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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

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

OMB No 1545-0052

2009

Fo	r caler	dar year 2009, or tax year beginning 12/2	, 200	9, and	ending	12/31	, 20	09
G	Check	all that apply: Initial return Initial re	eturn of a former p	oublic cl	harity	☐ Final return		
	_				ne change			
Ū	se the	IRS Name of foundation			A Employer	identification number	•	
	label	•				27-1525479		
(otherwi print		to street address) Ro	om/suite	B Telephone	number (see page 10 d	of the instruction	ns)
	or type	e. 175 Admiral Cochrane Drive		201		410-224-0100	<u> </u>	
	ee Spe				C If exempt	ion application is pendir	ng, check here	▶ 🗸
	structi	741140101111111111111111111111111111111			D 1. Foreig	n organizations, check	here	▶ 🗌
Н		type of organization: 🗹 Section 501(c)(3) exempt p				n organizations meeting here and attach compi		▶□
\sqcup		n 4947(a)(1) nonexempt charitable trust 🔲 Other tax			ĺ	foundation status was		_
ı		narket value of all assets at J Accounting method	: ☑ Cash ∐ A	ccrual		07(b)(1)(A), check here	torrangetog arra	▶ □
		f year (from Part II, col. (c), Other (specify)				ndation is in a 60-mont		
1	line 16 Part I		on cash basis.)	1	under se	ction 507(b)(1)(B), chec	1	<u> </u>
ш	arti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	(d) Disbursem for charitab	ole
		the amounts in column (a) (see page 11 of the instructions)	books	ır	ncome	income	purposes (cash basis o	
_	1		202,200	-	· -		,	
	1 2	Contributions, gifts, grants, etc, received (attach schedule) Check ►□ if the foundation is not required to attach Sch B	202,200	 		 	 	—
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities						
	5a	Gross rents		<u> </u>				
	b	Net rental income or (loss)		-			ļ	
ď	1	Net gain or (loss) from sale of assets not on line 10		_				
Revenue	b	Gross sales price for all assets on line 6a						
}	7	Capital gain net income (from Part IV, line 2)						
ď	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less. Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)		<u> </u>				
_	12	Total. Add lines 1 through 11	202,200	ļ				
V.	13	Compensation of officers, directors, trustees, etc.			··			
2	14	Other employee salaries and wages						
ā	15	Pension plans, employee benefits						
Expenses	16a	Legal fees (attach schedule)		<u> </u>				
Š		Accounting fees (attach schedule)		-				
aţ.	17	Other project of the schedule) Interest RECEIVED		-				
7	17 18	Taxes (attach schedule) (see page of the instructions)		 				
Ž	19	Deprentiation (attachechedule) and depletion		1				
투	20	Depreciation (attach schadule) and depletion . Octobrancy		 				
Ă	21	Travel conferences, and meetings			-			
, T	22	Printing and publications) V.		1	_			
5	23	Other expenses (attach schedule)						
Operating and Administrativ	24	Total operating and administrative expenses.		T				,
Z.		Add lines 13 through 23	0					
Ď	25	Contributions, gifts, grants paid	0					
_	26	Total expenses and disbursements. Add lines 24 and 25	0					
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expenses and disbursements	202,200					
	b	Net investment income (if negative, enter -0-)						
	c	Adjusted net income (if negative, enter -0-) .						

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Cat No 11289X

Form **990-PF** (2009)





