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

OMB No 1545-0052

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2009, or tax year beginning , and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation Α Employer identification number Use the IRS 26-6730610 label The Anna Belle Kritser II Foundatn Otherwise, Telephone number (see page 10 of the instructions) 806-373-5569 print Number and street (or P O box number if mail is not delivered to street address) Room/suite or type. PO Box 9238 C If exemption application is pending, check here See Specific City or town, state, and ZIP code 1 Foreign organizations, check here Instructions. Amarillo TX 79105-9238 2 Foreign organizations meeting the Check type of organization | X | Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end X Cash J Accounting method of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 0 line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (a) Revenue and (d) Disbursements (b) Net investment expenses per (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not necessarily equal books income income purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 3 Dividends and interest from securities 4 Gross rents 5a Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns & allowances Less Cost of goods sold ь С Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc SCANNED NOV @ 2010 Operating and Administrative Expenses 14 Other employee salaries and wages Pension plans, employee benefits 15 Legal fees (Mach schedule) 16a Accounting fees (attach schedule b professional teles Butgeryzepedite) Olim C 17 18 Depreciation and 19 20 Occupancy Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att. sch.) Total operating and administrative expenses. Add lines 13 through 23 0 0 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 0 0 0 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 0 а Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-) 0

Part		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year				
_'	raitii	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1 '	Cash—non-interest-bearing							
	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		<u> </u>					
- 1	6	Receivables due from officers, directors, trustees, and other							
	-	disqualified persons (attach schedule) (see page 16 of the							
ĺ		instructions)							
	7	Other notes and loans receivable (att schedule)		· · · · · - · ·					
	·	Less allowance for doubtful accounts ▶							
S	8	Inventories for sale or use							
set	9	Prepaid expenses and deferred charges							
Assets	10a	Investments—U S and state government obligations (attach schedule)							
	b	Investments—corporate stock (attach schedule)							
	c	Investments—corporate shock (attach schedule)							
1	11	Investments—Land, buildings, and equipment basis							
	* 1	Less accumulated depreciation (attach sch.)			· ;				
1	12	Investments—mortgage loans							
	13	Investments—other (attach schedule)							
	14	Land, buildings, and equipment basis							
	14								
-	45	Less accumulated depreciation (attach sch.)							
	15	Other assets (describe >)							
	16	Total assets (to be completed by all filers—see the	اه	0	0				
+	17	Instructions Also, see page 1, item I)	0	0	0				
1		Accounts payable and accrued expenses			'				
es	18	Grants payable Deferred revenue							
≆	19								
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1				
اڐ	21	Mortgages and other notes payable (attach schedule)			!				
-	22	Other liabilities (describe >)			!				
+	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ► X	0	0					
,,		Foundations that follow SFAS 117, check here ► X and complete lines 24 through 26 and lines 30 and 31.							
ĕ	•				,				
Net Assets or Fund Balances	24	Unrestricted Temperature and the section of the sec							
a	25	Temporarily restricted							
핃	26	Permanently restricted							
Š		Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31.			,				
Ĕ		,							
ō	27	Capital stock, trust principal, or current funds							
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund							
SS	29	Retained earnings, accumulated income, endowment, or other funds	-						
٧	30	Total net assets or fund balances (see page 17 of the		•					
Ę		instructions)	0	0					
	31	Total liabilities and net assets/fund balances (see page 17		_					
ᆛ	of the instructions) 0 0								
_		Part III Analysis of Changes in Net Assets or Fund Balances							
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	igree with	1.					
_		f-year figure reported on prior year's return)	•	1	 				
		amount from Part I, line 27a		2					
		increases not included in line 2 (itemize)		3					
		nes 1, 2, and 3	••	4					
	5 Decreases not included in line 2 (itemize) >								
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30									

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Form	990-PF (2009) The Anna Belle Kritser II Foundath 26-6730610			P	age 4
Pa	Irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a				
b	Exempt foreign organizations—tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded	11			
	rt VII-A : Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				V
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		i l		
_	published or distributed by the foundation in connection with the activities				v.
C C	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-			
е	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If "Yes," attach a detailed description of the activities				- ^
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5		X
•	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		i l		
	conflict with the state law remain in the governing instrument?		6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7		Х
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ▶ TX				
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) of each state as required by General Instruction G? If "No," attach explanation		8b	Χ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				
	27)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		7		
	names and addresses		10		Х
		En	qq	n.PF	(2000)

