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# Extended Return

Form 990-PF

## **Return of Private Foundation**

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

Department of the Treasury
Internal Revenue Segure
Note. The foundation may be able to use a

foundation may be able to use a conv of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

			De able to use a copy of this	<del></del>		
		ndar year 2009, or tax year beginning FEB	<del></del>	, and ending	DEC 31, 2009	
G (	Check	call that apply X Initial return		rmer public charity	Final return	
		Amended return	Address chang	ge L	Name change	
Use	e the	IRS Name of foundation			A Employer identification	number
I	label	The Robert & Mollie C	uster		06 400000	
Oth	nerwi	·	<del> </del>	<del></del>	26-4228322	· · · · · · · · · · · · · · · · · · ·
_	print		elivered to street address)	Room/suite	B Telephone number	0.4
	r type Spe	alfia 2000 11002 1101			505-266-88	
	ructio	City or town, state, and ZIP code			C If exemption application is pe	
		penver, co 80220			D 1. Foreign organizations	, check here
H_(	_		xempt private foundation		Foreign organizations mee check here and attach cor	nputation .
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		E If private foundation stat	us was terminated <sub></sub>
		arket value of all assets at end of year   J   Account	•	Accrual	under section 507(b)(1)	(A), check here 🍑 l
			ther (specify)		F If the foundation is in a 6	
_	\$		ımn (d) must be on cash b	oasis.)	under section 507(b)(1)(	
Pa	art i	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	<ul> <li>(I) Disbursements for chantable purpose</li> </ul>
	1 -	necessarily equal the amounts in column (a) )	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received	1,000.			
	2	Check X if the foundation is not required to attach Sch B	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<del></del>	
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities		<del></del>		
		Gross rents .	-			
		Net rental income or (loss)	<del></del>	·	<u> </u>	
ě	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		······		
en	p	assets on line 6a				*
Revenue		Capital gain net income (from Part IV, line 2)		0.		
_	1 _	Net short-term capital gain	<u> </u>	<u> </u>		***** ** ** ** **
	9	Income modifications ECEIVE	[			
		and allowances				
	D	Gross profit or (loss) G 0 5 20 m				
		Gross profit or (1058) G U 5 2011		<del> </del>		<del></del>
		Other income	1,000.	0.	0.	
—		Total: Addition it apply	1,000.	0.	0.	
	13	Compensation of officers, directors, trustees, etc		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	14	Other employee salaries and wages	-			
es	40-	Pension plans, employee benefits			,	<u></u>
Sui	108	Legal fees				<del></del>
Expense	0	Accounting fees Other professional fees				<del></del>
		Interest	<del></del>	<del></del>	<del>                                     </del>	<del></del>
rative	ŀ	Taxes	<del></del>	<del></del>		·
str	Ł	•			<del>                                     </del>	
and Administrative	19 20	Depreciation and depletion			<del> </del>	<u> </u>
Ę.	21	Occupancy Travel, conferences, and meetings				
ָּלְ עַ קַּלָּ		•				
ng and A	23	Printing and publications Other expenses		· · · ·		·
Operating		Total operating and administrative		· · · · · · · · · · · · · · · · · · ·		
era	-4	expenses Add lines 13 through 23	0.	0.	0.	
<u> </u>	25	Contributions, gifts, grants paid				
0	I	Total expenses and disbursements.				_ <del>-</del>
0	126	rotat expenses and disputacinglits.	0.	0.	0.	
0	26	Add lines 24 and 25		<b>U</b> •		
0	-	Add lines 24 and 25				
0	27	Subtract line 26 from line 12				
0	27 a		1,000.	0.		

<sub>-10</sub> LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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26	1	2	2	0	~	1	•
<i>-</i> / D	-4	_	_	ĸ	٦.	•	