		Attached schedules and amounts in the description column	Beginning of year		End o	i year	
-	ırt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	е	(c) Fair M	farket Value
	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments	0	50	,000		50,000
	3	Accounts receivable ▶			_		
		Less: allowance for doubtful accounts ▶			\Box		
	4	Pledges receivable ▶		=		-	~
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable			\dashv		
	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 ▶					
Assets	8	Inventories for sale or use					
SS	9	Prepaid expenses and deferred charges		-			
•	10a	Investments – U.S. and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule) [0	152	2,200		152,338
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶					
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans	_	-			
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis ▶					-
		Less. accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ▶)					
	16	Total assets (to be completed by all filers—see the					
	_	ınstructions. Also, see page 1, item l)	0	202	2,200		202,338
	17	Accounts payable and accrued expenses					
s	18	Grants payable					
tie	19	Deferred revenue					
jje	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe ►)					
	23	Total liabilities (add lines 17 through 22)	0		0	ı	
		Foundations that follow SFAS 117, check here ▶ □				1	
es		and complete lines 24 through 26 and lines 30 and 31.					
alances	24	Unrestricted				ı	
aga	25	Temporarily restricted				ı	
8	26	Permanently restricted				ı	
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.					1
Ξ	27	Capital stock, trust principal, or current funds	I.				
Ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund				ı	
šet	29	Retained earnings, accumulated income, endowment, or other funds	0	202	2,200		
Asi	30	Total net assets or fund balances (see page 17 of the	_				
et		instructions)					
ž	31	Total liabilities and net assets/fund balances (see page 17					
		of the instructions)					
	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		net assets or fund balances at beginning of year-Part II, colur					
		of-year figure reported on prior year's return)		-	1		0
2		r amount from Part I, line 27a			2		202,200
3	Othe	r increases not included in line 2 (itemize) ▶			3		0
4	Add	lines 1, 2, and 3		[4		202,200
5		eases not included in line 2 (itemize) ▶			5		0
_6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), line	30	6		202,200

	2-story brick warehou	he kind(s) of property sold (e g , real estatuse, or common stock, 200 shs $$ MLC $$ Co $$		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>	N/A					
_ <u>b</u> _						
<u>c</u> _					<u> </u>	
_ <u>d</u>				 	-	
<u>е</u>		(f) Depreciation allowed	(a) Cost or	other basis	(h) G	in or (loss)
	(e) Gross sales price	(or allowable)		nse of sale		(f) minus (g)
<u>a</u> b						_
						
d				· · · · · · · · · · · · · · · · · · ·	f	
_ _						<u>-</u>
	Complete only for assets she	owing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (C	ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but n	ot less than -0-) or (from col (h))
а			_			
b						
С						
d						
е						
2	Capital gain net income o	Nr (not canital loce)	also enter in Pa , enter -0- in Pa		2	
3		in or (loss) as defined in sections I, line 8, column (c) (see pages 1				
	If (loss), enter -0- in Part I			}	3	
Part	V Qualification Und	der Section 4940(e) for Redu	iced Tax on N	let Investmen	t Income	
/as t		section 4942 tax on the distribut qualify under section 4940(e). E			base period?	☐ Yes ☐ N
1		ount in each column for each ye			ns before making	any entries
<u> </u>	(a)	(b)	<u> </u>	(c)		(d)
Cale	Base period years endar year (or tax year beginning in	Advicated avalifiers distribution	s Net value o	f noncharitable-use a		stribution ratio divided by col (c))
	2008					<u> </u>
	2007					······································
	2006					
	2005					· _
_	2004					
2	Total of line 1, column (d				. 2	
3		for the 5-year base period—div dation has been in existence if le			the 3	
	namber of years are real		500 than 0 your		- -	
4	Enter the net value of nor	nchantable-use assets for 2009 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6 .				. 7	
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	
		ater than line 7, check the box ii				1% tax rate See t

Part '		e inst	tructi	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) 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					
	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-)					
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	00		
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here uf 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		0	00		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		0	00		
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 0 00 Refunded ▶ 11		0	00		
	/II-A Statements Regarding Activities		Vaa	NIO		
1a	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?	4	Yes	No ✓		
L	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1a				
b	of the instructions for definition)?	1ь		1		
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials	ID				
	published or distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?	1c				
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓		
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		1		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓		
b	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		✓		
_	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	1			
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	1			
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	 '-	_			
oa	instructions) ► Maryland					
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	1			
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			1		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9_		-		
·U	names and addresses	10	 			

Part	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		✓
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address ► N/A			
14	The books are in care of ▶ Eva Coale Telephone no. ▶ 41	0-224-	0100	
	Located at ► 175 Admiral Cochrane Drive, #201, Annapolis, MD ZIP+4 ►	2140	1	···· <u>·</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year > 15			N/A
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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? Yes			
	(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 V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
С	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)):			
а	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			
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			
	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. 20 , 20 , 20 , 20			i
3a	Did the foundation hold more than a 2% direct or indirect interest in any business 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			ļ
	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	_	<u> </u>
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?	4b		_ ✓_