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

		A Adivition for Which Form		730010					age o
•	•	g Activities for Which Forn	1 4/20 Iviay Be Re	quirea (contin	uea)	- 1		_	
5a	During the year did the foundation pay or in	•	10.157 \\0	п.	, जि				
	(1) Carry on propaganda, or otherwise atte	• •	, ,,	, r	∕es X N	°	1		
	(2) Influence the outcome of any specific po	•	to carry on,	п,	ر.				l ,
	directly or indirectly, any voter registrati			\vdash	res X N				;
	(4) Provide a grant to an individual for trave	•			∕es <u>X</u> N	°			· '
	(4) Provide a grant to an organization other section 509(a)(1), (2), or (3), or section			\Box	res X N	_			1,
	(5) Provide for any purpose other than relig		•		∕es ⊠ N	°۱			
	• • • • • • • • • • • • • • • • • • • •	or educational	п,	res X N	_	İ		l	
b		purposes, or for the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in]
Ü	Regulations section 53 4945 or in a current	•	•		N/	ֹא	5b		[}]
	Organizations relying on a current notice re	• •		istructions).	▶ □''	^ }	-50		
С	If the answer is "Yes" to question 5a(4), doe	• •					1		
Ŭ	because it maintained expenditure responsi	<i>'</i>	om the tax	N/A 🗍 1	res N	ا ۸			
	If "Yes," attach the statement required by Ri	•		14/11		Ĭ			
6a	Did the foundation, during the year, receive	• , ,	pay premiums						
	on a personal benefit contract?	any range, and only or monoonly, to p	, p	\Box	res X N	。			
b	Did the foundation, during the year, pay pre	miums, directly or indirectly, on a pe	ersonal benefit contract		''	~ ·	6b		X
	If "Yes" to 6b, file Form 8870	-, ,				ļ			
7a	At any time during the tax year, was the fou	ndation a party to a prohibited tax s	helter transaction?		res X N	。			,
	If yes, did the foundation receive any proces						7b		
Pa	rt VIII Information About Office	ers, Directors, Trustees, F	oundation Manag	ers, Highly Pa	aid Employ	yees			
	and Contractors								
1 L	ist all officers, directors, trustees, founda	tion managers and their compen	sation (see page 22 o	f the instructions).				
			(b) Title, and average	(c) Compensation	(d) Contribution				
	(a) Name and add	dress	hours per week	(If not paid, enter	employee ber plans and defe		(e) Exp other	ense ad allowar	
			devoted to position	-0-)	compensatio				
Вi	ll Countis S	Amarillo	Co-Trustee						
PO	Box 9238	TX 79105	5 00	0		0			0
Da	vid S Kritser III	Amarillo	Co-Trustee						
28	20 Crockett	TX 79109	5 00	0		0			0
									
_								_	
2	Compensation of five highest-paid emploise if none, enter "NONE."	oyees (other than those included	on line 1—see page 2	23 of the instructi	ons).				
	ii none, enter NONE.				(d) Contribution				
	(a) Name and address of each employe	e paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribution employee ber	efit	(e) Exp		
	(a) realist and address of oddit simpleys	o pala moro man 400,000	devoted to position	(o) compensation	plans and defe compensation		other	allowar	nces
NO	NE					-			
			•						
			1	į					
						_			
			1						
		·							
`ota	I number of other employees paid over \$50,0	00						1	

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Part VIII , Information About Officers, Directors, Trustees, Foundation		
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 23	of the instructions). 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>
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc.	of as the number of	Expenses
1 N/A		
2		
•		
3		
4	•	<u> </u>
Part IX-B Summary of Program-Related Investments (see page 2	4 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines		Amount
1 N/A		
2		
All other program-related investments See page 24 of the instructions		
3		

Total. Add lines 1 through 3

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Pa	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundation	ons,
	see page 24 of the instructions.)		_
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
ď	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	erating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	
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)]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	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	1	
	qualifies for the section 4940(e) reduction of tax in those years		

