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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 2009

Department of the Treasury

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

Internal Revefue Service For calendar year 2009, or tax year beginning and ending Final return G Check all that apply Initial return Initial return of a former public charity Address change Name change Amended return Employer identification number Name of foundation Use the IRS 31-1142558 label. Miami County Foundation Telephone number (see page 10 of the instructions) Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite 937-773-9012 print 317 N Wayne St or type If exemption application is pending, check here See Specific City or town, state, and ZIP code 1 Foreign organizations, check here Instructions. OH 45356 Piqua 2 Foreign organizations meeting the 85% test, check here and attach computation Check type of organization |X| Section 501(c)(3) exempt private foundation 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 Cash X Accrual J Accounting method I Fair market value of all assets at end 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 10, 207, 383 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Analysis of Revenue and Expenses (The (a) Revenue and Part I (d) Disbursements (b) Net investment (c) Adjusted net for charitable expenses per 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) 32,992 Contributions, gifts, grants, etc., received (attach schedule) 1 Check ► X If the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 309,985 309,985 309,985 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Revenue -781,064 Net gain or (loss) from sale of assets not on line 10 Stmt 1 2,515,710 Gross sales price for all assets on line 6a 160 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications Gross sales less returns & allowances Less Cost of goods sold h C Gross profit or (loss) (attach sc Other income (attach schedule) 11 Total. Add lines 1 through 116 309,985 -438,087 310,145 12 Compensation of officers, directors, trustees, etc € 37,554 1,878 35,676 13 Other employee salaries and wages N. UT 14 Pension plans, employee benefit 15 16a Legal fees (attach schedule) h Accounting fees (attach schedule) Other professional fees (attach schedule) С 17 3,184 Taxes (attach schedule) (see page 14 of the instructions) Stmt 2 2,846 -33818 120 120 Depreciation (attach schedule) and depletion Stmt 3 19 3,522 20 7,043 3,521 Occupancy 801 801 21 Travel, conferences, and meetings 2,504 2,504 22 Printing and publications Stmt 4 46,232 29,748 16,484 23 Other expenses (att sch) Total operating and administrative expenses 24 Add lines 13 through 23 97,100 34,929 62,171 205,431 205,431 25 Contributions, gifts, grants paid 302,531 34,929 0 Total expenses and disbursements. Add lines 24 and 25 267,602 26 Subtract line 26 from line 12 -740,618 Excess of revenue over expenses and disbursements 275,216 Net investment income (if negative, enter -0-) 309,985 Adjusted net income (if negative, enter -0-)

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

Form 990-PF (2009)

SCANNED

Fo	rm 990	p-PF (2009) Miami County Foundation	31-11425	8	Page <b>2</b>
-	David I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
_ '	Part I	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash—non-interest-bearing	40,682	12,501	12,501
1	2	Savings and temporary cash investments	950,475	632,680	632,680
	3	Accounts receivable ► 40 , 782			
-		Less allowance for doubtful accounts ▶	37,689	40,782	40,782
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
l	5	Grants receivable			
ı	6	Receivables due from officers, directors, trustees, and other			
ł		disqualified persons (attach schedule) (see page 16 of the			
	-	instructions)			
İ	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶			
ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	1,652	5,388	5,388
As	10a	Investments—U S and state government obligations (attach schedule) Stmt 5	278,018	286,789	286,789
	b	Investments—corporate stock (attach schedule) See Stmt 6	5,542,462	7,460,173	7,460,173
	C	Investments—corporate bonds (attach schedule)  See Stmt 7	1,790,039	1,768,520	1,768,520
	11	Investments—land, buildings, and equipment basis			······································
- 1		Less accumulated depreciation (attach sch.)			
-	12	Investments—mortgage loans			
1	13	Investments—other (attach schedule)			
ı	14	Land, buildings, and equipment basis ► 3 , 483			
ł		Less accumulated depreciation (attach sch ) ► Stmt 8 3,472	133	11	11
	15	Other assets (describe See Statement 9)	539	539	539
	16	Total assets (to be completed by all filers—see the			
1		instructions Also, see page 1, item I)	8,641,689	10,207,383	10,207,383
╛	17	Accounts payable and accrued expenses	-65		
,	18	Grants payable	21,240	16,480	
<u>ĕ</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
曺	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ )			
	23	Total liabilities (add lines 17 through 22)	21,175	16,480	
T		Foundations that follow SFAS 117, check here ▶ X			
S		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	24	Unrestricted	7,346,969	8,717,065	
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted	1,273,545	1,473,838	
힏		Foundations that do not follow SFAS 117, check here ▶			
. <del>5</del>		and complete lines 27 through 31.			
딝	27	Capital stock, trust principal, or current funds			
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
set	29	Retained earnings, accumulated income, endowment, or other funds			
AS:	30	Total net assets or fund balances (see page 17 of the			
j (		instructions)	8,620,514	10,190,903	
ž	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	8,641,689	10,207,383	
	Part I	II Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with		_ <del></del> _
		of-year figure reported on prior year's return)		1	8,620,514
2		amount from Part I, line 27a		2	-740,618
		r increases not included in line 2 (itemize) > See Statement 10		3	2,311,007
		ines 1, 2, and 3		4	10,190,903
5	Decre	eases not included in line 2 (itemize) ▶		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b	o), line 30	6	10,190,903
					Form 990-PF (2009)

