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Form **990-PF**

Return of Private Foundation

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

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

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service and ending For calendar year 2009, or tax year beginning Final return G Check all that apply. Initial return Initial return of a former public charity Address change Name change Amended return A Employer identification number Name of foundation Use the IRS label. Otherwise Keltner Family Foundation 26-1579182 Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. (310) 434-9866 P.O. Box 2030 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions D 1 Foreign organizations, check here Silverthorne, CO 80498 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) F If the foundation is in a 60-month termination 2,003,909. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income income (cash basis only) N/A Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 25,478 25,478 Statement 73,379. 73,379 Statement 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 0. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 392,952. 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain NUL 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 98,857 98,857. 12 Total, Add lines 1 through 11 0. 0 О. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Ō. 1,678. 1,678 16a Legal fees Stmt 3 $\overline{0}$ 2,164. 2.164. Stmt 4 **b** Accounting fees c Other professional fees 17 Interest 428. 0. Stmt 5 428. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 0. 6,124. 6,124. 23 Other expenses Stmt 6 24 Total operating and administrative 10,394 0. 10,394 expenses. Add lines 13 through 23 79,200. 79,200 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 79,200. 89,594 10,394 Add lines 24 and 25 27 Subtract line 26 from line 12: 9,263 a Excess of revenue over expenses and disbursements 88,463. b Net investment income (if negative, enter -0-)

N/A

Form **990-PF** (2009)

C Adjusted net income (if negative, enter -0-)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

Part II Balance Sheets Attached schedules and amounts in the description		Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year	
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	12,550.	4,080.	4,080.	
	2	Savings and temporary cash investments	1,406,470.	278,920.	278,920.	
	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	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
ģ	8	Inventories for sale or use	_			
Assets		Prepaid expenses and deferred charges				
As		Investments - U.S. and state government obligations Stmt 7	0.	1,046,080.	1,046,080.	
		Investments - corporate stock Stmt 8	600,000.	0.	0.	
		Investments - corporate bonds	,			
		Investments - land, buildings, and equipment basis			 	
	· ·	Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other Stmt 9	0.	674,829.	674,829.	
		Land, buildings, and equipment: basis				
	'	Less accumulated depreciation		İ		
	15	Other assets (describe				
	'	Other assets (describe >		-		
	16	Total assets (to be completed by all filers)	2,019,020.	2,003,909.	2,003,909.	
_		Accounts payable and accrued expenses		2700073031	2/000/000	
		Grants payable	· ·			
,	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		-		
Ē	21	Mortgages and other notes payable				
Ë		Other liabilities (describe)				
	"	Other habilities (describe				
	,,	Total liabilities (add lines 17 through 22)	0.	0.		
_	23	Foundations that follow SFAS 117, check here		<u> </u>		
		and complete lines 24 through 26 and lines 30 and 31.				
es	24	Unrestricted				
Š	25					
Sala		Temporarily restricted				
Fund Balance	20	Permanently restricted Foundations that do not follow SFAS 117, check here				
Ē	ļ	and complete lines 27 through 31.				
ò	27	Capital stock, trust principal, or current funds	0.	0.		
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
ISS	l	Retained earnings, accumulated income, endowment, or other funds	2,019,020.	2,003,909.		
et/	30	Total net assets or fund balances	2,019,020.	2,003,909.		
Z	30	Total list assets of fully balances	2,015,020	2,003,303.		
	31	Total liabilities and net assets/fund balances	2,019,020.	2,003,909.		
=						
P	<u>art</u>	Analysis of Changes in Net Assets or Fund B	alances			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30			
•		st agree with end-of-year figure reported on prior year's return)	1	2,019,020.		
2		r amount from Part I, line 27a		2	2,019,020. 9,263.	
		r increases not included in line 2 (itemize)		3	0.	
		lines 1, 2, and 3		4	2,028,283.	
		eases not included in line 2 (itemize) Unrealized Dec	rease in Inve		24,374.	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	2,003,909.	
		The second of th	- A-B min	, ,	Form 990-PF (2009)	