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Par	VII-B Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	d (contin	ued)			
5a	During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes?										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
b	Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?									<u> </u>	
С	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐ c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?										
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?		directly or in	directly	, to pay pre	emiums 	☐ Yes	☑ No			ı
b	Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870.	ns, dıre	ectly or indire	ctly, on	a personal	benefi	t contract?	? .	6b	_	<u> </u>
	At any time during the tax year, was the foundation If yes, did the foundation receive any proceeds of						☐ Yes nsaction?		7b	_	
Par	VIII Information About Officers, Direct	tors,	Trustees, F	ounda	tion Mana	agers,	Highly P	aid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, foundatio (a) Name and address	(b) Titl	agers and the age and average are week to position	(c) Co	npensation mpensation paid, enter -0-)	(d) (emplo	Contributions byee benefit perred compe	to plans	(e) Expe		count,
	R Lewis aggett Creek Loop, Genoa, NV 89411	Director - 2.0			0		<u> </u>	0			0
Betsy	A.C. Lewis aggett Creek Loop, Genoa, NV 89411	Direct	or - 2 0		0			0			0
Eva C 175 A	oale dmiral Cochrane Dr #201, Annapolis, MD 21401	Directo	or - 2 0		0	0		0	_		0
2	Compensation of five highest-paid employed If none, enter "NONE."	es (oth	er than thos	se inclu	ided on lin	ne 1—s	ee page	23 of 1	the inst	tructi	ons).
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and the hours per videvoted to p	week	(c) Comper	nsation	(d) Contribution employee in plans and donormens	enefit eferred	(e) Exper		
NONE						·		Ì			
											
Total	number of other employees paid over \$50,000				·		L				

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ipioyees,
_ 3	Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	ne, enter "NONE.
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
Total	number of others receiving over \$50,000 for professional services	_
Par	IX-A Summary of Direct Charitable Activities	
		
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
•		
3		
4		
•		
_ '		
Part	IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
Des	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N/A	
_		
2		
AII	other program-related investments. See page 24 of the instructions	
3		
Total	. Add lines 1 through 3	

Form **990-PF** (2009)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see page 24 of the instructions.)	gn foun	idations,
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	6347
b	Average of monthly cash balances	1b	2083
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	8430
e	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	0
3	Subtract line 2 from line 1d	3	8430
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	126
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8304
6	Minimum investment return. Enter 5% of line 5	6	415
Part		operatir	ng
1	Minimum investment return from Part X, line 6	1	415
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 0		
c	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	415
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	415
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	415
Part	XII Qualifying Distributions (see page 25 of the instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1.2	
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
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	0
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		er the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	***************************************	si die louildatioi

Part	XIII Undistributed Income (see page 26	of the instructions)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009 415
2	Undistributed income, if any, as of the end of 2009				413
	- · · · · · · · · · · · · · · · · · · ·			0	
a	Enter amount for 2008 only		0		·-
ь 3	Excess distributions carryover, if any, to 2009:			<u></u>	
	· 1				
a					
b	From 2005				
C	From 2006				
d	From 2007				
e	From 2008		i		
f 4	Total of lines 3a through e				
а	Applied to 2008, but not more than line 2a .			0	
b	Applied to undistributed income of pnor years		-		
	(Election required—see page 26 of the instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions) .	o			
d	Applied to 2009 distributable amount .				0
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2009	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		•		
			. 0		- ,
d	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions .		0		
e	Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions			0	
f	Undistributed income for 2009. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2010				415
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	0			
8	Excess distributions carryover from 2004 not				
0	applied on line 5 or line 7 (see page 27 of the instructions)	o			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	o			
10	Analysis of line 9:				
a	Excess from 2005				
b	Excess from 2006				
C	Excess from 2007				
ď	Excess from 2008				
	Excess from 2009				

-
Page 10
or 4942(J)(5)
(e) Total
e in assets at
Alex Control of the
the foundation
portion of the
portion of the