267,602

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instru	uctions)				
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			5,	504	
	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-)	<del></del> -			0	
3	Add lines 1 and 2	i		5,	504	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5,	504	
	Credits/Payments					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 9,553					
	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			_		
	Total credits and payments Add lines 6a through 6d	ļ <u></u>		9,	<u>553</u>	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached8					
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			4,	<u>049</u>	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 4,049 Refunded ▶ 11				_	
Pa	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					
	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					
	published or distributed by the foundation in connection with the activities				х	
С						
d						
	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$					
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		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?	ĺ	5		Х	
	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	Ì	7	X		
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) ▶ OH					
	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	X		
	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					X	
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ļ				
	names and addresses	1	10		X	

Form	990-PF(2009) Miami County Foundation 31-1142	558			Р	age 5
	urt VII-A Statements Regarding Activities (continued)					<u> </u>
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	L	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 a	plication?		13	X	<u> </u>
	Website address ► N/A		007 7	772	001	_
14		Telephone no 🕨	931-1	13-	901	2
	P.O. Box 1526	710.4 6	15254	=		
4-	Located at Piqua, OH	ZIP+4 ▶	45356	,		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		15			
- D.	and enter the amount of tax-exempt interest received or accrued during the year  irt VII-B Statements Regarding Activities for Which Form 4720 May Be Requi		15	-		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ieu			Yes	No
1-2	During the year did the foundation (either directly or indirectly)				163	140
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	٠				
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_				
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Re	gulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)	?	N/A	1b		<u></u>
	Organizations relying on a current notice regarding disaster assistance check here		▶ 📙			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	t				
	were not corrected before the first day of the tax year beginning in 2009?			1c		X
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	П.,	₹ <b>.</b>			
	6e, Part XIII) for tax year(s) beginning before 2009?	∐ Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2) 10	N/A	2b		İ
	all years listed, answer "No" and attach statement—see page 20 of the instructions)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		11/11	20		
С	► 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
••	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation of	_	_			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by t					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the laps					
	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 )		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable pur	poses?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardi					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning	ın 2009?		4b		<u> </u>
			Fo	rm 99	0-PF	(2009)

Form 990-PF (2009)

