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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a conv of this return to satisfy state rep

OMB No 1545-0052 2009

inter	nal R	evenue Ser	vice IVOT	e: The foundati	ion may t	be able to use					ing requirements.	
_			year 2009, or 1					/24 ,2009			·	12/31 ,20 09
G (Che	ck all th	· · · · <u> </u>	X Initial retu		lnıt	_	of a former p	oublic chạ			Final return
				X Amended	return		Addre	ss change		N:	ame change	
			Name of founda	ition							A Employeridenti	fication number
U	se th	ne IRS								1		
	lat	el.	BACKER FAI	MILY CHAP	RITABI	LE TRUST	430167	7015		1	27	-1263236
0		wise,	Number and str	eet (or P O. box	number if	mail is not delive	ered to stree	t address)	Room/si	uite	B Telephone number (se	e page 10 of the instructions)
	•	int								- 1		
		ype. pecific	8401 WEST	DODGE RO	DAD, S	SUITE 256					(4	02) 393-8300
		pecific ctions.	City or town, sta								C If exemption applic	ation is
,,,,	suu	cions.								- 1	pending, check her	
			OMAHA, NE	68114-34	151					- 1	D 1 Foreign organization 2 Foreign organization	· —
Н (Cho		of organization			c)(3) evemn	t nrivata f	oundation		一	85% test, check	here and attach
Ϊ,	\neg		947(a)(1) nonex				•	ivate foundat	io n		computation •	▶ ∟ .
1			value of all as:		· · · · · · · · · · · · · · · · · · ·	unting meth						n status was terminated
									rual	ł	under section 507	b)(1)(A), check here . P
			m Part II, col. (d		(Part I	ther (specity)		n cash basis.)				in a 60-month termination
		▶ \$		<u>, 293 . </u>			nust be o	n casn basis.)	<u> </u>		under section 507	b)(1)(B), check here
řē		Analy total o	sis of Revenue	and Expens	i es (The nd (d)	(a) neveni		(b) Net inve	estment	(c	Adjusted net	(d) Disbursements for charitable
		mav n	ot necessarıly eqi	ual the amount	ts in	expense book		incom		``	income	purposes
_		colum	n (a) (see page 1	1 of the instruc	tions).)							(cash basis only)
	1		ons, gifts, grants, etc ,	received (attach so		46	6,500.					<u> </u>
	2	Check		n. B						ļ		
	3	Interest	on savings and tem	porary cash inve	stments					ļ		
1	4	Dividen	ds and interest f	rom securities			2,640		2,640.			STMT 1
	5a	Gross re	ents									
	b	Net rent	al income or (loss)									
9	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a		-46	6,500	·							
CHINNY Revenue												
Š	7	Capital	gain net income	(from Part IV,	line 2) .							
5	8	Net sho	rt-term capital ga	aın								
5	9	Income	modifications ·									
<u>-</u>	0 a	Gross sa	les less returns wances									
Ū	b		st of goods sold .	1	_							
ן יכ	С	Gross p	rofit or (loss) (att	ach schedule)								
: 1			ncome (attach sc									
	12		Add lines 1 through				2,640		2,640.			
_	13		sation of officers, d				97		97.		_	
	14	•	mployee salaries		• •							
	15		plans, employee	-						-		
us .			es (attách schjád									
ğ	.va h	Account	ting fees lattach	CCIVEL	40					 -		
Operating and Administrative Expenses			rofessional fees		38							
ا ڇ	17		AN LONG		10				_			
tra .			1 5 1		. 1031			 		 		
ujs [18		ttach schedule) (see					 		_		
<u>֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֚֓֞֞֟֟֟</u>	19	Depreci	ation (attach sch		metion .			 		-		
₽ 3	20	Occupa	IICy Linear Contract							<u> </u>		
힏	21		conferences, and			 						
e 2	22		and publication				750	 	750		····	
<u>.</u> <u></u>	23		xpenses (attach				750	<u></u>	750.			
era 2	24		perating and adr		•		0.45		0			
ğ			es 13 through 23				847	 	847.	ļ	 	
- 2	25	Contrib	utions, gifts, grar	nts paid								
	2 <u>6</u>	Total exp	enses and disbursem	ents Add lines 2	4 and 25		847	<u> </u>	847.			
2	27	Subtrac	t line 26 from lin	ne 12:								
	a	Excess of	i revenue over expens	ses and disbursem	ents		1,793					
	Ь	Net inv	estment income	(ıf negative, e	nter -0-)				<u>1,793.</u>			
	С	Adiuste	ed net income (if	f negative, ente	er -0-)			1				