(a) List and desci	ribe the kind(s) of property sold (e irehouse; or common stock, 200 s	e.g., real estate,	- Income	(b) Ho P - F D - I	w acquired Purchase Donation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a								
See Attached	Statement							· · · · · · · · · · · · · · · · · · ·
С				ļ				
d	<u></u>			<u> </u>				
е		-=-		Ц,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				in or (loss) (f) minus (
a	·							
b								
С								
d			200 05					
e 392,952.	<u> </u>		392,95	2.				
Complete only for assets showing	ng gain in column (h) and owned b	_					ol. (h) gaın ıot less thaı	
(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				(from col. (
a	•							
b	· -							
c								
d								
e								
2 Capital gain net income or (net ca	If gain, also en	iter in Part I, line -0- in Part I, line	7	}	2			0.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5)			٦ſ				-
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).				3		N/A	
Part V Qualification U	Inder Section 4940(e) f	or Reduced	Tax on Net	Inve	stment Inc	come		
If section 4940(d)(2) applies, leave the was the foundation liable for the sec if "Yes," the foundation does not qua	tion 4942 tax on the distributable	complete this pa	art.					Yes X No
1 Enter the appropriate amount in	each column for each year, see in	structions before	making any entri	es.				(4)
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying		Net value of no		able-use assets		Dıstrıl (col. (b) dıv	oution ratio rided by col. (c))
2008		27,547.		<u>-</u>	974,046			.013955
2007		0.		1,	971,720).		.000000
2006								
2005								
2004		_				4		
2 Total of line 1, column (d)						2		.013955
3 Average distribution ratio for the the foundation has been in existe	•	tal on line 2 by 5,	or by the number	r of yeaı	S	3		.006978
4 Enter the net value of noncharital	ble-use assets for 2009 from Part	X. line 5				4		1,980,924
	500 400 40000 101 2000 1101111 411	7,						13,823
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)					6		885
7 Add lines 5 and 6						7		14,708
8 Enter qualifying distributions from	m Part XII, line 4					8		79,200
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, I	ine 1b, and com	plete that part usir	ng a 1%	tax rate			
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	Hereit Land Land Land Land Land Land Land Land				
Pá	art VII-A Statements Regarding Activities (continued)				
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		X
12					
	August 17, 2008?		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ The Foundation Telephone no. ▶	(310)	434	-98	66
	Located at ▶ P.O. Box 2030, Silverthorne, CO	ZIP+4 ▶80	498		
15	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	
Pa	art VII-B 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.			Yes	No
1:	a 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?	s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	s 🗓 No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	s 🗶 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	s 🗶 No			
	(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)?	s X No			
	(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.)	s 🗶 No			
	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 page 20 of the instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
	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
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)):				
	a 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?	s X No			
	If "Yes," list the years		ļ		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions.)	N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	s X No			
	b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons afti	er			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to di	spose			
	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.)	N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	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 leopardy before the first day of the tax year beginning in 2009?		4b	1	Х

orm-990-PF(2009) Keltner Family Foundation	<u>1</u>		<u> 26-1579:</u>	L82_	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire				İ
any voter registration drive?			s X No	i	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		i		
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 fo	or		1	
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described in	n Regulations			ļ
section 53.4945 or in a current notice regarding disaster assistance (see instruc		·	N/A	5b	ľ
Organizations relying on a current notice regarding disaster assistance check hi					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			-
expenditure responsibility for the grant?		/A Ye	s No		ļ
If "Yes," attach the statement required by Regulations section 53 4945				1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p			ļ		
a personal benefit contract?	a, promisino en	v _a	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal henefit contract?			6ь	x
If "Yes" to 6b, file Form 8870	5/30/lai pelletit contract.		ŀ	+	
7a At any time during the tax year, was the foundation a party to a prohibited tax si	haltar transaction?		s X No	i	
			N/A	7b	
b If yes, did the foundation receive any proceeds or have any net income attribute Boot VIII Information About Officers, Directors, Trusto		nagare Highly		70	
Paid Employees, and Contractors			,	_	
List all officers, directors, trustees, foundation managers and their		L () Companyation	(4)	1 .	\ F
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	e (e	e) Expense count, other
(a) Numb distribution	to position	(If not paid, enter -0-)	compensation	a	llowances
					_
See Statement 10		0.	0	•	0.
				1	
			,		
				l	
	-				
				İ	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
A bloom and address of each amplayer paid mare than \$50,000	(b) Title, and average hours per week	(-) Componentian	(d) Contributions to employee benefit plan and deferred	, (e	Expense count, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	a	llowances
NONE					
			ļ		
		-		+	
			· · · · · · · · · · · · · · · · · · ·	+	.
		 	<u> </u>	+	
			1		
Cotal number of other employees paid over \$50,000	<u> </u>	<u> </u>	<u> </u>		0

