.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,074,981.
	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	1,074,981.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 9	4	17,726.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,057,255.
6	Minimum investment return. Enter 5% of line 5	6	52,863.
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.)	id certain	
1	Minimum investment return from Part X, line 6	1	52,863.
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	911.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	51,952.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	51,952.
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	51,952.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>44,007.</u> 0.
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	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	44,007.
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	44,007.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	or the section

Form **990-PF** (2009)

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				51,952.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		404		
		494.	-	
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007 e From 2008 11,344.				
	11,344.			
f Total of lines 3a through e	11,344.	-		
4 Qualifying distributions for 2009 from Part XII, line 4: ►\$ 44,007.				
Part XII, line 4: \blacktriangleright \$ 44,007. a Applied to 2008, but not more than line 2a			0.	
			<u>U.</u>	
b Applied to undistributed income of prior years (Election required - see instructions) *		494.		
c Treated as distributions out of corpus		474.		
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				43,513.
e Remaining amount distributed out of corpus	0.		<u></u>	43,313.
5 Excess distributions carryover applied to 2009	8,439.			8,439.
(If an amount appears in column (d), the same amount must be shown in column (a))	0/2331			<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,905.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	<u>.</u>	
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	<u></u>			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.	2 005			
Subtract lines 7 and 8 from line 6a	2,905.			<u></u>
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006 c Excess from 2007				
d Excess from 2008 2,905.				
e Excess from 2009				
# CEE COMMENSION 10	· <u>-</u>			Farm 000 DE (0000)

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Part XIV Private Operating Fo	RGER MEMORI				-/416312 Page 10
			H-A, question 9)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for		, , ,			
b Check box to indicate whether the found	•	=	un contron	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig roundation described	Prior 3 years	4942(J)(3) UI	4942(J)(5)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	(4) 2000	(8) 2000	(0) 2001	(4)2000	- (0) 10.001
each year listed					
b 85% of line 2a			 		
- · · · · · · · ·			· · ·	 -	
c Qualifying distributions from Part XII,					
line 4 for each year listed d Amounts included in line 2c not			 		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			 		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
"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				1 1 1 2 2 2 2 2	
Part XV Supplementary Info			if the foundatio	n had \$5,000 d	or more in assets
at any time during t		instructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed m			tributions received by th	ne foundation before	the close of any tax
, , , , ,	ore than 40,000). (Occ 3	(4)(2).)			
NONE	400/		/		
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large por	tion of the ownership	or a partnership or
NONE	a 1070 or ground miles				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. D	rograme:		
Check here ► X if the foundation o				s not accept unsolicite	ed requests for funds. If
the foundation makes gifts, grants, etc. (•	•	•	•	•
a The name, address, and telephone numb	per of the person to who	m applications should be	e addressed:		
MARY KEIL	, , , , , , , , , , , , , , , , , , ,				
205 KELLY, CALIFORNI	A, MO 65018				
b The form in which applications should b NO SET FORM			should include:		
c Any submission deadlines:		-		<u> </u>	
NONE		-1		-11 / -	
d Any restrictions or limitations on awards ANY 401C3 ORGANIZATI		ai areas, charitable fields	, KINGS OF INSTITUTIONS, O	r other factors:	
	-				
923601 07-07-09		1.0			Form 990-PF (2009)
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Part XV Supplementary Informati			· · · · · · · · · · · · · · · · · · ·	
3 Grants and Contributions Paid During the	e Year or Approved for Future F	Payment		
Recipient 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 community	rooipiani		
•				
SEE STATEMENT 11				
Total			▶ 3a	44,007
b Approved for future payment				
NONE				
		:		
Total			▶ 3b	C
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Part XVI-A Analysis of Income-Producing Activiti	Part XVI-A	Analysis of Income-Prod	lucing Activitie
--	------------	-------------------------	------------------

Enter gross amounts upless atherwas industed	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(2)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	- (e) Related or exempt function income
a	Code		0000		
b	-				
С					
d					
e	i 1				
f					
g Fees and contracts from government agencies		· _			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	ļ				
4 Dividends and interest from securities					45,545.
5 Net rental income or (loss) from real estate:					
a Debt-financed property	1				
b Not debt-financed property	1				
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	i i				
than inventory	 - 				
9 Net income or (loss) from special events	+				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					127.
a <u>LITIGATION</u>					12/.
b	I I				
C					
d					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	45,672.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u>.</u>		13	
(See worksheet in line 13 instructions to verify calculations.)					4370721
	ha Aba Aasa	liahmant of Fu		4 D	
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	•	• •	contrit	outed importantly to the accor	mplishment of
4 DIVIDENDS AND INTEREST					
INCOME FROM THESE SOUR		THE PRIMARY	_ <u>S0</u>	URCE OF FUNDS	USED FOR
CHARITABLE CONTRIBUTIO	<u>ns</u>				
	-				
					