D.	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year.	Beginning of year	End (of year
<u> </u>		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		1,793	
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
ı	4	Pledges receivable			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less. allowance for doubtful accounts			
	8	Inventories for sale or use			
ets	9	Prepaid expenses and deferred charges			
Assets	-	Investments - U S and state government obligations (attach schedule)			
1		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment, basis —			
	40	(attach schedule)			
	12 13	Investments - mortgage loans		<u>-</u>	466,500
	14	Land, buildings, and			400,300
		equipment basis Less accumulated depreciation			
	45	equipment basis Less accumulated depreciation (attach schedule)		·	· · · · · ·
	15	Other assets (describe Total assets (to be completed by all filers - see the			
	16	Instructions. Also, see page 1, item I)	NONE	1 702	166 500
_				1,793	466,500
	17	Accounts payable and accrued expenses			_
	18	Grants payable			1
Liabilities	19	Deferred revenue	li li		1
ij	20	Loans from officers, directors, trustees, and other disqualified persons			-
Lia	21	Mortgages and other notes payable (attach schedule)			-
·	22	Other liabilities (describe			-
	23	Total liabilities (add lines 17 through 22)			
_	23				-
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
S	24	·			
2	24	Unrestricted			1
ala	25	Temporarily restricted	1		1
8	24 25 26 27	Foundations that do not follow SFAS 117,			
Š		check here and complete lines 27 through 31. ► X			
ř	27	Capital stock, trust principal, or current funds	NONE	1,793	
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund	NONE		1
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds			1
Ä	30	Total net assets or fund balances (see page 17 of the		·-····································	1
Vet		instructions)	NONE	1,793	j
_	31	Total liabilities and net assets/fund balances (see page 17	210212		<u>.</u>
	•	of the instructions)	NONE	1,793	
9	art I	Analysis of Changes in Net Assets or Fund		=1,755	· <u> </u>
_		Il net assets or fund balances at beginning of year - Part II, o	•	agree with	
•		of-year figure reported on prior year's return)		_	NONE
2	Ente	or your regard reported on prior year steturn,		2	1,793.
2	O+h-	er amount from Part I, line 27aer increases not included in line 2 (itemize)			1,133.
					1,793.
		lines 1, 2, and 3		4	1,133.
		I net assets or fund balances at end of year (line 4 minus line)	ne 5) - Part II, column (b)		1,793.
<u>0</u>	וטופ	ii net assets or tunu varances at enu or year jime 4 minus iii	ne 5) - Farcii, coluiiiii (0),	inic 30 0	1,133.

P	art IV Capital Gains	and Losses for Tax on Inv	restment Income			, ago
		I describe the kind(s) of property sold rick warehouse; or common stock, 200		(b) How acquired P-Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	,	ick warehouse, or common stock, 200	7 SIIS. IVILC CO.)	D-Donation	(IIIO., day, yi.)	
b						
C	-					
d						<u> </u>
е				1		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a		-				
_b						
_c						
_d						
_e	'			-		
<u>_c</u>	omplete only for assets sho		ed by the foundation on 12/31/69		Gains (Col (h) ga	
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col	(k), but not less t Losses (from co	
_a						
<u>b</u>						
<u>d</u>						
			facinates agentic Death line 7	 		
	Capital gain net income or	(net capital loss) {	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		·
3		or (loss) as defined in sections 12	_	1		
		line 8, column (c) (see pages 13 a		 		
_	If (loss), enter -0- in Part I, I	ine 8		3	37	/-
_	· • • • • • • • • • • • • • • • • • • •		iced Tax on Net Investment In			<u>/A</u>
(FC	or optional use by domestic	private roundations subject to the	e section 4940(a) tax on net investi	nent inco	me.)	
If a	section 4940(d)(2) applies,	leave this part blank				
11 3	section 4340(u)(z) applies,	leave tills part blank.				
			butable amount of any year in the b	ase perio	d?	Yes No
_		not qualify under section 4940(e).	- · · · · · · · · · · · · · · · · · · ·	, ,,		
1	Enter the appropriate amo		; see page 18 of the instructions be	tore maki	ng any entries. (d)	
_ c	Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
_	2008					
_	2007			 		
_	2006		<u> </u>	 		
	2005 2004			-		
_	2004		<u> </u>	 		
2	Total of line 1 column (d)			2		
3	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the		<u>-</u>	
•	_	•	s than 5 years	3		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
4	Enter the net value of non	charitable-use assets for 2009 fro	om Part X, line 5	4		.
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investmen	at income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution If line 8 is equal to or graph Part VI instructions on page	ons from Part XII, line 4	in Part VI, line 1b, and complete	8 that part	using a 1% tax	rate. See the