None

Part	XIV Private Operating Founda	i tions (see page	e 27 of the instru	ictions and Part \	/II-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for	,		private operating		
b	Check box to indicate whether the fou		-	ation described in s	ection	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for each year listed	(-,	(-,			
b	85% of line 2a	 -		 		
c	Qualifying distributions from Part XII,	·		<u> </u>		
	line 4 for each year listed					
d	Amounts included in line 2c not used directly			 	-	
_	for active conduct of exempt activities					
е	Qualifying distributions made directly					
•	for active conduct of exempt activities.	ļ				
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test enter					
	(1) Value of all assets .		1			ı
	(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					
С	"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)			<u> </u>		
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)		<u> </u>			
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income			<u> </u>		
Part					nad \$5,000 or m	ore in assets at
	any time during the year-		of the instruction	ns.)		
1	Information Regarding Foundation	_				
а	List any managers of the foundation					by the foundation
_	before the close of any tax year (but o	only if they have c	contributed more t	nan \$5,000). (See s	section 507(d)(2).)	
	R. Lewis					
b	List any managers of the foundation					rge portion of the
. .	ownership of a partnership or other e	nuty) or writen the	e loundation has a	10% of greater int	erest.	
None	Information Banavalian Contaileration	Ouent City I a	Cabalavahim	ete Duemamor		
2	Information Regarding Contribution				organizations and	does not assent
	Check here ▶ ☐ If the foundation unsolicited requests for funds. If the					
	organizations under other conditions,		-	.to. (500 page 20		, to marriadalo or
	The name, address, and telephone nu			cations should be a	addressed:	
	oale, 175 Admiral Cochrane Drive, #201,	•	• •		.dd, 0000d.	
_ va U	oale, 115 Adminal Goolingle Dilve, #201,	minapolis, MD 214	70. 710-227 - 0100			
b	The form in which applications should	be submitted an	d information and	materials they sho	onlq iucinde.	
	e Letter					
	Any submission deadlines.					
None	Any rectrictions or limitations on an	uordo ouch a - t	v. coorenheel -	aroan charitable fi	olds kinds of ins	hitutions or other
a	Any restrictions or limitations on av factors:	varus, such as t	y geographical a	ireas, chantable II	cius, kiilus OI INS	ututions, or other

Part XV Supplementary Information (continued)

3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture 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	CONTIDUTION	
а	Paid during the year				
None					1
]
		İ	}		
				l	1
					<u> </u>
	Total	<u> </u>			la
	Approved for future payment				
None					
		1			
					1
			L	<u> </u>	

Pa	rt XV	I-A · Analysis of Income-Producing Ac	ctivities				<u>¥</u>
_		ss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	
	5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions.)
1	-	gram service revenue:			-		
	a b				 		
	-		-				
	с -						
	d _		<u> </u>			ļ	
	e -						
	T -				-		
	_	Fees and contracts from government agencies					
2		nbership dues and assessments	 .,				<u> </u>
3		est on savings and temporary cash investments			 		
4		dends and interest from securities					
5		rental income or (loss) from real estate:			-		
		Debt-financed property	<u> </u>				
		Not debt-financed property			·		
6	Net	rental income or (loss) from personal property					
7		er investment income					
8	Gaın	or (loss) from sales of assets other than inventory					
9	Net	income or (loss) from special events	<u> </u>				
10		ss profit or (loss) from sales of inventory			<u></u>		
11	Othe	er revenue. a			<u> </u>		
	b _						
	_						
	e ¯						
12	Subi	total. Add columns (b), (d), and (e)					
13	Tota	II. Add line 12, columns (b), (d), and (e)				13	
		sheet in line 13 instructions on page 28 to verify					·
		Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		-
Lin	e No. ▼	Explain below how each activity for which accomplishment of the foundation's exempt instructions)	income is repo purposes (other	orted in column than by providir	(e) of Part XVI	l-A contributed in th purposes) (Se	nportantly to the e page 29 of the
_							
	-						
_							
	-						
<u> </u>							
			_				

