

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 990-PF

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

OMB No 1545-0052

, !	Departme	ent of the T Revenue Se	reasury	No	te: The foundat	tion may	Treat be able to	ed as a Priva	ate Foundation his return to sa	on tisfy state r	epor	ting requirements.	2009
-					tax year beg					and endi			, 20
	G Che	eck all ti	hat apply:	T	Initial retu			Initial return	of a former p	ublic char	ity		Final return
			hat apply:		Amended	return		Addre	ss change		<u> </u>	Name change	<b></b>
			Name of fo	und	lation			•				A Employer identific	cation number
N	Use t	he IRS	PHYLLIS	3 F	H & WM H	EVANS	CHARIT	TABLE FDN	1 .				
	lai	bel.	PNC BAN	NΚ,	, NA							34-	6512852
		rwise,	Number an	d st	treet (or PO box	number if	mail is not d	lelivered to stree	t address)	Room/su	ite	B Telephone number (see p	page 10 of the instructions)
٧٠٠٠;	•	rint type.											
13		pecific	P O BOX									(21	
	Instru	ctions.	City or tow	n, s	tate, and ZIP co	ode					į	C If exemption applicat pending, check here	ion is
الأعرا												D 1. Foreign organizati	ons, check here . 🕨 🔃
			CTEAETY	7NT	), OH 441	01		-				2. Foreign organizati 85% test, check he	
	Che	ck type	of organiz	atic	on: X Sect	ion 501	(c)(3) exe	mpt private f	oundation	_		computation	
	٠.	Section 4	947(a)(1) no	one:	on: X Sect exempt charitablessets at end	e trust	Oth	er taxable pr	ivate foundat			E If private foundation	
									ash Acc	ruai		under section 507(b)	(1)(A), check here . P
	-	ear ( <i>iro</i> ▶ \$	m Part II, c		5,736.		ther (spec		n cash basis.)			F If the foundation is in	a 60-month termination (1)(B), check here .
					e and Expens			d) made bo o	1			under section 507(b)	(d) Disbursements
•	u ar c	total o	f amounts ir	o co	lumns (b), (c), a	nd (d)	(a) Re	venue and enses per	(b) Net inve		(-	c) Adjusted net	for charitable
					qual the amoun 11 of the instru			ooks	incom	ie		income	purposes (cash basis only)
•	1				, received (attach s								(cash basis only)
	2	Check 1	ıf the	fou	indation is <b>not</b> rec	quired to							
	3	Interest			mporary cash inve								
	4	Dividen	ds and inter	est	from securities			13,787.		5,004.			
	5a	Gross re	ents					·····					
	Ь	Net rent	al income or (I	loss	)								
Revenue	6a b		les price for a		e of assets not on	line 10							
9/0	7			ome	e (from Part IV,	line 2) .							. =
α	8	Net sho	rt-term capit	tal g	gain								
	9	Income	modification	ns ·	. <u>.</u>								
	10 a		les less return wances		·								
			st of goods so										
	С				tach schedule)			4 400		1 700			Om/m 4
Œ.	11				chedule)			4,482.		1,702.			STMT 1
Ş	12				<u>ugh 11</u>			18,269.		6,706.			······································
ONO 6 7 TEL CANNER	13				directors, trustees					NONE		NONE	
Ä	14 15				s and wages . ee benefits					NONE	_	NONE	<del></del>
Ö	162				dule)					110112		1,01,12	*****
يُّر	Ь	Account	ting fees (at	tach	schedule)ST!	ит 2		750.		NONE		NONE	750
	c				(attach schedu			4,379.		2,627.			
No.	17							•					
(e)	18	Taxes (at	ttach schedule	e) (se	e page 14 of the Th	ATCtioAs)		91.		91.			
	19	Depreci	ation (ettaol	Ç\$¢	padule and de	pletion .							
3	20	Occupa	ncy N.L.C.	<u>ا ا</u>	♥┗₽ <del></del>								
4	21				d meetings .					NONE		NONE	
and			and by blica			<u>{.</u>		_		NONE		NONE	
Operating	23				schedule)			200.					200
rat	24	Total o	per 📆 🖫 🗓	<b>E</b> 4	ministrative ex	penses.							<u></u>
O	-	Add <del>Чin</del> t	es 13 throug	h-2	3	~ <i>.</i> .		5,420.		2 <u>,718.</u>		NONE	950
_	25				ints paid			8,445.		2 710		NONTE	8,445
-	26				nents Add lines 2	4 and 25		13,865.		2,718.		<u>NONE</u>	9,395
	27	Suptrac	t line 26 fro	m li	ne 12:			4 404					

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

BDQ992 2XMC 06/11/2010 13:22:14 59-757

3,988.

