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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

2009

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

For cale	endar year 2009, or tax year beginning Ja	nuary	1, ,2009	, and ending	Decer	mber 31 , 2009	
G Che	ck all that apply Initial return Initia	al Return	of a former pu	ublic charity		Fina	al return
	Amended return		Address of		Name	change	
	Nome of foundation			ge	Δ	Employer identification nur	mber
Use th	16				^	26-3909179	
Otherwi		delivered to	street address)	Room/suite	В	Telephone number (see the	instructions)
print	· ·				٦	·	•
or type See Spee	e P.O. BOX 2504		State	ZIP code		(575) 622-466	
Instruction	one l				C	If exemption application is	· •
	ROSWELL			88202-250	04 D		
H 인	heck type of organization X Section 501					2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt charitable tru			rivate foundati		If private foundation status	L—'
I Fa	D+ H L (-) L 1()	_	nethod· XC	ash 🔲 Accr	ual -	under section 507(b)(1)(A)	, check here
	[L]	Other (spec	··		F	If the foundation is in a 60	
► Ş		column ((d) must be on	cash basıs)		under section 507(b)(1)(8)	, check here
	Analysis of Revenue and	(a) Re	evenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in		es per books	incom		income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					1	purposes
	(see the instructions))					-	(cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)						
	2 Ck ► X if the foundn is not req to att Sch B						
	3 Interest on savings and temporary			-			
	cash investments		11,840.		1,840		
	4 Dividends and interest from securities		7,426.		7,426	. 0.	
	5a Gross rents					<u> </u>	
	D Net rental income or (loss)						
R	6a Net gain/(loss) from sale of assets not on line 10						,
E V	b Gross sales price for all assets on line 6a						i
Ě	7 Capital gain net income (from Part IV, line 2)				0		
Ņ	8 Net short-term capital gain	<u>-</u> -					<u>4.</u>
U	9 Income modifications						
-	10a Gross sales less returns and allowances						
	b Less Cost of						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	goods sold		. <u> </u>			. <u></u>	
	c Gross profit/(loss) (att sch)						
	11 Other income (attach schedule)						
	See Line 11 Stmt		60,827.		0	. 0.	
	12 Total. Add lines 1 through 11		80,093.	19	9,266	<u>· 0.</u>	
	13 Compensation of officers, directors, trustees, etc						
	14 Other employee salaries and wages						
	15 Pension plans, employee benefits					<u> </u>	
A	16a Legal fees (attach schedule)						
M.	b Accounting fees (attach sch)					<u> </u>	
Ņ	c Other prof fees (attach sch)						
O I ⊸P S	17 Interest					<u> </u>	
	18 Taxes (attach schedule)(see instr.)					<u> </u>	
T R A	19 Depreciation (attach			İ			
	sch) and depletion 20 Occupancy RECEIVEI			1		- †	
خيا i N ∨ NG E	20 Occupancy RECEIVES 21 Travel, conferences, and meetings						
=·A F	22 Printing and publications	<u> </u>		 			
D N X	23 Other expenses gattach schedule 20			<u> </u>		 	
E	See Line 23 Strift	S-080	8,929.		8,929	. 0.	
N	24 Total anamating and administration	<u> </u>	-,,,,,,,	<u> </u>	-,	<u> </u>	
. E	expenses. Add lines 3 15 00 23	T	8,929.	8	8,929	. 0.	
_	25 Contributions, gifts grants paid		75,000.				75,000.
•	26 Total expenses and disbursements.						
'	Add lines 24 and 25		83,929.		8,929	. 0.	75,000.
,	27 Subtract line 26 from line 12:						
	a Excess of revenue over expenses and disbursements		2 026				
		***	-3,836.	4.	0 227		يقائد الد
	b Net investment income (if negative, enter -0-)			1.0	0,337		
	C Adjusted net income (if negative, enter -0-)					0.	فكروا والمستران

Decreases not included in line 2 (itemize)

► See Other Decreases Stmt

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

1,440,476. Form **990-PF** (2009)

55,688.