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			36.
	here and enter 1% of Part I, line 27b			
c	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			
3	Add lines 1 and 2			36.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		1	ONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			<u> 36.</u>
6	Credits/Payments.			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source	م لمزه	vith	
C	Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Tax p	(41	%
d	Backup withholding erroneously withheld	mait	mrg	不
7	Total credits and payments. Add lines 6a through 6d			<u>36.</u>
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Dos	Enter the amount of line 10 to be: Credited to 2010 estimated tax			
	VII-A Statements Regarding Activities		V	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1-	Yes	No X
_	participate or intervene in any political campaign?	1a		
b		1b		x
	of the instructions for definition)?	10		- ^
	published or distributed by the foundation in connection with the activities			
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. > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	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		<u> </u>
ь	If "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		<u> </u>
	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			
_	conflict with the state law remain in the governing instrument?	6		X
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		<u>├</u>
68	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions)			
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
J	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	้อก		
-	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			
	names and addresses	10		
			0-PF	(2009)

Part	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of ▶ Provident Trust Company Telephone no. ▶ (402)393-8	<u> 300</u>		
	Located at ► 8401 WEST DODGE RD STE 256, OMAHA, NE ZIP+4 ► 68114			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	<u>No</u>
1a	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?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to or pay or reimburse the expenses of a disqualified person? Yes			
	(1) Toy compensation toy or pay or remination the expensation of a disqualified personn			
	(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)?			
	(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.)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
~	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1ь		
	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?	1c		
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	İ		
	6e, Part XIII) for tax year(s) beginning before 2009? Yes No			
	If "Yes," list the years			
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)	۱.,		
	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	1		
Sa	enterprise at any time during the year?			
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 determine if the			
	foundation had excess business holdings in 2009.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
ь	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?	4Ь		

orm	990-PF (2009)		27-12		Page
Par	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)	
5a	During the year did the foundation pay or incur any amount (1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive?	ce legislation (section (see section 4955); o	r to carry on,		
	(3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charita	ner similar purposes?			•
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	· · · · ·		. Yes No	,
	(5) Provide for any purpose other than religious, charitable purposes, or for the prevention of cruelty to children of	•		. Yes No	,
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa Regulations section 53.4945 or in a current notice regard Organizations relying on a current notice regarding disaste	ıng disaster assistanc	e (see page 22 of the	instructions)?	5b
C	If the answer is "Yes" to question 5a(4), does the foundation	•			
	because it maintained expenditure responsibility for the g			Yes No	·
6a	If "Yes," attach the statement required by Regulations section Did the foundation, during the year, receive any funds, dir		nav premijims		
	on a personal benefit contract?	• •	' ' '	. Yes No	,
b	Did the foundation, during the year, pay premiums, directly	y or indirectly, on a p	ersonal benefit contrac	t?	6b
	If "Yes" to 6b, file Form 8870.				
	At any time during the tax year, was the foundation a part		•	. — —	——————————————————————————————————————
	If yes, did the foundation receive any proceeds or have an VIII Information About Officers, Directors	<u> </u>			
	and Contractors				
1	List all officers, directors, trustees, foundation ma	nagers and their c	(c) Compensation	d) Contributions to	(e) Expense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
SEE	STATEMENT 4		97.	-0-	-0-
	Compensation of five highest-paid employees (oth If none, enter "NONE."	er than those incl	uded on line 1 - see	page 23 of the inst	ructions).
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NON	E		NONE	NONE	NONE
				i i	