orn	1990-PF (2009) Miami County Foundation		.142558				P	age <b>6</b>		
Pa	art VII-B Statements Regarding Activities for Which Form	4720 May Be R	Required (cor	ntinued	<u>()</u>					
ā ā	During the year did the foundation pay or incur any amount to				_					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1945(e))?		Yes	X No					
	(2) Influence the outcome of any specific public election (see section 4955), or		_							
	directly or indirectly, any voter registration drive?				X No					
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes	X No					
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in	_		_					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the inst			Yes	X No					
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or				_					
	purposes, or for the prevention of cruelty to children or animals?			Yes	X No					
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	er the exceptions de	escribed in				`			
	Regulations section 53 4945 or in a current notice regarding disaster assistance				N/A	5b				
	Organizations relying on a current notice regarding disaster assistance check he			▶						
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from				_					
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes	No					
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)		· <u> </u>		<del>_</del>					
Sa	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	av premiums								
_	on a personal benefit contract?			Yes	X No					
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	rsonal benefit contr	ract?		_	6b		Х		
~	If "Yes" to 6b, file Form 8870									
72	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Yes	X No					
	If yes, did the foundation receive any proceeds or have any net income attributa		on?		N/A	7b				
	ert VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,									
,	and Contractors		g,	,	,	,				
1 1	List all officers, directors, trustees, foundation managers and their compensa	tion (see page 22	of the instruction	ons).						
	, , , , , , , , , , , , , , , , , , ,				ontributions to					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	empl	loyee benefit		pense a			
	(-)	devoted to position	-0-)		and deferred npensation	Othe	r allowa	nces		
Se	ee Statement 11			1						
	0 0000mant 12									
		-								
2	Compensation of five highest-paid employees (other than those included or	line 1—see nage	23 of the instru	ctions)		<del></del>				
_	If none, enter "NONE."	i iiic i see page	20 of the mone	otionoj.						
	in Hone, onto Hore.			(d) Co	ontributions to					
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	èmpi	loyee benefit		pense a			
	(a) Name and address of each employee paid more than 600,000	devoted to position	(0,00,0		and deferred npensation	othe	r allowa	nces		
	nate.			1	<del>,</del>					
NC	DNE									
				+						
		<del>                                     </del>		<u> </u>		<del>                                     </del>				
		<del>                                     </del>		+		<del>                                     </del>				
	I number of other employees paid over \$50,000	<u> </u>	L				-j			

Part VIII Information About Officers, Directors, Trustees, Found and Contractors (continued)  3 Five highest-paid independent contractors for professional services (see page 23  (a) Name and address of each person paid more than \$50,000		
Five highest-paid independent contractors for professional services (see page 23		:: "
		NE.
(a) and and a an an an an an an an an an an an an a	(0) (3) 0 0 0 0	(c) Compensation
NONE		
<del></del>		
tal number of others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
ust the foundation's four largest direct charitable activities during the tax year. Include relevant statistical prognizations and other beneficiaries served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
N/A	<del></del>	
21/ 22		
2		
3		
,		
Part IX-B Summary of Program-Related Investments (see page	24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on line		Amount
N/A		
2		
All other program-related investments. See page 24 of the instructions		
1		
tal. Add lines 1 through 3		

Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 267,602 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see page 26 of the instructions) Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2009)

Pa	urt XIII Undistributed Income (see page 26 of	the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				534,456
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009				
	From 2004				
	From 2005 42,597				
	From 2006		,		
_	From 2007 66,225				
	From 2008 22,277				
_	Total of lines 3a through e	131,099			
4	Qualifying distributions for 2009 from Part XII,				
•	line 4 ▶ \$ 267,602				
2	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior years				
U	(Election required—see page 26 of the instructions)				
_	· · · · · · · · · · · · · · · · · · ·				*
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				267,602
	Applied to 2009 distributable amount				207,002
	Remaining amount distributed out of corpus	121 000			131,099
5	Excess distributions carryover applied to 2009	131,099			131,099
	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions	***************************************			
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be		•		
	distributed in 2010				135,755
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)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9				
а	Excess from 2005				
b	Excess from 2006				
c	Excess from 2007				
d	Excess from 2008				
e	Excess from 2009				
					200 DE