Excess from 2009

N/A

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or status of Amount contribution recipient Name and address (home or business) Paid during the year N/A Total 3a Approved for future payment N/A Total **▶** 3b

	art AVI-A	Analysis of income-producing Acti	vities				
•		unts unless otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of the instructions)
·	-						
					+		
		 			-		
					 		
					ļ		
					-	_	
	f	de la companya de la					
_		d contracts from government agencies			 		
	-	dues and assessments			ļ		
_		avings and temporary cash investments			!		· · · · · · · · · · · · · · · · · · ·
4		nd interest from securities					
5		come or (loss) from real estate			1		
		anced property					-
		t-financed property			-		
		come or (loss) from personal property			1		
	Other investi						
		s) from sales of assets other than inventory	ļ		-		
		or (loss) from special events					· · · · · · · · · · · · · · · · · · ·
		or (loss) from sales of inventory					
11	Other revenu	ue a					
	b						
	d	<u> </u>					
	e						
12	Subtotal Add	d columns (b), (d), and (e)		C)	0	
13	Total. Add lii	ne 12, columns (b), (d), and (e)				13 _	0
		in line 13 instructions on page 28 to verify calculations					
<u>_</u> F	Part XVI-B						
	Line No.	Explain below how each activity for which income is					
	▼	accomplishment of the foundation's exempt purpose	es (other than b	y providing funds for s	uch purpo	oses) (See page 29 of	the
	NT / 70	instructions)					
_	N/A						
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		Exempt Organiza	tions								
1	Did the c	organization directly or indir	rectly engage	e in any of the following with any	other orga	anization described				Yes	No
	ın sectio	n 501(c) of the Code (other	r than section	n 501(c)(3) organizations) or in s	ection 527	, relating to politica	ıl				
	organiza	tions?									
а	Transfers from the reporting foundation to a noncharitable exempt organization of										
	(1) Casi	h					1a(1)		X		
	(2) Othe	er assets							<u>1a(2)</u>		X
b	Other tra	nsactions									
		s of assets to a nonchanta		-					1b(1)		X
	` '	chases of assets from a nor		, •					1b(2)	ļ	X
		tal of facilities, equipment,	or other asse	ets					1b(3)	-	X
	• •	nbursement arrangements							1b(4)		X
		ns or loan guarantees ormance of services or me	mharahin ar	fundraiaina policitationa					1b(5)		X
_				ner assets, or paid employees					1b(6) 1c		X
	-	· • •	•	plete the following schedule Colu	ımn (h) sh	ould always show	the fair mark	et	_ 10	L	
•				ven by the reporting foundation. I							
		•	•	t, show in column (d) the value o							
	(a) Line no	(b) Amount involved		of noncharitable exempt organization		(d) Description of tra			sharing arrange	ments	
1/	A										
			ļ								
											
											
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			 		_			-			
			 	·							
			 								
			 		-						
				<u>.</u>							
											
2a	Is the fou	undation directly or indirect	lv affiliated w	rith, or related to, one or more tax	x-exempt o	organizations					
		•	•	han section 501(c)(3)) or in section	•				☐ Y	es X	No
b	If "Yes,"	complete the following sch	edule							_	•
		(a) Name of organization		(b) Type of organization		(0) Description o	of relations	hip		
	<u>N/A</u>				_						
							<u> </u>				
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				ed this return, including accompanying reparer (other than taxpayer or fiducia							
	L	Bill +	<u> </u>	1,0%	22/18	\		•	•		
,,	Signa	ature of officer or trustee	<u> </u>	Date	<i>= 1110</i>	— ▶ T ⊓	Co-Tru	stee	<u>s</u>		
200			-			Date			Preparer's identif	iying	
		Preparer's	m Maik	Vonstelle a	$\Omega \Omega = 0$	ا مان ا	Check If	🖂	number (see Sig page 30 of the in	nature o	
i Bio	Paid Preparer's Use Only	Freparer's signature Samura Concidence of UH 105610 self-employed ▶ □ Preparer's signature						page oo oi tiid iii	.cu acdUll	-,	
"	Paj Paj Se C	Firm's name (or yours if	Lovela	ady, Christy + A	ssoci	ates					
	۳ ۾	self-employed), address,	80\L	Fillmore St Ste				EIN ▶			
		and ZIP code	Amari						806-37	3 - 4	884
									Form 99	0-PF	(2009)