. ▶ NONE
Form **990-PF** (2009)

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

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If ne	one, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE	NONE
otal number of others receiving over \$50,000 for professional services	▶ NON
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>NONE</u>	
2	
All other program-related investments See page 24 of the instructions.	
3 <u>N</u> O <u>N</u> E	
「otal. Add lines 1 through 3....................................	.▶

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundations	' /
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	466,500.
b		1b	1,793.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
ď	Total (add lines 1a, b, and c)	1d	468,293.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	468,293.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	7,024.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	461,269.
6	Minimum investment return. Enter 5% of line 5	6	2,401.
Pa	Tt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ ☐ and do not complete this privation.		
1	Minimum investment return from Part X, line 6	1	2,401.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 36.		
ь	Income tax for 2009. (This does not include the tax from Part VI.) 2b		
c	Add lines 2a and 2b	2c	36.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,365.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	5	2,365.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,365.
		L - 1	
Pa	rt 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	
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	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	NONE
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when calculating when calculating when the continuous (A) and (b) reduction of tax in these years	nether the found	

Page 9

Pa	t XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				2,365.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			NONE	
b	Total for prior years. 20, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2009.				
а	From 2004 NONE				
	From 2005 NONE				
	From 2006 NONE				
d	From 2007 NONE				
	From 2008 NONE	,,,,,,,			
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$ NONE			NONE	
а	Applied to 2008, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election		NOME		
	required - see page 26 of the instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONE			
_	required - see page 26 of the instructions)	NONE			NONE
	Applied to 2009 distributable amount	NONE			NONE
5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2009	NONE			NONE
•	(If an amount appears in column (d), the same	1,01,1	-		1101112
e	amount must be shown in column (a).) Enter the net total of each column as				
6	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
	Prior years' undistributed income. Subtract				
_	line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed			j	
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				
	been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable				
_	amount - see page 27 of the instructions		NONE		
е	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page			270277	
	27 of the instructions			NONE	· · · · · · · · · · · · · · · · · · ·
f	Undistributed income for 2009. Subtract lines				
	4d and 5 from line 1. This amount must be				2,365.
7	distributed in 2010				2,303.
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE			
8	Excess distributions carryover from 2004 not	110112			
	applied on line 5 or line 7 (see page 27 of the instructions)	NONE	:		
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a	NONE		-	
10	Analysis of line 9				
	Excess from 2005 NONE				
b	Excess from 2006 NONE				
c	Excess from 2007 NONE				
d	Excess from 2008 NONE				
e	Excess from 2009 NONE				
					Form 990-PF (2009)

1 a	If the foundation has r	eceived a ruling or o	determination letter the	instructions and Part at it is a private operat		NOT APPLICA
				٠, . , , . , ,	P [Val
Ь	Check box to indicate whe		private operating found		4942())(3) or 4942(j)(5
	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct					
e	of exempt activities					
	exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
	ment 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 sup- port from an exempt organization					
	(4) Gross investment income	ny Information /C	Complete this port	only if the foundat	ion had \$5,000	
	at any time d	uring the year - se	e page 28 of the ir		ion nad \$5,000	or more in asse
а	Information Regarding List any managers of the close of any	he foundation who I	have contributed mor	re than 2% of the total more than \$5,000). (See	contributions receiv	ed by the foundation
	N/A	tax year (but only if t	ney have contributed	more than \$5,000). (See	s section 507(a)(2).)	
	List any managers of			f the stock of a corpor n has a 10% or greater i		large portion of the
	N/A					
	Information Regarding			· ·		
	Check here ▶ if the unsolicited requests for organizations under other contents.	or funds. If the foun	dation makes gifts,	to preselected charita grants, etc. (see page i d.	ble organizations a 28 of the instruction	nd does not acce ons) to individuals
а	The name, address, and N/A	telephone number o	of the person to whom	applications should be	addressed:	
b		ications should be su	bmitted and informati	on and materials they sh	ould include:	
	N/A					
C	Any submission deadlin	ies:				
	factors:	nitations on awards	, such as by geogr	aphical areas, charitabl	e fields, kinds of	institutions, or oth
SA 0 1 0	N/A					Form 990-PF (20