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orm	990-PF (2009) Miami County	y Foundation	1	31-11425	58	Page 10
	rt XIV Private Operating For			ructions and Part	VII-A, question 9	)
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for	2009, enter the date of	f the ruling	•		
b	Check box to indicate whether the found	ation is a private opera	ting foundation descri	bed in section 4	942(J)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	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		<del></del>			
c	Qualifying distributions from Part XII,					
·	line 4 for each year listed					ļ
d	Amounts included in line 2c not used directly				-	
ď	· · · · · · · · · · · · · · · · · · ·					
	for active conduct of exempt activities				-	<del> </del>
е	Qualifying distributions made directly					
	for active conduct of exempt activities	i				
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					į
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					ļ
	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)			<del></del>		
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
P <sub>2</sub>	rt XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5 000 or more	o in assets at
ı a	any time during the y	•			αα ψο,σοσ στ πιστ	t iii assots at
1	Information Regarding Foundation Ma		or the mandene	113.1		
		=	than 20/ of the total	contributions received	by the foundation	
а	List any managers of the foundation who					
	before the close of any tax year (but only <b>N/A</b>	ir they have contribute	d more than \$5,000)	(See Section 507(u)(2)	1)	
	List any managers of the foundation who	100/ 100/				<del></del>
b					portion of the	
	ownership of a partnership or other entity	y) of which the foundati	on has a 10% or grea	ter interest		
	N/A				· · · · · · · · · · · · · · · · · · ·	
2	Information Regarding Contribution, G					
	Check here ▶ ☐ If the foundation only	=		_		
	unsolicited requests for funds If the four			of the instructions) to	individuals or	
	organizations under other conditions, col				······································	
а	The name, address, and telephone numl	=	• •	d be addressed		
	Miami County Foundat					
	c/o Douglas Murray I					
b	The form in which applications should be					
	Forms can be request	ted at the a	bove addre	ss	<del> </del>	
С	Any submission deadlines					
	August 31.					
d	Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable fi	elds, kinds of institution	ns, or other factors	
	See Statement 12			<u> </u>	<del>.</del>	
	<del></del>					Form <b>990-PF</b> (2009)

Page 11

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year Restricted Contributions				45,800
Unrestricted Contribution	-			159,631
Total			<b>▶</b> 3a	205,431
b Approved for future payment				
N/A				
Total			<b>▶</b> 3b	
ı Olai	<del>.</del>	<del></del>	<b>▶</b> 30	

Form 990-PF (2009) Miami County Foundation 31-1142558 Page 12 **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 (e) Enter gross amounts unless otherwise indicated Related or exempt (c) function income (b) (d) Exclusion code Business code Amount Amount (See page 28 of the instructions) 1 Program service revenue g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 14 309,985 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 18 160 -781,224 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a \_ b\_ 0 310,145 -781,224 12 Subtotal Add columns (b), (d), and (e) -471,079 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28 to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the  $\blacksquare$ instructions) N/A