					<u> </u>
					
					· -
					
					
			_		
					·

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

1	Did tl	ne organization directly or indi	rectly engage in any of the followin	g with any other organization	n described in section 501(c) of		Yes	No
)(3) organizations) or in section 52	•	• •			
1			ation to a noncharitable exempt or					
	(1)	Cash	·			1a(1)		X
	(2)	Other assets				1a(2)		X
I	Other	transactions;						
	(1) 3	Sales of assets to a noncharital	ble exempt organization			1b(1)		X
			ncharitable exempt organization			1b(2)		X
	(3)	Rental of facilities, equipment,	or other assets			1b(3)		X
	(4) F	Reimbursement arrangements				1b(4)		X
	(5) l	oans or loan guarantees				1b(5)		X
	(6) F	Performance of services or me	mbership or fundraising solicitatio	ns		1b(6)		<u> </u>
(Sharı	ng of facilities, equipment, ma	ılıng lists, other assets, or paid em	ployees		1c		X
(ays show the fair market value of the goods, of		ets,	
	or se	rvices given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	e in any transaction or sharing arrangement, sh	iow in		
_	colur		other assets, or services received.					
a)	Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and sl	naring arr	angeme	nts
_			N/A					
_								
_								
_				 				
_			 					
_								
_			<u></u>					
_								
_								
_								
28		-	tly affiliated with, or related to, one	· -	ations described	٦.,	T	٦.,
		• •	r than section 501(c)(3)) or in sect	ION 527?	<u> </u>	Yes	Λ	No
	it "Ye	s," complete the following sche		(b) Type of organization	(c) Description of relationsh		_	
_		(a) Name of org	allization	(b) Type of organization	(c) Description of relationsin	.h		
		N/A						
_				_				
_								
_								
٦	Under	penalties of perjury_l declare that I h	ave examined this return, including acco	mpanying schedules and stateme	ents, and to the best of my knowledge and belief, it is tr	ue, corre	ct,	
	and cor	nplete Declaration of preparer (other	r than taxpaver or fiduciary) is based on	all information of which preparer h	nas any knowledge			
		Kabut	z Ceil	1/25/10	Lusi dent			
ē,	\overline{s}	gnature of officer or trustee		Date	Title			
Ĕ		Preparer's	\bigcap	Da Da	ate Original	s identify	ing num	ber
ě	. ેં	signature	m Inlanck I by	<i>Cl</i> /# lo1	1/25/10 self- employed ▶ □			
ני	Paid Preparer's Use Only	Firm's name (or yours BUEH	LER BATES ASSOC	IATES PC	EIN ►			
	rep Jse	if self-employed). 3628.	A WEST TRUMAN B					
	ر 4	address, and ZIP code JEFF		65109	Phone no. (573)	89	3-4	991
				<u>,</u>		m 990		
							,	,