923551 02-02-10

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	er "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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	etical information such as the	·
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expenses
27/2		
1N/A		
2	_	
		
3		
4		
D. A. IV D. I.		
Part IX-B Summary of Program-Related Investments	- Lucada - da	A
Describe the two largest program-related investments made by the foundation during the tax year o	n lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,160,080. a Average monthly fair market value of securities 851,010. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 1d 2,011,090. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 2,011,090. 3 Subtract line 2 from line 1d 30,166. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 1,980,924. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 99,046. Minimum investment return Enter 5% of line 5 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.) 99,046. Minimum investment return from Part X, line 6 1 885 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.) 2b 885. c Add lines 2a and 2b 98,161. Distributable amount before adjustments. Subtract line 2c from line 1 3 Ō. Recoveries of amounts treated as qualifying distributions 4 98.161. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 0. 6 98,161. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 79,200. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b b Cash distribution test (attach the required schedule) 79,200. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 885. income. Enter 1% of Part I, line 27b 5 78,315. Adjusted qualifying distributions Subtract line 5 from line 4 6 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

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,	·	· · · · · · · · · · · · · · · · · · ·		0.9 1.61
line 7				98,161.
2 Undistributed income, if any, as of the end of 2009			79,128.	
a Enter amount for 2008 only b Total for prior years:			77,120.	
g rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ▶\$ 79,200.				
a Applied to 2008, but not more than line 2a			79,128.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				72.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			•
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable			-	
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010		·		98,089.
7 Amounts treated as distributions out of				i
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		·	
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.		·	
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009			<u> </u>	5 000 DE (0000)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	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	Purpose of grant or contribution	Amount
<u></u>	or substantial contributor	recipient		
a Paid during the year Higher Ground			General	5,000.
Aspen Green Music Festival			General	200.
The Summit Foundation			General	73,000.
Three Peaks Scholarship			Scholarships	1,000.
Fund			_	·
Total	T	1	▶ 3a	79,200.
b Approved for future payment				
None				
Total			▶ 3b	0.
923611 02-02-10				rm 990-PF (2009)

Part XVI-A	Analysis	of Income	-Producing	Activities

nter gross amounts unless otherwise indicated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
·	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c	-				· ···
d	-				
e	-				
f	-				
g Fees and contracts from government agencies					
Membership dues and assessments			-+		
Interest on savings and temporary cash	1		14	25 478	
investments Dividends and interest from securities	-		14	25,478. 73,379.	
6 Net rental income or (loss) from real estate:		· -	1 1	73,373.	
a Debt-financed property			+ +		
b Not debt-financed property					
6 Net rental income or (loss) from personal		-			
property					
7 Other investment income				-	
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
c					
d	_				
e	_			00.055	
2 Subtotal Add columns (b), (d), and (e)			0.	98,857.	(
3 Total Add line 12, columns (b), (d), and (e)				13	98,857
See worksheet in line 13 instructions to verify calculations.)		- · · · · · · · · · · · · · · · · · · ·			
Part XVI-B Relationship of Activities	to the Accon	nplishment of	Exempt P	urposes	
ine No. Explain below how each activity for which in	come is reported in a	olumn (e) of Part X\	/I-A contribute	d importantly to the accomi	alishment of

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
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923621 02-02-10	Form 990-PF (2009)