Page 2

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		1,000.	
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable		`	
		Less allowance for doubtful accounts			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	1	investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	, , , , , , , , , , , , , , , , , , ,		
		Less. accumulated depreciation		Ĭ	
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			- 1
		Less. accumulated depreciation			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers)	0.	1,000.	1,000.
	17	Accounts payable and accrued expenses		-	
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jabi	21	Mortgages and other notes payable			
	22	Other liabilities (describe 🕨)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ĕ	24	Unrestricted			
lan	25	Temporarily restricted			
Ä	26	Permanently restricted			<b>.</b>
Ĕ	1	Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.	_		
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
Net Assets or Fund Balance	29	Retained earnings, accumulated income, endowment, or other funds	0.	1,000.	
ž	30	Total net assets or fund balances	0.	1,000.	
				1 000	
	31	Total liabilities and net assets/fund balances	0.	1,000.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	·	
		t agree with end-of-year figure reported on prior year's return)	••	1	0.
		amount from Part I, line 27a		. 2	1,000.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	1,000.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,000.
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(a) List and desc	ribe the k	osses for Tax on In and(s) of property sold (e g or common stock, 200 shs	, real estate,		T	How a P - Puro D - Don		(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a									
b NO	NE								
C									
d				_					
e									
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		ost or other basis expense of sale				(h) Gain or (loss) (e) plus (f) minus (	
_a			<del> </del>			<u> </u>			
<u>b</u>						<u> </u>			
<u> </u>				<del> </del>		ļ			
_d						<u> </u>		<u> </u>	
<u>e</u>	_	l				<u> </u>			
Complete only for assets showing	ig gain in	column (h) and owned by t	he foundatio	n on 12/31/69				I) Gains (Col (h) gain	
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		xcess of col (i) r col (j), if any				(k), but not less than Losses (from col. (I	1-0-) <b>or</b> 1))
a									
b									
C									
d									
e									
2 Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	in Part I, line		}	2			
	•	•			,				
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8			u (b)		}	,			
	nder S	ection 4940(e) for	Reduced	d Tax on Net	Inv	estn	ent Inc	come	
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the section of the foundation does not qual Tenter the appropriate amount in the section of the sect	tion 4942 Ify under	tax on the distributable ame section 4940(e) Do not cor	nplete this p	art .					Yes No
(a)			CUOIIS DEIOIG	I making any entin				<del></del>	(d)
Base period years Calendar year (or tax year beginnii	ng in)	(b) Adjusted qualifying disti	ributions	Net value of no	(c) oncha		use assets	Distribi	ition ratio ded by col (c))
2008									
2007	-	·							
2006		<del></del>							
2005							_		
2004	i	·		l				<del>-</del>	<del></del>
2 Total of line 1, column (d)								2	
3 Average distribution ratio for the S			n line 2 by 5,	, or by the number	of ye	ars			
the foundation has been in exister	ice if less	than 5 years		•			•	3	
4 Enter the net value of noncharitab	le-use as	sets for 2009 from Part X, II	ne 5				<u>.</u> .	4	
5 Multiply line 4 by line 3				-				5	
6 Enter 1% of net investment incom	ie (1% of	Part I, line 27b)						6	
7 Add lines 5 and 6								7	
8 Enter qualifying distributions from	Part XII,	line 4						8	
If line 8 is equal to or greater than See the Part VI instructions	line 7, ch	eck the box in Part VI, line 1	lb, and comp	olete that part usin	g a 1	% tax r	ate		

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10

6

7

N/A

Х

X

X

CO

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

7 Did the foundation have at least \$5,000 in assets at any time during the year?

of each state as required by General Instruction G? If "No," attach explanation

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

By language in the governing instrument, or

If "Yes," complete Part II, col. (c), and Part XV.

remain in the governing instrument?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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X

X

3b

4a

Yes X No

N/A

during the year?

0

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

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
	_	
	$\dashv$	
	7	
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 statistic	cal information such as the	Evnoncos
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	Expenses
1 N/A		
		<del></del>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on in	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<u> </u>	0.
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1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
Average monthly fair market value of securities	1a	0.
<b>b</b> Average of monthly cash balances	16	1,000.
c Fair market value of all other assets	10	··
d Total (add lines 1a, b, and c)	1d	1,000.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	. 3	1,000.
Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	985.
<u>6 Minimum investment return. Enter 5% of line 5 Adjusted for Short Tax Per</u>	iod 6	44.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations check here and do not complete this part.)	g foundations and certain	
Minimum investment return from Part X, line 6	1	44.
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		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	44.
Recoveries of amounts treated as qualifying distributions	. 4	0.
5 Add lines 3 and 4	5	44.
Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	44.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		0
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	. <u>1a</u>	<u> </u>
b Program-related investments - total from Part IX-B	. <u>1b</u>	0.
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<del> </del>
Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
income Enter 1% of Part I, line 27b	. 5	
Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether 4940(e) reduction of tax in those years	the toundation qualifies for the s	section