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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). . Form-990-PF (2009) 34-6512852

	1111-330	0-11 (2003)	<del></del>		0012002	rage 2
P	art l	Ealance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		f year
_			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		ng	17 441	21 075	01.055
	2		cash investments	17,441.	21,875.	21,875
	3	Accounts receivable				
			btful accounts ►			<del></del>
	4	Pledges receivable -				
			otful accounts ►			_ <del></del>
	5					
	6		ficers, directors, trustees, and other			
			ach schedule) (see page 16 of the instructions)			
	7		eceivable (attach schedule)	:		
	_		otful accountsNONE			·
ts	8		se			· · · · · · · · · · · · · · · · · · ·
Assets	9		eferred charges			
⋖			government obligations (attach schedule) .	507,073.	507,073.	444,242
			stock (attach schedule)	307,073.	307,073.	444,242
	11	Investments - corporate Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	· · · · · · · · · · · · · · · · · · ·			
	12		loans			
	13 14	Land, buildings, and	ch schedule)			
		Less: accumulated deprecia (attach schedule)	STMT 6 )			
	15	Other assets (describe	►STMT_6 )	129,596.	129,596.	129,619
	16	·	pleted by all filers - see the			
_			age 1, item I)	654,110.	658,544.	595,736
	17	Accounts payable and a	ccrued expenses			
	18					
ies	19	Deferred revenue				
Ħ	20		rs, trustees, and other disqualified persons			
Liabilities	21		tes payable (attach schedule)			
_	22	Other liabilities (describe	; ▶)			
	23	Total Babillation (and time	- 17 Abrassati 22)			
_	23		s 17 through 22)	· · · · · · · · · · · · · · · · · · ·		
S		and complete lines 2	ow SFAS 117, check here ► 4 through 26 and lines 30 and 31.			
<b>Fund Balances</b>	24 25					
alaı	25 26					
d B	20		not follow SFAS 117,			
Ě			plete lines 27 through 31.			
ř	27		ipal, or current funds	654,110.	658,544.	
			land, bldg , and equipment fund	051,110.		
set	29		ated income, endowment, or other funds		<del></del>	
Net Assets	30	• .	I balances (see page 17 of the		<del></del>	
Ne de				654,110.	658,544.	
	31		assets/fund balances (see page 17			
		of the instructions)		654,110.	658,544.	
P	art II		inges in Net Assets or Fund E			
_			ances at beginning of year - Part II, co		agree with	
			on prior year's return)		T 1	654,110.
2	Ente	r amount from Part I, li	ne 27a		2	4,404.
3	Othe	r increases not include	ne 27a ed in line 2 (itemize) ► SEE STAT	EMENT 7	3	801.
4	Add					659,315.
5	Decr	eases not included in l	line 2 (itemize) ▶ SEE STAT	EMENT 8	5	771.
6	Total	net assets or fund bal	ances at end of year (line 4 minus lin	e 5) - Part II, column (b),	, line 30 6	658,544.