5

6

HEAT!	(a) List and describe	the kind(s) of property sold (e.g., rie, or common stock, 200 shares ML	eal estate,	(b) How acc P — Purc D — Dona	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	McAfee Inc @ 40.968			P	20011	07/29/09	08/26/09
		al Corp @ 12.4681-Cash 1	n lieu of fraction	1		07/29/09	10/29/09
		.5834-Cash in lieu of		P		11/24/09	12/09/09
d				<u> </u>	-		
e	 					· <u>-</u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa			(h) Gain or (e) plus (f) m	
a	1,228.			1,306.			-78.
b				10.			1.
c	24.			23.			1.
d							
е							
	Complete only for assets showir	ng gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Col	umn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			pain minus column (an -0-) or Losses (f	k), but not less
a				-			-78.
b							1.
С							1.
d							
е							
2	Capital gain net income or (net	capital loss) — If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	-	2		-76.
3	Net short-term capital gain or (le	oss) as defined in sections 1222(5)	and (6) [.]				
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see the instructions)	If (loss), enter -0-	-	3		
Dif	Qualification Under	Section 4940(e) for Reduce	ed Tax on Net Investm	ent Inco	me		
Was	s,' the foundation does not quali	on 4942 tax on the distributable am fy under section 4940(e) Do not co	mplete this part	•		Yes	X No
<u> </u>		each column for each year, see the	T	any entrie	es T	······································	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(col	(d) Distributio umn (b) divided	
	2008						
	2007						
	2006						
	2005						
	2004						
							······································
2	Total of line 1, column (d)	•			2	 	
3		e 5-year base period — divide the to has been in existence if less than 5			3		
4	Enter the net value of noncharit	able-use assets for 2009 from Part	X, line 5		4		
5	Multiply line 4 by line 3				5		
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		
8	Enter qualifying distributions fro	om Part XII, line 4			8		
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI,	line 1b, and complete that j	part using	a 1%	tax rate See th	e

علبنات	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	ne inst	ructions)		3
1 a	Exempt operating foundations described in section 4940(d)(2), check here				ŧ
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		207.	
	check here ☐ and enter 1% of Part I, line 27b				ı
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				ı
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			**	Ē
-	foundations only Others enter -0-)	2		0.	-
3 4	Add lines 1 and 2 Subtitle A (income) tay (demostre section 4947(a)(1) trusts and toyable foundations only. Others enter 0.)	3 4		207. 0.	_
5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	·-	207.	_
6	Credits/Payments	,		207.	
_	2009 estimated tax pmts and 2008 overpayment credited to 2009	`.			ı
	Exempt foreign organizations — tax withheld at source 6b				ı
	Tax paid with application for extension of time to file (Form 8868) 6c 0.				1
d	Backup withholding erroneously withheld 6d	į		3	Ĭ
7	Total credits and payments Add lines 6a through 6d	7		0.	<u>.</u>
8	Enter any penalty for underpayment of estimated tax. Check here.	8			_
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		207.	_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0.	<u>-</u>
11 	Enter the amount of line 10 to be. Credited to 2010 estimated tax	11		-	_
Par	Statements Regarding Activities		11112	V N-	_
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	Yes No	-
			14	 ^	-
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1b	Х	=
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials public	shed			
_	or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?		. 1c	X	F
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			^	Ŧ
	(1) On the foundation \$ (2) On foundation managers \$			÷	Ĭ
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
2	foundation managers \$		2	V	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		2	X	2
_			62		
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	Х	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	X	_
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b		_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	Х	_
	If 'Yes,' attach the statement required by General Instruction T				Ĭ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		11.77		÷
	By language in the governing instrument, or				2
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that con with the state law remain in the governing instrument?	flict			E
_			6	<u> </u>	_
	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	Х	
08	Enter the states to which the foundation reports or with which it is registered (see the instructions) NM - New Mexico	_	-		
	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation		8Ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete	942(j)(5 Part XI	(i) 9	Х	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na.				_
BAA	and addresses		10 Eorm 990	X 3-PF (2009	<u>_</u>

Philips The Market	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		<u>x</u>
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 application? Website address	13	Х	
14	The books are in care of ► MILLER & ASSOCIATES, CPA, PC Telephone no ► (575)	622-	<u>46</u> 6	7
15	Located at ► 400 N. PENNSYLVANIA ROSWELL NM ZIP + 4 ► 88201 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	- - -		TT -
13			-	
15,FE	<u> </u>			
والم	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes 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) Yes X No			
I	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 instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
•	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?	1 c		Х
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?			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20			
1	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	01		Y.
	all years listed, answer 'No' and attach statement — see the instructions)	2b		Х
,	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20, 20, 20			
3	a 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			
	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			v
	determine if the foundation had excess business holdings in 2009)	3ь		X
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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?	4b	·	X (2000)
BA	a, Fo	orm 99	U-PF	(2009)