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						_
OS AND	INTER	EST FROM	SECU	JRITIES	STATEMENT	1
	GROSS	AMOUNT			COLUMN (A AMOUNT)
_		45,545.		0.	45,5	45.
LN 4 =		45,545.		0.	45,5	45.
0'	THER I	NCOME			STATEMENT	2
	;	· · · · · · · · · · · · · · · · · · ·				
		-	127.	0	•	
, LINE	11	-	127.	0	•	
AC	COUNTI	NG FEES			STATEMENT	3
EXPE	NSES	NET INVI	EST-			
:	1,095.	-	0.	,		0.
	1,095.		0 .			0.
<u> </u>	TAX	ES			STATEMENT	4
EXPE	NSES			(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	BLE
PER I	BOOKS	MENT INC	COME	MET INCOM	a FORFOS	ES
PER 1	526.	MENT INC	OME 	<u> </u>		0.
	LINE ACC EXPENDED PER (I	GROSS OTHER II OTHER II ACCOUNTII (A) EXPENSES PER BOOKS 1,095. 1,095. TAX (A) EXPENSES	GROSS AMOUNT 45,545. AT 45,545. OTHER INCOME (A) REVENUE PER BOOK ACCOUNTING FEES (A) EXPENSES NET INV. PER BOOKS MENT INC. 1,095. 1,095. TAXES (A) (B) EXPENSES NET INV. ACCOUNTING FEES (A) EXPENSES NET INV. ACCOUNTING FEES (B) EXPENSES NET INV. ACCOUNTING FEES (A) EXPENSES NET INV. ACCOUNTING FEES (B) EXPENSES NET INV. TAXES	GROSS AMOUNT 1 45,545. OTHER INCOME (A) REVENUE PER BOOKS 127. ACCOUNTING FEES (A) EXPENSES NET INVEST- PER BOOKS MENT INCOME 1,095. 0. TAXES (A) (B) TAXES	A5,545. 0. OTHER INCOME (A) (B) NET INVEST-PER BOOKS MENT INCOME 127. 0 ACCOUNTING FEES (A) (B) (C) ADJUSTED PER BOOKS MENT INCOME NET INCOME 1,095. 0. 1,095. 0. TAXES (A) (B) (C) ADJUSTED NET INCOME NET INCOME 1,095. 0.	GROSS AMOUNT 45,545. 0. 45,5 0. 45,5 OTHER INCOME STATEMENT (A) REVENUE PER BOOKS MENT INCOME ACCOUNTING FEES ACCOUNTING FEES STATEMENT (A) (B) (C) NET INVEST- MENT INCOME NET INCOME 127. 0. ACCOUNTING FEES STATEMENT (A) (B) (C) (C) D) EXPENSES NET INVEST- PER BOOKS MENT INCOME 1,095. 0. TAXES STATEMENT (A) (B) (C) (D) CHARITA PURPOS 1,095. 0. TAXES STATEMENT

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS	·	1.	1.
TOTAL TO FORM 990-PF, I	ART II, LINE 10B	1.	1.
FORM 990-PF	CORPORATE BONDS		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS	•	183,614.	183,614.
TOTAL TO FORM 990-PF, E	ART II, LINE 10C	183,614.	183,614.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENTS	COST	996,688.	996,688.
TOTAL TO FORM 990-PF, I	ART II, LINE 13	996,688.	996,688.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

8

NAME OF CONTRIBUTOR

ADDRESS

BURGERS OZARK COUNTRY CURED HAMS

RR #3

CALIFORNIA, MO 65018

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT STATEMENT PART X, LINE 4

CASH IS USED TO MAKE DONATIONS TO 501 (C)(3) CORPORATIONS DURING THE TAX YEAR.

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO APPLY EXCESS QUALIFYING DISTRIBUTIONS TO PRIOR YEAR'S UNDISTRIBUTED INCOME STATEMENT 10

E.M BURGER MEMORIAL FOUDNATION, A PRIVATE FOUNDATION IS MAKING AN ELECTION UNDER SUBPARAGRAPH 53.4942(A)-3(D)(2) THAT IN 2009 THE QUALIFYING DISTRIBUTIONS FROM 2009 FIRST BE BE APPLIED TO UNDISTRIBUTED INCOME OF YEARS PRIOR TO 2008 IN THE AMOUNT OF \$484. THIS AMOUNT WILL REDUCE THE AMOUNT OF THE 2009 DISTRIBUTIONS AND WILL REQUIRE USE OF 2008 EXCESS CONTRIBUTIONS CARRYOVER IN 2009.

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FORM 990-PF GI		AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT	11
RECIPIENT NAME AND ADDRESS		RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUN	1T
JACKET FACTORY ROAD EXCHANGE CITY OF CALIFORNIA CALIFORNIA CITY HALL CALIFORNIA, MO 65018	E -			10,00	00.
BOY SCOUTS OF AMERICA 1203 FAY STREET COLUMBIA, N 65201	MO			25	50.
CALIFORNIA ELEMENTARY SCHOOL CALIFORNIA, MO 65018	L			25	50.
CALIFORNIA R-1 HIGH SCHOOL HIGHWAY 50 WEST CALIFORNIA 65018	, MO			4,50	0.
MONITEAU COUNTY HISTORICAL SOCIETY CALIFORNIA, MO 65018				50	00.
CALIFORNIA LADY PINTO BASKET CALIFORNIA, MO 65018	TBALL			5	50.
CALIFORNIA MIDDLE SCHOOL CALIFORNIA, MO 65018				1,75	50.
CALIFORNIA MINISTERIAL ALLIZ CALIFORNIA, MO 65018	ANCE			50	00.