_	art XVII	Information R		ransfers To and	1 Transactio	ns a	nd Relationsh	ips With I	Nonchai	ritable	u	10 10
• •	4,0,70011	Exempt Organ	-									
1	Did the c	rganization directly or		age in any of the follo	owing with any (	other o	rganization descri	bed			Yes	No
'		n 501(c) of the Code (									. 00	
	organiza		other than occ	acti de r(e)(e) ergam	24110110) 01 111 00		527 ( O.E.M. 9 to po					
_	•	s from the reporting fo	undation to a l	noncharitable evemn	nt organization o	.f						
а			unuation to a	nonchantable exemp	n organization o	''				10(1)		v
	(1) Cash									1a(1)		$\frac{x}{x}$
_	(2) Othe									1a(2)		
b	Other tra											77
		s of assets to a nonch		-						1b(1)		<u>X</u>
		hases of assets from			. nc			-	-	1b(2)		<u>X</u>
	(3) Rent	al of facilities, equipm	ent, or other a	ssets						1b(3)		<u>X</u>
	(4) Rein	bursement arrangeme	ents							1b(4)		X
	(5) Loar	s or loan guarantees								1b(5)		<u>X</u>
	(6) Perfe	ormance of services of	r membership	or fundraising solicit	ations					1b(6)		_ <u>X</u> _
С	Sharing	of facilities, equipment	, mailing lists,	other assets, or paid	employees					1c		<u>x</u>
d	If the ans	swer to any of the abo	ve is "Yes," co	mplete the following	schedule Colu	mn (b)	should always sh	ow the fair m	narket			
	value of	the goods, other asset	ts, or services	given by the reporting	ig foundation. If	the for	undation received	less than fai	r market			
	value in a	any transaction or sha	ring arrangem	ent, show in column	(d) the value of	the go	ods, other assets	, or services	received			
(	a) Line no	(b) Amount involve	d (c) Nam	e of noncharitable exem	ipt organization		(d) Description of tra	insfers, transac	ctions, and s	sharing arrange	ements	
1/	A					<u> </u>						
									·			
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			1									
_			+									
		<del></del>										
						<u> </u>						
				<del></del>		1				· · · · · · · · · · · · · · · · · · ·		
			<del></del>			-				<del></del>		
						├				<del> </del>		
						-						
						<b> </b>						
						<u></u>						
2a	Is the fou	indation directly or ind	rectly affiliate	d with, or related to,	one or more tax	-exem	pt organizations			_		
	describe	d in section 501(c) of t	he Code (other	er than section 501(c	)(3)) or in section	n 5277	7			Y€	s X	No
b	If "Yes,"	complete the following	schedule						_			
		(a) Name of organization	I	(b) Type of or	rganization		(6	c) Description	of relationsh	ıp		
	N/A							•				
								<del>-</del>				
П	Under nen	altres of perjury, I declare	that I have evan	nuned this return, includi	na accompanying	schodu	lee and statements	and to the hest	of my know	dedge and		
	belief, it is	true, correct, and comple	te Declaration o	f preparer (other than ta	expayer or fiduciary	y) is bas	sed on all information	of which prepa	arer has any	knowledge		
	<b>k</b> 21	Day 1 1 1 1 1 1 1 1	200	_	1180	A . A	<b>L</b>	1.	1			
ا رو	Sign	ture of officer or trustee	Muua	<del>y</del>	<b>6 30 - ∀ 6</b> Date	010	<b>▶</b> <del>,</del> ,	tle	une			
Here	, o.g.i.a	tare or greet or tradice	<del></del>					1	Т	Preparer's identify	/ina	
		D					Date	Check If		number (see Sigi	nature o	in .
	ا چ کے	Preparer's signature	<b>D</b>				06/03/10	self-employe		page 30 of the ins		
ō		signature F Sam	B. Brown		1-21 00	71=	06/23/10	<u>'</u>		P00178	03/	
	Paid Preparer's Use Only	Firm's name (or yours if	_	ner & Stic	KeI, CPA	A'S,	, Inc.		2	411-11	259	58
1	۱ - ۵	self-employed), address		Box 739					EIN ► 3		_	
		and ZIP code	Troy	, OH 4537	3				Phone no	937-33		
										Form 990	)-PF	(2009)

560 Miami County Foundation 31-1142558 FYE: 12/31/2009		Federal St	deral Statements		6/23/	6/23/2010 12:01 PM
	Statement 1	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	art I, Line 6a - Sal	e of Assets		,
Description		How Received				
Whom Date Sold Acquired	Date Sold	Sale Price	- Cost	Expense	Depreciation	Net Gain / Loss
Edward Jones - Realized Gains Various	S Various \$	Purchase 379,558 \$	\$ 958,856		v	\$ -189,298
Dailh - Jock Sal	ss Various	rurchase 1,603,719 Purchase	2,006,209			-402,490
	Various	532,273	721,709		-	-189,
Total	๛ <sup>แ</sup>	2,515,550 \$	3,296,774 \$	0	0   o	\$ -781,224
	Statement 2	nt 2 - Form 990-PF,	F, Part I, Line 18 - Taxes	Taxes	-	
Description		Total	Net Investment	Adjusted Net	sted st	Charitable Purpose
Tax on Investment Income Payroll Taxes Taxes Withheld on Dividends		-624 3,317 153	\$ -624 133 153	φ.		3,184
Total	w.	2,846	\$ -338		0	3,184
	Statement 3	- Form 990-PF,	Part I, Line 19 - De	- Depreciation		
Description	L					
	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
- Fifth Third \$ \$ \$	24		<b>ω</b>	24	\$ 24	v
- Unity bank - ns bank	24			24	24	
ין ט ל	24			24	24	
	24			24	24	
					-	
						1-3

# 560 Miami County Foundation 31-1142558 FYE: 12/31/2009

# Federal Statements

		Adjusted Net Income		0
		Net Investment Income	24	120 \$
ation (continued)		Current Year Depreciation	\$ 24 \$	\$ 120 \$
- Depreci		Life		
m 990-PF, Part I, Line 19 - Depreciation (continued)		Method		
Statement 3 - Form 9		Prior Year Depreciation	24	120
ଧ	Description	Cost Basis	<b>‹</b>	\$ 0
		Date Acquired	- Dalton \$	Total \$ .