None

Total number of other employees paid over \$50,000

Form 990-PF (2009) MILLER FAMILY FOUNDATION 26-3909179
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

(c) Compensation NONE Total number of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities Expenses Supersisted Summary of Direct Charitable Activities Supersisted Summary of Direct Charitable Activities Supersisted Supersi	3	Five highest-paid independent contractors for professional services — (see instenter 'NONE.'	ructions). If none,	
Total number of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities Lut the foundations four larger direct charitable activities (Lut the foundation and other bereficiaries served, conferences convend, research papers produced, etc. 1 THE FOUNDATION WILL HOLD AND MANAGE ASSETS IT MAY RECIEVE, WITH THE PURPOSE OF GENERATING INCOME TO BE DISTRIBUTED TO PUBLIC CHARITIES. 0 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 1 All other program-related investments See instructions 3 Fotal, Add lines 1 through 3		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities List the foundation's four largest direct chanitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianses served, conferences convened, research papers produced; etc. 1 THE FOUNDATION WILL HOLD AND MANAGE ASSETS IT MAY RECIEVE, WITH THE PURPOSE OF GENERATING INCOME TO BE DISTRIBUTED TO PUBLIC CHARITIES. 0 2 3 4 Describe the lavo largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 2 All other program-related investments See instructions 3 Fotal. Add lines 1 through 3	NON			
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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 All other program-related investments See instructions Total. Add lines 1 through 3	-	DISTRIBUTED TO PUBLIC CHARITIES.		0.
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 All other program-related investments See instructions Total. Add lines 1 through 3	۷.			
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 All other program-related investments See instructions Total. Add lines 1 through 3	-			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3	3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3	4 .			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions 3	-			
All other program-related investments See instructions 3 Total. Add lines 1 through 3	Perio	Summary of Program-Related Investments (see instruction	ons)	
All other program-related investments See instructions 3 Total. Add lines 1 through 3	Desc	ibe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
All other program-related investments. See instructions 3 Total. Add lines 1 through 3	1			
All other program-related investments. See instructions 3 Total. Add lines 1 through 3	-			
All other program-related investments. See instructions 3 Total. Add lines 1 through 3				• • • • • • • • • • • • • • • • • • • •
Total. Add lines 1 through 3	۷.			
Total. Add lines 1 through 3	-			
Total. Add lines 1 through 3	All ot	her program-related investments. See instructions		
	3			
	Total	Add lines 1 through 3		
		And times 1 millough 3	·	Form 990-PF (2009

Adjusted qualifying distributions. Subtract line 5 from line 4

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 1,130,171. b Average of monthly cash balances 1 b 366,693. c Fair market value of all other assets (see instructions) 1 c 0. 1d 1,496,864. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 1,496,864. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 22,453. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 1,474,411. 73,721. Minimum investment return. Enter 5% of line 5 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 1 Minimum investment return from Part X, line 6 73,721. 2a Tax on investment income for 2009 from Part VI, line 5 2a 207. 2b b Income tax for 2009 (This does not include the tax from Part VI) c Add lines 2a and 2b 2c 207. Distributable amount before adjustments. Subtract line 2c from line 1 3 73,514. Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 73,514. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 73,514. Part Qualifying Distributions (see instructions) 3 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes 75,000. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 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 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b b Cash distribution test (attach the required schedule) Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 75,000. 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) 5 0.

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

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Form **990-PF** (2009)

75,000.