		· ,								ugo . o
Par	t XVII		n Regarding Tra	nsfers To and Tra	nsaction	s and	Relationships With	Noncharita	ble	
1	ın se	he organization of the ction 501(c) of the	directly or indirectly				ny other organization de section 527, relating to		Yes	No
	organizations?									
а			·	to a noncharitable ex	empt orga	ınızatıor	n of:	10/	ما	
	. ,	Cash				•		1a(1a(/
b	٠,,	r transactions:				• •				<u> </u>
			a noncharitable ex	empt organization				1ь(1)	1
				table exempt organiz	ation .	-		1b(1
	(3) F	lental of facilities	, equipment, or oth	er assets				1b(3)	1
			_					<u>1b(</u>		✓
		oans or loan gua						<u>1b(</u>		✓
				ship or fundraising so				<u>1b(</u>		1
c d							Column (b) should alv			narkot
u							n. If the foundation rece			
							of the goods, other ass			
(a) Li	ne no	(b) Amount involved	(c) Name of none	charitable exempt organiza	ition	(d) Desc	enption of transfers, transaction	ons, and sharing a	rrangem	ents
			N/A							
									·	
		 	ļ							
	-+		 					_		
			<u> </u>							
	+									
										
	-+									
2a	ls th	e foundation dire	ectly or indirectly a	iffiliated with or rela	ted to, one	e or mo	ore tax-exempt organiz	zations		
							ion 527?	_	es 🗹	No
b	If "Ye	es," complete the	e following scheduli	e.	_					
		(a) Name of organ	ıızatıon	(b) Type of or	rganization		(c) Description	ion of relationship		
N/A			 						_	
		<u> </u>		ļ					_	
			<u> </u>							
		$\overline{}$	$\overline{}$	 						
	Under	penalties of perjury,	Cddlara the L bays by	proposed this seture, including		vina scha	dules and statements, and t	to the best of my	knowlec	loe and
ļ	belief, i	t is true, correct, and	complete Declaration of	f preparer (other than taxpa	ayer or fiducia	ry) is bas	ed on all information of which	n preparer has any	knowled	dge and
	L COUL Man			~	1 81	12/10	Director			
ē	Sign	nature of officer or tru	stee		Date		Title			
¥					Date		l I	reparer's identii	, ,	
Sign Here	r's V							umber (see Sigi		
S	aid On	Preparer's					self-employed ► ☐ pa	age 30 of the in	struCti O i	ns)
	Paid Preparer's Use Only	signature	ure if A				1			
	4.5	Firm's name (or you self-employed), add	dress,				EIN ►			
	and 7IP code									

Schedule B

(Form 990, 990-EZ, or 99Q-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization					Employer identification number		
The David R. and Betsy Lewis Foundation, Inc					1525479		
Organization type (check or	ne):	-					
Filers of:	Se	ction:					
Form 990 or 990-EZ		501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private for	oundatio	on			
		527 political organization					
Form 990-PF		501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private found	ation				
		501(c)(3) taxable private foundation					
		rered by the General Rule or a Special Rule. r), or (10) organization can check boxes for both the General Rule	and a	Special	Rule. See		
For an organization fi		Form 990, 990-EZ, or 990-PF that received, during the year, \$5,0 ontributor. Complete Parts I and II.	00 or n	nore (ın	money or		
Special Rules							
sections 509(a)(1) and	170	ganization filing Form 990 or 990-EZ that met the 331/4 % support 0(b)(1)(A)(vi), and received from any one contributor, during the ye the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ	ar, a co	ontributi	on of the greater		
the year, aggregate c	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, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
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							
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 390-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

	1		- 1			
Page		Qf		of	Part	

Schedule	В	(Form	990.	990-EZ.	or 990-	·PF)	(2009)

Name of organization
The David R. and Betsy Lewis Foundation, Inc.

Employer identification number 27 1525479

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	David R. Lewis 495 Daggett Creek Loop Genoa, NV 89411	\$\$	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.)

Employer identification number 27 1525479

Part II	Noncash	Property	(see	instructions)
---------	---------	-----------------	------	---------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1st	2000 Shares - Conocophillips 2000 shares - Massmatual Corporate Invs Inc		
		\$ 152,200	12 / 29 / 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
		\$	<i>l</i>

The David R. and Betsy Lewis Foundation, Inc. Form 990-PF

Part II - 10b

Total to Form 990-PF, Part II, Line 10B	152,200	152,338
Massmutual Corp Invs Inc - 2000 shares	50,600	50,198
Conocophillips - 2000 shares	101,600	102,140
Description	<u>Value</u>	<u>Value</u>
	ROOK	Fair Market