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment							
	If recipient is an individual.	Foundation					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	l status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient					
a Paid during the year							
		:					
	ļ						
		1					
		!					
		i					
		}					
		1					
Total			▶ 3a				
b Approved for future payment							
- · , , , ,							
		1					
	1						
Total			▶ 3b				

Part X	VI-A Analysis of Income-Produ	cing Activ	rities			
Enter gro	ss amounts unless otherwise indicated.	Unrela	ited business income	Excluded by	section 512, 513, or 514	(e)
1 Progr	am service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions.)
a	um service revenue.			_		and matriculons.
ъ _				<u> </u>	-	
-						
e					-	
f						
g F	ees and contracts from government agencies					
2 Mem	bership dues and assessments					
	st on savings and temporary cash investments					
	ends and interest from securities			14	2,640.	
	ental income or (loss) from real estate.					
	Pebt-financed property					 -
	lot debt-financed property			-		· · · · · · · · · · · · · · · · · · ·
	ntal income or (loss) from personal property					
	investment income			1.0	166 500	
	or (loss) from sales of assets other than inventory		<u>-</u> -	18	-466,500.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory			 		
b	revenue: a					-
-				<u> </u>		
е						
12 Subto	otal Add columns (b), (d), and (e)				-463,860.	
	. Add line 12, columns (b), (d), and (e)					
(See wor	ksheet in line 13 instructions on page 28 to	verify calcu	lations.)			
Part X	VI-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No		ty for whi	ch income is reported	l in column	(e) of Part XVI-A cont	tributed importantly to
▼	the accomplishment of the for page 29 of the instructions.)	undation's	exempt purposes (or	ther than b	by providing funds for	such purposes). (See
	page 23 of the histractions.)					
						
	 			-		
						
				· · · · · · · · · · · · · · · · · · ·		
			NOT APPLICABL	E		
	<u> </u>					
		-				
					····	
		 				
				· -		
						<u>.</u>

Form 990-					27-1263236				ge 13
Part X	Information Exempt Orga	Regarding 1 aņizations	Transfers To and Ti	ansactions	and Relationships	With I	Vonct	narit	able
in	the organization directl section 501(c) of the C	y or indirectly	engage in any of the f section 501(c)(3) organ	ollowing with zations) or in	any other organization of section 527, relating to	described political		Yes	No
org a Tra	anizations? nsfers from the reporting fo	undation to a no	ncharitable exempt organiza	ion of.					
(1)	Cash						1a(1)		Х
							1a(2)		X
	er transactions.								v
									X
							1b(2)		X
							1		X
									Х
							$\overline{}$		X
									X
	· ·		· ·	_	Column (b) should alw	•			
					n. If the foundation rece e of the goods, other a				
***	as in any nanoastron s	. onamig arran	goment, show in column	(a) the valu	c of the goods, other a	35613, 01	361 1100	3 160	civeu.
(a) Line n	o (b) Amount involved	(c) Name of	noncharitable exempt organizati	on (d) De	escription of transfers, transactio	ns, and shar	ıng arrar	ngeme	nts
· · · · ·									
					-				
						•			
					exempt organizations desc	cribed in		<u> </u>	ā
	tion 501(c) of the Code (ot) Yes," complete the following		501(c)(3)) or in section 527?			٠ ا	Ye:	s <u></u>	∐ No
U II	(a) Name of organization		(b) Type of organization	ition	(c) Description	n of relations	ship		
							<u> </u>		
	•								
Une	ler penalties of perjury. decl	are that I have ev	amined this return including a	romnanving set	edules and statements, and to	the best o	f my ka	owled	00.000
	ef, it is true, content, and con	ete. Declaration	of preparer (other than taxpaye	r or fiduciary) is	based on all information of wh	ich prepare	r has an	y knov	vledge.
	WITH.	1	1784 OHICOL	101/	10/2011 × Tru	stee			
စ္ 🔽	Signature of officer or trustee	1190	ident Trust Compa	Date	Title	-, -,			
Here			TNS	ARC.	Chack if	Preparer's	dentify	ng	