6

Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Par	t XI,				72 514
line 7					73,514.
2 Undistributed income, if any, as of the end of 200	ia e			0.	
a Enter amount for 2008 only				0.	
b Total for prior years 20, 20, 20 3 Excess distributions carryover, if any, to 2009	-				•
a From 2004					
b From 2005	0.				
c From 2006	0.				
d From 2007	0.				
e From 2008	0.				
f Total of lines 3a through e	0.	0.			
4 Qualifying distributions for 2009 from P	· Part	0.			-
XII, line 4 ► \$ 75,00					
a Applied to 2008, but not more than line					
b Applied to undistributed income of prior					
(Élection required – see instructions)	, , , , , ,	·. }~2. · · · · <u>-</u>. · <u>-</u>. · · · · · · · · · · · · · · · · · · ·			-71
 Treated as distributions out of corpus (Election required — see instructions) 					
d Applied to 2009 distributable amount					73,514.
e Remaining amount distributed out of co	orpus	1,486.			
5 Excess distributions carryover applied to 2009					
(If an amount appears in column (d), the same amount must be shown in column	he n (a))				
Same amount must be snown in column	., (2)				
6 Enter the net total of each column as indicated below:		: 1 : ::: :::::::::::::::::::::::::::::			_
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		1,486.			€:
		1,400.			. 54
b Prior years' undistributed income Subt line 4b from line 2b	ract		0.		
c Enter the amount of prior years' undisti	rıbut-				
ed income for which a notice of deficient has been issued, or on which the section	ncy on	N. A.			*
4942(a) tax has been previously assess					
d Subtract line 6c from line 6b. Taxable					•
amount - see instructions		7	0.		,
e Undistributed income for 2008 Subtract line 4a	from				
line 2a Taxable amount — see instructions		-		0.	
f Undistributed income for 2009 Subtrac	et lines	·			
4d and 5 from line 1. This amount mus					
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)	J				
(see instructions)					
8 Excess distributions carryover from 200	04 not	_			
applied on line 5 or line 7 (see instruct	ions)	0.			
9 Excess distributions carryover to 2010	0.	1 400			
Subtract lines 7 and 8 from line 6a		1,486.			
10 Analysis of line 9	^				
a Excess from 2005	0.				
b Excess from 2006	0.				
c Excess from 2007	0.				
d Excess from 2008	0.				* * * * * * * * * * * * * * * * * * * *
e Excess from 2009 1	<u>,486.</u>	The second second	$\frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) \right) = \frac{1}{2} \left(\frac{1}{2} \left(\frac{1}{2} \right) \right)$	The second second second	Les ellasi.

Form 990-PF (2009) MILLER FAMILY FO				26-3909179	Page 10
Park Private Operating Foundation	ons (see instruc	ctions and Part	VII-A, question 9	9)	N/A
1 a If the foundation has received a ruling or d is effective for 2009, enter the date of the i	ruling				
b Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#1.0000	Prior 3 years	1	4
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a		ļ			
c Qualifying distributions from Part XII, line 4 for each year listed			ļ <u></u>		
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			į		
a 'Assets' alternative test — enter					
(1) Value of all assets(2) Value of assets qualifying under					
section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,					
line 6 for each year listed c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have	ne year — see ir gers: nave contributed mo	ore than 2% of the to	otal contributions red		
NONE					
b List any managers of the foundation who c a partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	f the stock of a corp 0% or greater intere	oration (or an equal est	ly large portion of the	ownership of
2 Information Regarding Contribution, Gran Check here \(\bar{X} \) if the foundation only requests for funds If the foundation makes complete items 2a, b, c, and d	nakes contributions	to preselected char	ritable organizations	and does not accept	unsolicited conditions,
a The name, address, and telephone numbe	r of the person to v	vhom applications s	hould be addressed		
b The form in which applications should be s	submitted and infori	mation and material	ls they should includ	e	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of in	stitutions, or other fac	ctors
BAA	т	EEA0310 07/06/09	···	F	orm 990-PF (2009)

Form 990-PF (2009) MILLER FAMILY FOUNDATION

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	substantial contributor	recipient				
a Paid during the year			1			
Chaves County CASA Program						
P.O. Box 2131						
Roswell NM 8820	2	501(c)(3)	Intensive Youth Advocacy Alternati	10,000.		
Assurance Home		ļ)			
2601 W. Berrendo						
Roswell NM 8820	L	501 (c) (3)	Updating Children's Rooms	10,000.		
Community Foundation of Chaves Count	_					
1717 WestSecond Street, Suite 17						
Roswell NM 8820	l	501(c)(3)	CFCC scholarship fund	15,000.		
Big Brothers Big Sisters of Southeastern New Mexic	1					
200 West 1st Street, Suite 202	l.					
Roswell NM 8820	3	501(c)(3)	Meet a Hero Event	2,500.		
CATS						
P.O.Box155						
Roswell NM 8820	1	501(c)(3)	donation	2,500.		
Miner's Colfax Medical Center Auxilar	ע					
200 Hospital Drive				! 		
Raton NM 8774)	501(c)(3)	Miner's Hospital Program in 2010	5,000.		
Generations of Learning						
2601 W. Berrendo						
Roswell NM 8820	1	501(c)(3)	donation towards continued success	5,000.		
Sidney Gutierrez Middle School						
P.O. Box 1674						
Roswell NM 8820	Į.	501(c)(3)	Improve learning environment for yo	5,000.		
First Tee of the Pecos Valley, IN	c					
201 W. 19th St						
Roswell NM 8820	1	501 (c) (3)	Help improve program to benefit ch	10,000.		
Roswell Boys and Girls Club						
201 S. Garden				40.00		
Roswell NM 8820	¹	501 (c) (3)	provide funding to improve program	10,000.		
Total		<u> </u>	► 3a	75,000.		
b Approved for future payment	1					