T M DUDGED MEMODIAL ECONDAMION	02 7416212
E.M. BURGER MEMORIAL FOUNDATION CALIFORNIA VFW POST 4345 CALIFORNIA, MO 65018	300.
CALIFORNIA PROGRESS CALIFORNIA, MO 65018	2,500.
BOY SCOUT TROOP 120 CALIFORNIA, MO 65018	200.
CALIFORNIA R-1 PERFORMING ARTS CENTER C/O JANET GERHART CALIFORNIA, MO 65018	9,500.
MONITEAU COUNTY SHERIFF DEPT CALIFORNIA, MO 65018	100.
CALIFORNIA RECREATION SWIM TEAM CALIFORNIA, MO 65018	250.
CALIFORNIA RURAL FIRE DEPARTMENT CALIFORNIA, MO 65018	500.
CALIFORNIA UCC GENERAL FUND 101 N. OAK STREET CALIFORNIA, MO 65018	4,000.
CALIFORNIA UNITED CHURCH OF CHRIST SENIOR YOUTH GROUP CALIFORNIA, MO 65018	100.
CALIFORNIA UNITED CHURCH OF CHRIST JUNIOR YOUTH GROUP CALIFORNIA, MO 65018	100.

E.M. BURGER MEMORIAL FOUNDATION	23-7416312
AMERICAN LEGION (DEPT OF MISSOURI) STATE CONVENTION PROG P.O. BOX 6676 JEFFERSON CITY, MO 65102	57.
CHILDRENS MIRACLE NETWORK UNIV. HOSPITALS AND CLINICS COLUMBIA, MO 65201	500.
CHURCH OF CHRIST CALIFORNIA, MO 65018	250.
CURE FOR JAYLYN P.O. BOX 5 TUSCUMBIA, MO 65082	100.
CROP (UNITED CHURCH OF CHRIST) CALIFORNIA, MO 65018	200.
GIRL SCOUTS OF MISSOURI HEARTLAND 230 METRO DRIVE JEFFERSON CITY, MO 65109	250.
JEFF CITY FIRLEY YMCA C/O SHARON KIRCHOFF, 2412 LAKEWOOD RD JEFFERSON CITY, MO 65109-9119	50.
JAMESTOWN SWIMMING POOL JAMESTOWN, MO 65046	500.
JAMESTOWN SUMMER RECREATION JAMESTOWN, MO 65046	100.
JOSHUA A FLETCHER SCHOLARSHIP FUND 34213 SURPRISE ROAD CALIFORNIA, MO 65018	3,000.

E.M. BURGER MEMORIAL FOUNDATION	23-7416312
MISSOURI SCHOOL OF RELIGION P.O. BOX 104145 JEFFERSON CITY, MO 65109	250.
MONITEAU COUNTY 4-H C/O ELAINE ADERSON 57301 LAKE IMHOFF RD CALIFORNIA, MO 65018	250.
MONITEAU COUNTY CANCER SOCIETY BOX 333 LATHAM, MO 65050	250.
MONITEAU COUNTY NUTRITION CENTER CALIFORNIA, MO 65018	250.
MUSCULAR DYSTROPHY ASSOC P.O. BOX 1867 COLUMBIA, MO 65205	200.
NATIONAL FIRE SAFETY PROGRAM CALIFORNIA FIRE DEPARTMENT CALIFORNIA, MO 65018	100.
NATIONAL MULTIPLY SCLEROSIS SOCIETY GATEWAY LACKLAND HILL PARKWAY ST LOUIS, MO 63146	50.
PROJECT GRADUATION CALIFORNIA HIGH SCHOOL CALIFORNIA, MO 65018	500.
RAPE AND ABUSE CRISIS SERVICES P.O. BOX 416 JEFFERSON CITY, MO 65101	1,000.
RONALD MCDONALD HOUSE 1001 STADIUM ROAD COLUMBIA, MO 65201	300.

E.M. BURG	ER MEMORIAL	FOUNDATION
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23-7416312

ST. JOHN'S UNITED CHURCH OF CHRIST 517 JACKSON STREET ST CHARLES,

MO 63301

TOTAL TO FORM 990-PF, PART XV, LINE 3A

44,007.

500.