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### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				4.4
		<del>' . ' . 2'-! ·!'</del>		44.
Undistributed income, if any, as of the end of 2009     a Enter amount for 2008 only			0.	
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	<u> </u>	1,21 1 1111, profit - plate, cl - plate,
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·,, •1 • • • • • • • • • • • • • • • • •	
a From 2004				
b From 2005				
E 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 > \$ 0.				
a Applied to 2008, but not more than line 2a			0.	
· · · · · · · · · · · · · · · · · · ·	······································	<del></del>		······································
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	<del></del>	·············	'' .' .' .' .' .' .'	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)		· · · · · · · · · · · · · · · · · · ·	1, , , , , , , , , , , , , , , , , , ,	0.
d Applied to 2009 distributable amount	0.			<u> </u>
e Remaining amount distributed out of corpus	0.	**************************************		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.			<u> </u>
6 Enter the net total of each column as indicated below:			***************************************	
2 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		0.		
assessed .		0.		·····
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2008 Subtract line		0.		
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				44.
7 Amounts treated as distributions out of		7117 1 111 NA 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·	<del> </del>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	į		
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		į		
b Excess from 2006		į		
c Excess from 2007				
d Excess from 2008				
e Excess from 2009		[		
O Encodo Hom 2000				Form 000 DE (2000)

The Robert & Mollie Custer

Grants and Contributions Paid During to	ne Year or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
None				
140110				
	}			
	į			
	ł			
Total	•	-	. ▶ 3a	
Approved for future payment			}	
None				
Total			<b>▶</b> 3b	

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

Enter gross amounts unless otherwise indicated	Unrelated business income			ided by section 512, 513, or 514	(e)	
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue	Cone	<del></del>	wae		10.00.0	
a						
b			ļ			
c			ļ			
d						
e						
1						
g Fees and contracts from government agencies						
2 Membership dues and assessments			<u> </u>			
3 Interest on savings and temporary cash			<u> </u>			
investments			-			
4 Dividends and interest from securities	<del></del>		<u> </u>		,, , , , , , , , , , , , , , , , , , ,	
5 Net rental income or (loss) from real estate	ļ <del> </del>		ļ			
a Debt-financed property			ļ			
b Not debt-financed property			<u> </u>			
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events						
			<del> </del>			
10 Gross profit or (loss) from sales of inventory			-			
11 Other revenue						
a			ļ			
b						
C						
d						
е						
12 Subtotal Add columns (b), (d), and (e)		0.		0.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.	
(See worksheet in line 13 instructions to verify calculations.)	•	•	•	• •	<del></del>	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes		
Line No. Explain below how each activity for which incom	e is reported i	in column (e) of Part XVI-A	contrib	uted importantly to the accord	onlishment of	
▼ the foundation's exempt purposes (other than b				,		
	<del>, , , , , , , , , , , , , , , , , , , </del>	, , , , , , , , , , , , , , , , , , , ,				
	<del>-</del>			<del></del>	<del></del>	
				<del></del>		
	<u> </u>			<del></del>		
					<del></del>	
	<del></del>					
<del>  </del>				·	<del></del>	
<del></del>						
		- <u></u>				
					<u> </u>	
923621		<del></del>		<del></del>	- 000 DE (0000)	