Total			► 3b			

Analysis of Income-Producing Activities

 Ente	r gross	amounts unless otherwise indicated	Unrelate	ed business income	Excluded	d by section 512, 513, or 514	
		am service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
а				!		-	
b							
C							
d							
е							
f						 	
_		and contracts from government agencies	0	0.			
		ership dues and assessments					
3		on savings and temporary cash investments	-				
4		nds and interest from securities			1.5 2.4.27		
5		ntal income or (loss) from real estate	reference of the second	8 (2.), <u>1182 (2.), 1183 (2.), 1184 (2.), 118</u>	ELT'IL	alanda a a a ser en a la l	
		inanced property ebt-financed property		-			
		al income or (loss) from personal property					<u> </u>
7		investment income					
8		(loss) from sales of assets other than inventory					
9		come or (loss) from special events			<u> </u>		
10		profit or (loss) from sales of inventory					
_		revenue.			Extract.	FUNDAMENTAL STREET	
''			Sixtasini gala e		TO SERVE	Propries	
b							
c			1				
d	í ——		-				
e			-				
-	·				-		
12	Subto	tal Add columns (b), (d), and (e)		0			
		tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0.			0.
13	Total.	Add line 12, columns (b), (d), and (e)	ilculations)	0.		13	0.
1 3 (See	Total. worksh	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify ca			. —	13	0.
1 3 (See	Total. worksh	Add line 12, columns (b), (d), and (e)			. —	13	0.
13 See	Total. worksh	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify ca	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
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13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the
13 See	Total. worksh e No.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify carried Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exemp	t Purpe	Oses contributed importantly	to the

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

desci relati	ribed in section 501(c) of ng to political organization	the Code (otl ons?	ngage in any of the following with her than section 501(c)(3) organi:	zations)	er organization or in section 5	27,	4.6 Y	Yes No
a Trans (1) (oundation to a	a noncharitable exempt organizat	ion of.			1a (1)	
` '	Other assets						1a (1)	
b Other	transactions							
	ales of assets to a nonc		. •				1 b (1)	X
	Purchases of assets from		. –				. 1b (2)	
• •	Rental of facilities, equipr Reimbursement arrangen	•	assets				1b (3)	
	oans or loan guarantees				_		1 b (4) 1 b (5)	
			p or fundraising solicitations				1b (6)	+
c Shari	ng of facilities, equipme	nt, mailing list	ts, other assets, or paid employed	es			1c	X_
the a	oods, other assets, or se	ervices aiven b	complete the following schedule (by the reporting foundation of the now in column (d) the value of the	foundat	ion received le	ss than fair i	market value in	: of
(a) Line no.	(b) Amount involved		of noncharitable exempt organization				ions, and sharing arra	ingements
				ļ				
				i				
								
					- ·			
				ļ				
		 · · · · · · · · · · · · · · · · · 						
								
descr	foundation directly or in tibed in section 501(c) of s,' complete the following	the Code (otl	ted with, or related to, one or mother than section 501(c)(3)) or in	re tax-e section 5	exempt organiza 527?	itions	Ye	s X No
<u> </u>	(a) Name of organization	·	(b) Type of organization		(c) Description	on of relationship	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			
	·							
								