	Charitable Purpose	৵			803	226	2,181	230	6,554	2,040	4,350	\$ 16,484
penses	Adjusted Net	S							•			\$
, Line 23 - Other Ex	Net Investment			25,398							4,350	29,748
Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	<b>ب</b>		25,398	803	226	2,181	230	6,554	2,040	8,700	\$ 46,232
	Description		Expenses	Investment Fees	Dues and Subscriptions	License and Fees	Insurance	Misecllaneous	Supplies	Postage	Professional Fees	Total

560 Miami County Foundation

31 1142558

**Federal Statements** 

FYE: 12/31/2009

	Description							
	-		 Beginning of Year	_	End of Year	Basis of Valuation		Fair Market Value
			\$ 278,018	\$_	286,789		\$_	_286,789
Total		-	\$ 278,018	\$	286,789		\$_	286,789

#### Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description				
	 Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
	\$ 5,542,462 \$	7,460,173		\$ 7,460,173
Total	\$ 5,542,462 \$	7,460,173		\$ 7,460,173

#### Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description				
	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
	\$ 1,790,039	\$ 1,768,520	Ş	1,768,520
Total	\$ 1,790,039	1,768,520	Š	1,768,520

	<u>.</u>					 	 		 	 
6/23/2010 12:01 PM	•	Net FMV	\$ 11							80
	Equipment	End Accumulated Depreciation	\$ 3,472						-	
ements	Statement 8 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment	End Cost / Basis	\$ 3,483							
Federal Statements	1 990-PF, Part II, Line 14	Beginning Net Book	\$ 133							
560 Miami County Foundation 31-1142558 FYE: 12/31/2009	Statement 8 - Form	Description	Office Equipment Total							

560 Miami County Foundation

31-1142558

#### **Federal Statements**

6/23/2010 12:01 PM

FYE: 12/31/2009

#### Statement 9 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	Fair Market Value
Deposit - Rent Deposit - Electric Deposit - BWC	\$ 350 166 23	\$ 350 166 23	\$ 350 166 23
Total	\$ 539	\$ 539	\$ 539

#### Statement 10 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount
Unrealized Appreciation of Investments Rounding	\$ 2,311,005
Total	\$ 2,311,007

560 Miami County Foundation 31-1142558 FYE: 12/31/2009	Federal Statements	tements		. 6/23/	6/23/2010 12:01 PM
Statement 11 - Form 990-PF		1 - List of Of	Part VIII, Line 1 - List of Officers, Directors, Trustees,	stees	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Joe Duncan P.O. Box 1526 Piqua OH 45356	·   	2.00	0	0	0
Donna Favorite P.O. Box 1526 Piqua OH 45356	Vice-Pres.	2.00	0	0	0
Andy Pratt P.O. Box 1526 Piqua OH 45356	Secretary	2.00	0	0	0
Doug Murray P.O. Box 1526 Piqua OH 45356	Treasurer	2.00	0	0	0
Susan Davis P.O. Box 1526 Piqua OH 45356	Assist Treas	2.00	0	0	0
Richard Adams P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
D. Ann Baird P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Leesa Baker P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Carol Coate P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
		:		-	11

560 Miami County Foundation 31-1142558 FYE: 12/31/2009	Federal Statements	tatements		6/23/2	6/23/2010 12:01 PM
Statement 11 - Form 990-PF,	990-PF, Part VIII, Lin	e 1 - List of Offic	Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)	\$ <del>0</del>	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Dan Dickerson P.O. Box 1526 Piqua OH 45356	Director		0	0	0
Candace Goodall P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Joanna Hill Heitzman P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Christine J. Hulme P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Kay McKinney P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Jan Mottinger P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Jim Oda P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Bill Posey P.O. Box 1526 Piqua OH 45356	Director	2.00	0	0	0
Cheryl Stiefel-Francis P.O. Box 1526 Piqua OH 45356	Exec. Dir.	20.00	37,554	0	0
					11

560 Miami County Foundation

31-1142558

#### **Federal Statements**

6/23/2010 12:01 PM

FYE: 12/31/2009

Form 990-PF,	Part XV,	Line 2b -	<b>Application</b>	Format and	Required	<b>Contents</b>

Description

Forms can be requested at the above address.

#### Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

August 31.

#### Statement 12 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

Tax exempt organizations in Miami County Ohio & Students residing in Newton Township-Miami County.

Department of the Treasury Internal Revenue Service

Name(s) shown on return

### Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return

OMB No 1545-0172

Identifying number

31-1142558 Miami County Foundation Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. 2 Total cost of section 179 property placed in service (see instructions) 2 3 800,000 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 q Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12. 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See Instr.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 120 Other depreciation (including ACRS) 16 16 Part III MACRS Depreciation (Do not include listed property ) (See instructions.) Section A MACRS deductions for assets placed in service in tax years beginning before 2009 17 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (business/investment use placed in (e) Convention (f) Method (a) Depreciation deduction only-see instructions) 19a 3-year property b 5-year property 7-year property C 10-year property 15-year property 20-year property S/L 25-year property 25 yrs Residential rental S/L 27 5 yrs MM property MM S/L 27 5 yrs Nonresidential real MM 39 yrs S/L property MM S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 40-year S/L 40 vrs MM Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 120 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

(Rev April 2009)

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue		▶ File a separate application for each return.			
		tomatic 3-Month Extension, complete only Part I and check this box			► X
		ditional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)			_
	lete Part II uni	ess you have already been granted an automatic 3-month extension on a previously filed For		3	
Part I	Automati	c 3-Month Extension of Time. Only submit original (no copies needed).			
A corporation	required to file	Form 990-T and requesting an automatic 6-month extension—check this box and complete			
Part I only					▶ 🗌
•	orations (includ come tax-return	ing 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an exters	nsion o	f 	
Electronic Fil	ling (e-file). Ge	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension of ti	me to f	ıle	
		ow (6 months for a corporation required to file Form 990-T) However, you cannot file Form 88			
		the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870			
		onsolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Pa		Form	
8868 For mo	re details on th	e electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonpro			· · · · · · · · · · · · · · · · · · ·
Type or	Name of Ex	empt Organization	mploy	er identifica	ation number
print	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Country Rosendation 2	1_1	142558	•
File by the due date for			7-1	142556	
filing your		eet, and room or suite no. If a P O. box, see instructions  Wayne St			
return See		r post office, state, and ZIP code. For a foreign address, see instructions			
i) i 5 (i dollori 3	Piqua	OH 45356			
Check type o		filed (file a separate application for each return)			
Form 99		Form 990-T (corporation)		For	m 4720
Form 99	90-BL	Form 990-T (sec 401(a) or 408(a) trust)		For	m 5227
Form 99	90-EZ	Form 990-T (trust other than above)		For	m 6069
X Form 99	90-PF	Form 1041-A		For	m 8870
Telephone If the orga If this is fo for the whole a list with the I reques until 0	anization does or a Group Ret group, check t names and Ell st an automatio	FAX No ▶  not have an office or place of business in the United States, check this box  urn, enter the organization's four digit Group Exemption Number (GEN) If  nis box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attack  Ns of all members the extension will cover  3-month (6 months for a corporation required to file Form 990-T) extension of time  , to file the exempt organization return for the organization named above The extension is	this is ach		▶ □
► X	calendar year	2009 or			
▶ ∐	tax year begin	ning , and ending			
2 If this ta	ax year is for le	ss than 12 months, check reason	accoun	ting period	
3a If this a	pplication is fo	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			
less any	y nonrefundab	e credits See instructions	3a	\$	4,400
b If this a	pplication is fo	Form 990-PF or 990-T, enter any refundable credits and estimated tax			4 400
		de any prior year overpayment allowed as a credit	3b	\$	4,400
		t line 3b from line 3a Include your payment with this form, or, if required,			
-	-	on or, if required, by using EFTPS (Electronic Federal Tax Payment		•	0
	) See instruct		3c	\$	
for payment in		make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-	-20		
<del></del>		work Poduction Act Notice see Instructions		Form	8868 (Rev 4-2009)
FOI Privacy A	ici and Papen	vork Reduction Act Notice, see Instructions.		1 01111	(NOV 4-2003)