Preparer's identifying number (See Signature on page 30 of the instructions)

P00162244

EIN ▶ 75-1297386

75006-2584 Phone no 312-873-6900

Check if self-employed

Sign Here

Paid Preparer's Use Only

Preparer's

and ZIP code

Firm's name (or yours if

self-employed), address,

signature

01/05/2011

THOMSON REUTERS (TAX & ACCOUNTING) 2395 MIDWAY ROAD, BUILDING 1

TX

CARROLLTON

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

wame of the organization			Employer Identification number						
BACKER FAMILY CHARI		27-1263236							
Organization type (check one	s):		-						
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated a	as a private foui	ndation						
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a	private foundat	ion						
	501(c)(3) taxable private foundation								
	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the Gene	ral Rule and a S	Special Rule. See						
	filing Form 990, 990-EZ, or 990-PF that received, during the one contributor. Complete Parts I and II.	year, \$5,000 o	r more (in money or						
Special Rules									
sections 509(a)(1) a)(3) organization filing Form 990 or 990-EZ that met the 331/and 170(b)(1)(A)(vi), and received from any one contributor, do 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form	uring the year,	a contribution of the greater						
the year, aggregate)(7), (8), or (10) organization filing Form 990 or 990-EZ that re contributions of more than \$1,000 for use <i>exclusively</i> for religes, or the prevention of cruelty to children or animals. Comple	gious, charitabl	e, scientific, literary, or						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.									
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules of st answer "No" on Part IV, line 2 of its Form 990, or check the F, to certify that it does not meet the filing requirements of Sc	box on line H	of its Form 990-EZ,						
For Privacy Act and Paperwork Redu	uction Act Notice, see the Instructions	Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)						

for Form 990, 990-EZ, or 990-PF

Ar		വ

of Part I

Name of organization
BACKER FAMILY CHARITABLE TRUST 430167015

Employer identification number 27-1263236

Part I Contributors (see instruction	ors (see instructions	Contributors	Part I
--------------------------------------	-----------------------	--------------	--------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Marcia Sunderland Backer 25720 West Dodge Street Waterloo, NE 68069	\$\$ 466,500.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

of Part II

Name of organization

BACKER FAMILY CHARITABLE TRUST 430167015

__ of __ Employer identification number

<u>27-1263236</u>

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3,000 shares Ash Grove Cement Co		
-		\$\$66,500.	11/24/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -			

JSA 9E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

SECURITIES	
FROM	!!!!!
INTEREST	
AND	1 1 1
DIVIDENDS	
ı	!
Н	
PART	
990PF,	
FORM	1

	NET	INVESTMENT	INCOME	1 1 1 1 1 1 1 1	2,640.	2,640.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1	2,640.	2,640.	
						TOTAL	
			DESCRIPTION		ASH GROVE CEMENT CO COM		

STATEMENT

OTHER EXPENSES	1) 11 11 11 11 11 11 11 11 11 11 11 11 1
ı	H
PART I	 }
FORM 990PF,	

Į	NET $INVESTMENT$	INCOME	 	750.	750.	
REVENUE	AND EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1	750.	750.	
		DESCRIPTION		OTHER NON-ALLOCABLE EXPENSE -	TOTALS	

27-1263236

FORM 990PF, PART II - OTHER INVESTMENTS

BACKER FAMILY CHARITABLE TRUST 430167015

ASH GROVE CEMENT

TOTALS

ט

ENDING FMV

466,500.

466,500. STATEMENT

FORM 990PF, PART VILI - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

Provident Trust Company

ADDRESS:

8401 West Dodge Rd Ste 256

Omaha, NE 68114

TITLE:

Trustee

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION

97.

TOTAL COMPENSATION:

97.

=========