Part VII-A - 10

David R. Lewis 495 Daggett Creek Loop Genoa, NV 89411

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

• If y	ou are	filing for an Automatic 3-Month Extension, complete only Part I and check this bot filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (plete Part II unless you have already been granted an automatic 3-month extension on a	on page 2						
Par	Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).								
	rporatio I only .	n required to file Form 990-T and requesting an automatic 6-month extension—check	this box	and com	plete ► □				
		porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form noome tax returns.	7004 to red	quest an	extension of				
one elect returi	of the r ronically ns, or a	illing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au eturns noted below (6 months for a corporation required to file Form 990-T). Howe if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed arone details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file states.	ver, you c s 990-BL, nd signed p	annot fil 6069, or age 2 (P	e Form 8868 8870, group art II) of Form				
Туре	or	Name of Exempt Organization	Employer	identific	ation number				
print	:	David R and Betsy Lewis Foundation Inc	27	15	25479				
File by due da	the ate for	Number, street, and room or suite no If a PO box, see instructions							
filing y return		175 Admiral Cochrane Drive, #201							
instruc		City, town or post office, state, and ZIP code. For a foreign address, see instructions. Annapolis, MD 21401							
Chec	ck type	of return to be filed (file a separate application for each return).							
□ F	orm 990	Form 990-T (corporation)		Form 4					
	orm 990	_		Form 5					
	orm 99		ᆜ	Form 6	•				
√ F	orm 99	O-PF		Form 8	8870				
Tele If to	ephone the orga this is fo	No. ► (443) 716-2573 FAX No. ► (410) 224 nization does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN). group, check this box ► □ . If it is for part of the group, check this box		and	▶ □ If this is attach				
1	1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time untilAugust 15, 20_10 , to file the exempt organization return for the organization named above The extension is for the organization's return for ▶ □ calendar year 20or								
	▶ ☑	tax year beginning 12/22, 20 09, and ending			, 20				
2	If this t	ax year is for less than 12 months, check reason: 🛭 Initial return 🗋 Final return [☐ Change	ın acco	unting period				
За		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax y nonrefundable credits. See instructions.	≺, 3a	\$	0				
ь	If this a	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tants made. Include any prior year overpayment allowed as a credit.			0				
С	Balanc	e Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymei). See instructions.	d, nt	\$	0				
<u></u>									
	-	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 84 instructions.	os-EU and	rorm 8	0/9-EO				

Form I	8868 (Rev	4-2009)			Page 2				
Note	.Only c	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and omplete Part II if you have already been granted an automatic 3-month extension on a previously filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			. ► □ 68.				
Par	t II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies	neede	ed).				
Type	/pe or Name of Exempt Organization Employer identification number								
File by extend due da	led	Number, street, and room or suite no If a P O box, see instructions	or IRS use	only	-				
filing to return instruc	he See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
Chec	k type	of return to be filed (File a separate application for each return)							
	orm 990			Form 60)69				
□ F	orm 990	0-BL		Form 88	370				
□ F	orm 990								
STO	P! Do no	t complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly filed	Form 8868.				
• The	books	are in the care of ▶							
Tel	enhone	No. ► () FAX No ► ()							
		nization does not have an office or place of business in the United States, check this business.			▶ □				
	_	a Group Return, enter the organization's four digit Group Exemption Number (GEN)							
		group, check this box							
		names and EINs of all members the extension is for							
4	l reque	st an additional 3-month extension of time until	20						
5		endar year, or other tax year beginning, 20, and ending			. 20				
6	If this t	ax year is for less than 12 months, check reason. Initial return Final return	Change i	accon	inting period				
7		detail why you need the extension							
-									
8a	If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,							
		y nonrefundable credits. See instructions.	8a	\$					
b	If this a	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
_		ed tax payments made. Include any prior year overpayment allowed as a credit and any							
		paid previously with Form 8868.	8b	\$					
c		Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit							
_	with FTE	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$					
		Signature and Verification							
		of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to , and complete, and that I am authorized to prepare this form	the best of m	y knowled	dge and belief,				
Signat	ure 🕨	Title ▶ Director	Date ►	05	/14/10				
			Foi	m 8868	Rev 4-2009)				