Under pen	alties of perjury, I declare that I	have examined th	full return, including accompanying schedule luciary) is based on all information of which	s and state	ements, and to the b	est of my knowl	edge and belief, it is tri	ue, correct, and
complete	Declaration of preparer (other the	an taxpayer or fid	luciary) is based on all information of which	preparer h	nas any knowledge		Laryer	
Sign	ature of officer or trustee			Date	1/10/18	Title	wine	
	Branavaria) (0.4)	^	Date	e _	Charle of	Preparer's Identif	ying number
Paid Pre-	Preparer's signature	en Phill	e	1	1/10/10	Check if self- employed	(See Signature :	i the instrs)
parer's	Firm's name (or MILLE	R & ASSC	CIATES, CPA, PC	'		EIN -	5-038407	
Use Only	laddress and	Box 2504	1					·
	ZIP code Roswe	11	<u></u>	M 88	202-2504	Phone no	(575) 622	
AA	RECEIVED						Form 9	90-PF (2009)
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	OGDEN, U	- -						

Form 990-PF, Page 1, Part I, Line 11 Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Investment- Other Asset Income	-7.	0.	0.
BNY-Accrued Income	5,223.	0.	0.
BNY-Adjust to FMV-Income	-2,066.	0.	0.
BNY-Adjust to FMV-Equities	57,677.	0.	0.
Total	60,827.	0.	0.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Bank Charges	115.	115.	0.	
Investment Fees	8,788.	8,788.	0.	
Investment-Difference in	26.	26.	0.	

Total 8,929. 8,929. 0.

Form 990-PF, Page 2, Part III, Line 5

Other Decreases Stmt

UNREALIZED GAINS	55,611.
CAPITAL LOSS C/O	77.
Total	 55.688

Form 990-PF, Page 6, Part VIII, Line 1

Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person X Business RANDALL E. MILLER P.O. BOX 2504 ROSWELL NM 88202 Person X Business NICOLE A. MILLER	VP/DIR 0.50	0.	0.	0.
P.O. BOX 2504 ROSWELL NM 88202	SEC/DIR 0.50	0.	0.	0.

Total

0.	0.	0.

<u>1,071,560.</u> <u>1,127,172.</u>

Form 990-PF, Page 2, Part II, Line 13 **L-13 Stmt**

	End of	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value		
BNY-General Electric Comp	26,297.	26,449		
BNY-Novartis Capitol Corp	26,004.	26,280.		
BNY-Tennessee Valley Auth	52,916.	52,471.		
BNY-Oracle Corp	26,629.	26,997.		
BNY-Wachovia Bank Na	24,870.	25,572.		
BNY-Federal Farm Credit B	54,210.	53,985.		
BNY-Verizon Communication	26,205.	26,381.		
BNY-McDonald's Corp	27,364.	27,629.		
BNY-United Parcel Service	27,133.	26,947.		
BNY-Microsoft Corp	25,036.	24,961.		
BNY-United States Treasur	50,502.	49,457.		
BNY-United States Treasur	50,121.	48,094.		
BNY-Equities	654,273.	711,949		

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

Total

•	Beginning	End of Year	
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value
Accrued Income	0.	5,223.	5,223.
Total	0.	5,223.	5,223.

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

Form 8868 (Rev 4-2009)