1 Did the organization dereitly or indirectly engage in any of the following with any other organization described on section 50 k(c) of the Code (other than section 50 k(c)) organizations or in section 527 elements as each of 50 k(c) of section 50 k(c) of section 50 k(c) of section 50 k(c) organizations or in section 50 k(c) organizations or in section 50 k(c) organizations or in section 50 k(c) organizations or in section 50 k(c) organizations (2) Purchases of assets to an anoncharitable exempt organization (2) Purchases of assets to non anoncharitable exempt organization (2) Purchases of assets to non anoncharitable exempt organization (2) Purchases of assets to non anoncharitable exempt organization (3) Renal of foraing juranties (4) Renal or foraing juranties (4) kinds of the section 50 k(c) kinds or foraing juranties (5) kinds or foraing juranties (6) kinds or services growers or mambership or fundament solicitations (6) kinds of the section 50 k(c) kinds or services processed. 2a It the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (a) the value of the goods, other assets, or services received. (a) Livus no (b) Amount involved (c) Name of noncharitable exempt organization (b) Properties of translate. In the section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in section 50 k(c) k) or in sec			Exempt Organ	izations					
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes						<u> </u>			
b If 'Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer four final tayoner or fiduciary) is based on all information of which preparer has an knowledge Signature Date Preparer's Signature Firm's name (or yours if based cial Strategy Group PLC if self-employed). Available Firm's name (or yours if self-employed). Address, and ZIP code Memphis, TN 38117	28			•	• •	izations described			_
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Under penalties of perjury. I declare than have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer of induciary) is based on all information of which preparer has any knowledge Signature of officer or trustee Date Title) If "Ye				T			
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and complete Declaration of preparer following laxpayer or fiduciary) is based on all information of which preparer has any knowledge Signature of officer or trustee Date Title			N/A						
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Signature of officer or trustee Signature Signature Date Title		Under p	enalties of perjury, I declare that the	ave examined this return, including acc	companying schedules and stater	ments, and to the best of my knowledge and belief, it is	true, com	ect,	
Signature of officer or trustee Date Title Preparer's Signature Preparer's Signature Preparer's Signature Firm's name (or yours It sett-employed), address, and ZIP code Memphis, TN 38117 Title Date Title Check if Self-employed Firm's name (or yours It sett-employed), address, and ZIP code Phone no. (901) 763-3335		and oon	nplate beclaration of preparer foth	r than taxpayer or fiduciary) is based of	n all information of which prepare	r has any knowledge			
Firm's name (or yours findancial Strategy Group PLC first-employed). address, and ZIP code Memphis, TN 38117 Find and Cial Strategy Group PLC EIN ► Upon Request	1 Jana & With - Washing Herry Possible							_	
Firm's name (or yours findancial Strategy Group PLC first-employed). address, and ZIP code Memphis, TN 38117 Find and Cial Strategy Group PLC EIN ► Upon Request	ere								
Firm's name (or yours findancial Strategy Group PLC first-employed). address, and ZIP code Memphis, TN 38117 Find and Cial Strategy Group PLC EIN ► Upon Request	Ĭ		Preparer's	2004	<u>'</u>		er's identi	lying nur	nber
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address, and ZIP code Memphis, TN 3811/ Phone no. (901) 763-3335	(V)	e a o	- USTA	ocial Strategy	Group PLC				
address, and ZIP code Memphis, TN 3811/ Phone no. (901) 763-3335		P e s	Titli Silanic (O) Youls			LIN P OPOIL ICE	- ~ ~ ~		
		ر ته	address, and ZIP code	his TN 38117	54100 110	Phone no (QN1) 76	3 <u>-</u> 3	335
			remp	111 3011/					

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U.S. Treasury Department

U.S. Treasury Department

EIN: 26-1579182 2009 Form 8868 (990PE) Keltner Family Foundation

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Financial Strategy Group, PLC 05/17/2010 U.S. Treasury Department

Keltner Family Foundation Extension

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Independent - Checki Keltner Family Foundation