Unrelated business income

Pa	ert X	VII Information Re Exempt Organ	egarding Transfers To izations	and Transactions a	and Relationsh	ips With Nonchar	itable		iye is
1	Did th	ne organization directly or indi	rectly engage in any of the follow	ing with any other organization	on described in section	n 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								
a	Trans	sfers from the reporting found	ation to a noncharitable exempt o	organization of					
	(1)	Cash					1a(1)		X
	(2)	Other assets					1a(2)		X
b	Other	transactions							
	(1) 5	Sales of assets to a noncharita	ble exempt organization				1b(1)		X
	(2) F	Purchases of assets from a no	ncharitable exempt organization			•	1b(2)		X
	(3) F	Rental of facilities, equipment,	or other assets				1b(3)		X
	(4) F	Reimbursement arrangements					1b(4)		Х
	(5) L	oans or loan guarantees			••		1b(5)		X
	(6) F	Performance of services or me	mbership or fundraising solicitat	ions	•		1b(6)		X
C	Shari	ng of facilities, equipment, ma	iling lists, other assets, or paid e	mployees			10		X
d	If the	answer to any of the above is	"Yes," complete the following sch	nedule. Column (b) should alv	ways show the fair ma	arket value of the goods, of	her ass	ets,	
	or se	rvices given by the reporting fo	oundation. If the foundation recei	ved less than fair market valu	ue in any transaction o	or sharing arrangement, sh	ow in		
	colun		other assets, or services received		· · · · · · · · · · · · · · · · · ·				
(a) t	ine no	(b) Amount involved	(c) Name of noncharitab	le exempt organization	(d) Description of	f transfers, transactions, and s	nanng ar	rangeme	nts
			N/A						
				<del></del>					
						<del></del>			
		<u> </u>			_				
			<del></del>						
			·	<del></del> - ·					
						<del></del>			
_					_L				
2a			ly affiliated with, or related to, on	· -	zations described		_		,
		, ,	than section 501(c)(3)) or in sec	ction 527?		-	Yes	X	] No
D	IT Yes	s," complete the following sche (a) Name of org:		(h) Tune of experience	1	December of relationship			
		N/A	anization	(b) Type of organization	(6	Description of relationshi	p		
				<del> </del>	-				
								<del></del>	
Т	Under p	enalties of penury, I declare that I ha	ave examined this etum, including acc	ompanying schedules and statem	ents, and to the best of m	ry knowledge and belief, it is tru	e, correc	 :t,	
		plete Declaration of prepare forthe		all information of which preparer					
		12/X//	1/2//2	17/20/10	1 Tuef	9 <i>9</i>			
2	Si	matere of officer or instee	The state of the s	Date	Title				
Ĭ		Preparer's 8-11.	8. 1	/	ate/ / Chec	k if Preparer's	dentify	ing numb	oer
Sign Here	Preparer's Use Only	signature Bullie	y son mony	m 7	21/10   self-	oyed			
S	par	Firm's name (or yours REDW	ZLC /			EIN D			
٦	Prepa Use		Office Box 936	556	-				
$\perp$		address, and ZIP code Albud	querque, New Me	exico 87199-3	656	Phone no (505)	998	<u>3–3</u> 2	002
			·	<del>-</del> -		Forn	n <b>990</b> -	- <b>PF</b> (2	009)

#### Form 8868 (Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Internal Reven	ue Service	► File a separate application for each return.		
		omatic 3-Month Extension, complete only Part I and check this box litional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)	► X
		less you have already been granted an automatic 3-month extension on a previously fil	-	368.
Part I	Automatic	c 3-Month Extension of Time. Only submit original (no copies needed).		
A corporati Part I only	ion required to file	e Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	▶ □
	orporations (includ me tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	extension	of time
noted belo (not autom you must s	w (6 months for a latic) 3-month extended submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronic ension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or composite or composite or composite or composite or composite or composite and signed page 2 (Part II) of Form 8868 For more details on the electronic file on e-file for Chanties & Nonprofits	cally if (1) y nsolidated	ou want the additional Form 990-T. Instead,
Type or	Name of Exemp		Employe	identification number
print		rt & Mollie Custer		
File by the		oundation	26-4	1228322
due date for filing your	Number, street, 1650 Kea	and room or suite no. If a P.O box, see instructions. rney St		
return See instructions		st office, state, and ZIP code. For a foreign address, see instructions.		
Check typ	e of return to be	filed (file a separate application for each return)		
Form	n 990 n 990-BL n 990-EZ n 990-PF	Form 990-T (corporation)  Form 990-T (sec. 401(a) or 408(a) trust)  Form 990-T (trust other than above)  Form 1041-A  Form 88	27 69	
Telepho If the or	one No. ► 505 ganization does n for a Group Retu	Robert D. Custer  of > 1650 Kearney St Denver, CO 80220 -266-8894 FAX No >  ot have an office or place of business in the United States, check this box rn, enter the organization's four digit Group Exemption Number (GEN) . If this of the group, check this box > and attach a list with the names and EINs of all r		
is for ▶	August 15 the organization' calendar year	or		extension
2 If this	s tax year is for le	ss than 12 months, check reason: X Initial return Final return	Chan	ge in accounting period
		Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		<u>.</u>
		See instructions.	3a \$	0.
		Form 990-PF or 990-T, enter any refundable credits and estimated		^
		nclude any prior year overpayment allowed as a credit.	3b \$	0.
		t line 3b from line 3a. Include your payment with this form, or, if required,	-	
•		on or, if required, by using EFTPS (Electronic Federal Tax Payment System).		0
	nstructions		3c   \$	0.
		make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	8879-EO fo	
LHA Foi	r Frivacy Act and	Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev 4-2009)