•	•	Extension, complete only Part I and check this box			. × X
•	<u> </u>	matic) 3-Month Extension, complete only Part II (on pa being granted an automatic 3-month extension on a p	-	•	58
		ion of Time. Only submit original (no copies		3 7 01111 000	, , , , , , , , , , , , , , , , , , ,
Indiregias P	Automatic 5-Month Extens	of of time. Only submit original (no copies	necucu).		
A corporation	required to file Form 990-T and re	equesting an automatic 6-month extension — check this	box and com	nplete Part	I only . ►
All other corporate income tax re		partnerships, REMICS, and trusts must use Form 7004	to request ar	n extensioi	n of time to file
returns noted the additional Form 990-T. I	below (6 months for a corporation	ectronically file Form 8868 if you want a 3-month autom in required to file Form 990-T). However, you cannot file on or (2) you file Forms 990-BL, 6069, or 8870, group re completed and signed page 2 (Part II) of Form 8868 F file for Charities & Nonprofits.	Form 8868 e	lectronical	lv if (1) you want
	Name of Exempt Organization			Employer ide	entification number
Type or					
print	MILLER FAMILY FOUNDA	TION		26-390	9179
File by the due date for	Number, street, and room or suite number.	If a P O box, see instructions			
filing your	P.O. BOX 2504				
instructions	City, town or post office, state, and ZIP cod	e For a foreign address, see instructions			
	ROSWELL			NM	88202-2504
Check type of	f return to be filed (file a separate	e application for each return):			
Form 990	·	Form 990-T (corporation)	Form 472	0	
Form 990	·BL	Form 990-T (section 401(a) or 408(a) trust)	Form 522	7	
Form 990		Form 990-T (trust other than above)	Form 606	9	
X Form 990	-PF	Form 1041-A	Form 887		
Telephone If the orga If this is for check this	e No ► (575) 622-4667 anization does not have an office or or a Group Return, enter the organ	FAX No (575) 622-5166 or place of business in the United States, check this bosonization's four digit Group Exemption Number (GEN) ne group, check this box	x if t		
1 I reques	it an automatic 3-month (6 month	s for a corporation required to file Form 990-T) extension	on of time		
	ug 16, 20 10_, to file ension is for the organization's ref	the exempt organization return for the organization nan turn for:	ned above.		
► x	calendar year 20 09 or				
▶ 🗒	tax year beginning	, 20, and ending, 20			
2 If this ta	x year is for less than 12 months	, check reason: Initial return Final retur	rn 🔲 C	hange in a	ccounting period
3a If this ap	pplication is for Form 990-BL, 990 ndable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any	3a \$	0.
	pplication is for Form 990-PF or 9 nclude any prior year overpaymer	90-T, enter any refundable credits and estimated tax part allowed as a credit	ayments	3b\$	0.
deposit	with FTD coupon or, if required, b	Ba. Include your payment with this form, or, if required, by using EFTPS (Electronic Federal Tax Payment Syste	m)	3c \$	0.
Caution. If yo payment instr		c fund withdrawal with this Form 8868, see Form 8453-E	EO and Form	8879-EO f	or

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 886	8 (Rev 4-2009) MILLER FAMILY FOUNDATION	26-3909	179 Page 2	
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II ar	nd check this box	▶ X	
Note. On	y complete Part II if you have already been granted an automatic 3-month extension on	a previously filed Form &	368	
● If you	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
	Additional (Not Automatic) 3-Month Extension of Time. Only file the			
	Name of Exempt Organization	Employer identif	ication number	
Type or				
print	MILLER FAMILY FOUNDATION	26-39091		
File by the	Number, street, and room or suite number. If a P.O. box, see instructions	For IRS use only		
extended due date for		1 25 (1918)	Control of the Control Science	
filing the return See	P.O. BOX 2504	7, 28,		
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	ROSWELL NM 88202-2504	and the second of the second of the second		
	pe of return to be filed (File a separate application for each return)		□ .	
Form		orm 1041-A	Form 6069	
		rm 4720	Form 8870	
		rm 5227	. 0000	
	onot complete Part II if you were not already granted an automatic 3-month extension of ooks are in care of MILLER_& ASSOCIATES, CPA, PC	in a previously filed Form	1 8808.	
	hone No ► (575) 622-4667 FAX No ► (575) 622-5166			
•	organization does not have an office or place of business in the United States, check this	 -	►□	
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN		If this is for the	
	up, check this box \(\bigsim \ightarrow \lefta \). If it is for part of the group, check this box \(\bigsim \ightarrow \ightarrow \) and atta	·	-	
_	the extension is for	on a list with the hames t	3/10 E 11 43 OF UII	
	guest an additional 3-month extension of time until Nov 15 , 20 10		·	
	•	d ending	. 20 .	
	is tax year is for less than 12 months, check reason Initial return Final r	_ 	accounting period	
	e in detail why you need the extension ADDITIONAL TIME IS NEEDED T	O PREPARE		
A	COMPLETE AND ACCURATE RETURN.	- -		
8a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, I	ess any		
non	refundable credits. See instructions	8a \$	0.	
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	estimated tax		
pay with	ments made. Include any prior year overpayment allowed as a credit and any amount pa Form 8868	ia previously 8b\$	0.	
	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if require			
	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)		0.	
. —	Signature and Verification			
Under penal correct, and	ues of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the complete, and that I am authorized to prepare this form	e best of my knowledge and belie	f, it is true,	
			. 0 1 1	
Signature	- Bypithia & Miller Title - Mesident	Date	<u> 8-2-2010</u>	
	•			
BAA	FIFZ0502 03/11/09	Fo	orm 8868 (Rev 4-2009)	