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Part IV Capita		sses for Tax on Investment Income			,	
	2-story br	describe the kind(s) of property sold lick warehouse, or common stock, 20	d, e.g , real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Nuveen M				P	01/08/08	
b Nuveen N			es	P	01/07/08	
	0,000 s			P	07/13/09	
d Fedl Nat	l Mtg .	Assn Pool #74527	5	P		Various
		Assn Pool #88998	2	P		Various
f Fedl Nat	:1 Mtg	Assn Pool #99587	6	P	Various	Various
g						
h						
<u> </u>		<u></u>		_		
					ļ	
					-	
<u>m</u>						
n				. 		
0		(A) Description of House	(a) Coat or other have	//-	Com or (loss)	
(e) Gross sale	es price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
	25,000.	(5. 2.0	25,000.	(0))	- (,	0.
a 27	75,000.		275,000.			0.
C	9,176.		9,176.			0.
	10,302.		10,302.			0.
	16,512.		16,512.			0.
	56,962.		56,962.			0.
g	,					
h				-		
1						_
1					_	
k						
1						
m						
n						
0						
Complete only fo	r assets showi	ng gain in column (h) and owned by			sses (from col. (h))	
(i) F.M.V. as of	12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess but i	of col. (h) gain ove not less than "-0-")	r col. (K),
a						0.
b						0.
С						0.
d						0.
<u>e</u>						0.
<u>f</u>			_			0.
<u>g</u>						
<u>h</u>						
<u> </u>						
1						
<u>k</u>						
1						
m		<u> </u>				
n		 -			<u> </u>	
0		<u> </u>				
2 Capital gain net in	come or (net ca	apital loss) { If gain, also enter =-(r in Part I, line 7)-" in Part I, line 7	2		0.
		ss) as defined in sections 1222(5) ar	nd (6):			
If gain, also enter If (loss), enter "-0-	ın Part I, line 8,	, column (c).	}	3	N/A	

Form 990-PF Interest on Savi	ings a	nd Tem	porary Ca	ash In	vestments	Statement	1
Bource						Amount	
Vells Fargo Investments #1668 Vells Fargo Investments #2662 Vells Fargo Investments #2662	2				-	1 2,8 22,5	
Total to Form 990-PF, Part I	, line	e 3, Co	lumn A		:	25,4	78.
orm 990-PF Dividence	ds and	l Inter	est from	Secur	rities	Statement	2
3ource		Gross	Amount		tal Gains vidends	Column (A Amount)
Vells Fargo Investments #1668 Vells Fargo Investments #2662			90. 73,289.		0.	73,2	90. 89.
Total to Fm 990-PF, Part I,	ln 4		73,379.		0.	73,3	79.
Form 990-PF		Legal	Fees			Statement	3
Description	Expe	(a) enses Books	(b) Net Inve		(c) Adjusted Net Incom		
		1,678.	1	,678.			0.
To Fm 990-PF, Pg 1, ln 16a		1,678.	1	,678.			0.
Form 990-PF	Ac	counti	ng Fees			Statement	4
Description	Expe	(a) enses Books	(b) Net Inve		(c) Adjusted Net Incom		
Accounting Fees		2,164.	2	,164.			0.

Form 990-PF	Tax	es 			Statement	
Description	(a) Expenses Per Books	(b) Net Inverment Income		(c) Adjusted Net Incom		
Other Taxes	428.		428.			0.
Fo Form 990-PF, Pg 1, ln 18	428.		428.			0.
Form 990-PF	Other E	xpenses			Statement	6
Description	(a) Expenses Per Books	(b) Net Inve		(c) Adjusted Net Incom		
Management Fees Investment Fees	4,391. 1,733.		391. 733.			0.
To Form 990-PF, Pg 1, ln 23	6,124.	6,	124.			0.
Form 990-PF U.S. and	State/City G	overnment	Obl:	igations	Statement	7
Description	U.S Gov'		Вос	ok Value	Fair Marke Value	:t
	x			L,046,080.	1,046,0	80.
Potal U.S. Government Obliga	tions	-		L,046,080.	1,046,0	80.
Potal State and Municipal Go	vernment Obl	igations		 ,		
Potal to Form 990-PF, Part I		•		L,046,080.	1,046,0	

Form 990-PF	Corporate Stock		State	ement	8
Description		Book Value		Marke alue	t
?referred Stocks	-		0.		0.
Potal to Form 990-PF, Part II	, line 10b		0.		0.
Form 990-PF	Other Investments		State	ement	9
Description	Valuation Method	Book Value		Marke alue	t
	FMV	674,82	29.	674,8	29.
Total to Form 990-PF, Part II	, line 13	674,82	29.	674,8	29.
	List of Officers, D and Foundation Mana		State	ement	10
					10
		Compen- sation	Employee Ben Plan Contrib	Expen	se
Vame and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan	Expen	se
Vame and Address Thomas Keltner P.O. Box 2030	Title and Avrg Hrs/Wk Director/President	Compen-sation dent 0.	Employee Ben Plan Contrib	Expen	se nt 0.
Vame and Address Thomas Keltner O. Box 2030 Silverthorne, CO 80498 Elizabeth Keltner O. Box 2030	Title and Avrg Hrs/Wk Director/Presidented 1.00	Compensation dent 0. President 0.	Employee Ben Plan Contrib	Expen	se nt
Vame and Address Thomas Keltner O. Box 2030 Silverthorne, CO 80498 Elizabeth Keltner O. Box 2030 Silverthorne, CO 80498 [vy Keltner O. Box 2030	Title and Avrg Hrs/Wk Director/President 1.00 Director/Vice-1.00	Compensation dent 0. President 0. President 0.	Employee Ben Plan Contrib	Expen	0.
Vame and Address Thomas Keltner O. Box 2030 Silverthorne, CO 80498 Elizabeth Keltner O. Box 2030 Silverthorne, CO 80498 Lvy Keltner O. Box 2030 Silverthorne, CO 80498 Vancy Keltner O. Box 2030 Silverthorne, CO 80498	Title and Avrg Hrs/Wk Director/President 1.00 Director/Vice-1.00 Director/Vice-1.00	Compensation dent 0. President 0. tary 0.	Employee Ben Plan Contrib 0.	Expen	se nt 0.

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

	re filing for an Automatic 3-Month Extension, complete only Part I and check this box	► X
If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).
Do not co	pmplete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Form 8868
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A corpora	tion required to file Form 990·T and requesting an automatic 6-month extension - check this box and com	nplete
Part I only		▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	n extension of time
	ome tax returns.	
noted bei not autor ou must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication of (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file for the fully completed and signed page 2 (Part II) of Form 8868.	ically if (1) you want the additional insolidated Form 990-T. Instead,
Type or	Name of Exempt Organization	Employer identification number
print		06 15-0100
File by the	Keltner Family Foundation	26-1579182
due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. Box 2030	
retum See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Silverthorne, CO 80498	
Check ty	pe of return to be filed (file a separate application for each return):	
	m 990 Form 990-T (corporation) Form 4	700
	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5	
	111 330-DL L FOITH 330-1 (Sec. 40 1(a) 01 400(a) (1051)	
= E	m 990-E7 Form 990-T (trust other than above)	
	m 990-EZ Form 990-T (trust other than above) Form 6	069
		069
		069
X For	The Foundation	069
The bo	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498	069
The bo	The Foundation poks are in the care of ▶ P.O. Box 2030 - Silverthorne, CO 80498 none No.▶ (310) 434-9866 FAX No.▶	069
The bo	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 none No. (310) 434-9866 proganization does not have an office or place of business in the United States, check this box	D69 870 ▶ □
The both Telepholish If the control of this	The Foundation cooks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 none No. (310) 434-9866 FAX No. porganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	069 870 ► □ is is for the whole group, check this
The bo	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 none No. Material States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and ElNs of all	is is for the whole group, check this members the extension will cover.
The bo	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 none No. Material (310) 434-9866 programization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the state of the group, check this box and attach a list with the names and ElNs of all quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time united to the group of the group of time united to file form 990-T) extension of time united to file form 990-T) extension of time united to file form 990-T) extension of time united to file form 990-T).	is is for the whole group, check this members the extension will cover.
The both Teleph If the control of this box	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 none No. (310) 434-9866 FAX No. proganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of all in the digit of the group is foundation of the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the group in the grou	is is for the whole group, check this members the extension will cover.
The bot Teleph If this box	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 from 800 by 100 is is for the whole group, check this members the extension will cover.	
The bot Telephe If this box	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 from 80. (310) 434-9866 fraction of the group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and the organization's return for the organization named a corporation's return for. X calendar year 2009 or	is is for the whole group, check this members the extension will cover.
The bot Telephe If the control of this box I I re	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 from 800 by 100 is is for the whole group, check this members the extension will cover.	
The bot Teleph If the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the	The Foundation poks are in the care of P.O. Box 2030 - Silverthorne, CO 80498 from 80. (310) 434-9866 fraction of the group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary and the organization's return for the organization named a corporation's return for. X calendar year 2009 or	is is for the whole group, check this members the extension will cover.
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