	s and Losses for Tax on Inv d describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold			
2-story b	P-Purchase D-Donation	(mo., day, yr.)	(mo , day, yr.)					
<u>1a</u>	· · · · · · · · · · · · · · · · · · ·							
b			<b> -</b>	<u> </u>				
С			<u> </u>					
d			ļ					
е			<u> </u>	L	l			
(e) Gross sales price  (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) plus expense of sale (e) plus (f) minus (g)								
<u>a</u>								
b								
<u>c</u>								
<u>d</u>								
Complete only for assets sho	owing gain in column (h) and owner	ed by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ein minus			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co				
_a								
b								
С								
_e								
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2					
3 Net short-term capital gain	or (loss) as defined in sections 12	22(5) and (6):						
If gain, also enter in Part I,	line 8, column (c) (see pages 13 a	nd 17 of the instructions).						
If (loss), enter -0- in Part I, I	ine 8		3					
		ced Tax on Net Investment Inc	ome					
(For optional use by domestic	private foundations subject to the	section 4940(a) tax on net investn	nent inco	me.)				
If "Yes," the foundation does r  1 Enter the appropriate amount	not qualify under section 4940(e).	outable amount of any year in the boom of complete this part.  see page 18 of the instructions betoe.			Yes X No			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	:	(d) Distribution ra (col (b) divided by				
2008	13,594.	600,658.			63184707			
2007	23,248.	674,499.			46706370			
2006	22,197.	621,458.			71761889			
2005	27,931.				39542721			
2004	27,652.	448,285.			.68397337			
2 Total of line 1, column (d)			2	0.212	89593024			
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			-			
_	•	than 5 years	3	0.042	57918605			
		m Part X, line 5		0.022				
- Fire the net value of non	unantable use assets for 2003 ff0f	11 att 7, 1116 5	4		543,732.			
5 Multiply line 4 by line 3								
Enter 1% of net investment income (1% of Part I, line 27b)								
	it income (1% of Fart I, inle 27b)	7 Add lines 5 and 6						
			7		40. 23,192.			
7 Add lines 5 and 6	ons from Part XII, line 4	n Part VI, line 1b, and complete t		using a 1% tax	23,192.			
<ul><li>7 Add lines 5 and 6</li><li>8 Enter qualifying distribution If line 8 is equal to or great</li></ul>	ons from Part XII, line 4				23,192.			

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X

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?

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE		NONE	NONE	NONE
Total number of other employees paid over \$50,000				NONE

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Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nnagers, Highly Paid Emplo	yees,
3 Five highe	est-paid independent contractors for professional services (see page 23	3 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
_			
-			· -
Total number	er of others receiving over \$50,000 for professional services		▶ NONE
Part IV A	Summary of Direct Charitable Activities		
rait IA-A	Juninary of Direct Chantable Activities		
	ation's four largest direct charitable activities during the tax year. Include relevant statistical info ns and other beneficiaries served, conferences convened, research papers produced, etc	rmation such as the number	Expenses
1 NONE	· · · · · · · · · · · · · · · · · · ·		
*******		·	
		·	
2	<del>-</del>		· · · · · · · · · · · · · · · · · · ·
		·	
		·	
3			
4			
	***		
Part IX-B	Summary of Program-Related Investments (see page 23 of the ins	tructions)	
Describe the t	wo largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2	Amount
1 NONE			
2			
		`_	
			· · · · · · · · · · · · · · · · · · ·
	ram-related investments. See page 24 of the instructions		
3NONE			
Total. Add lir	nes 1 through 3	<b>.</b>	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<u> </u>
	purposes:		
а	Average monthly fair market value of securities	1a	422,393.
	Average of monthly cash balances	1b	NONE
C		1c	129,619.
d	Total (add lines 1a, b, and c)	1d	552,012.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	552,012.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	8,280.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	543,732.
6	Minimum investment return. Enter 5% of line 5	6	27,187.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ and do not complete this private foreign organizations.		
1	Minimum investment return from Part X, line 6	1	27,187.
2a			
b			
С		2c	80.
3	Distributable amount before adjustments. Subtract line 2c from line 1		27,107.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	5	27,107.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	- <del></del>	
	line 1	7	27,107.
Pa	rt 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	9,395.
b	Program valeted investments, total from Bort IV D	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	BUIDOGG	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		NONE
а		3a	NONE
b	Suitability test (prior IRS approval required)  Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,395.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
•		5	N/A
6	Enter 1% of Part I, line 27b (see page 26 of the instructions)  Adjusted qualifying distributions. Subtract line 5 from line 4	6	
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh		9,395.
	qualifies for the section 4940(e) reduction of tax in those years.	eniei nie 100	JIIGAUOII

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Form 990-PF (2009) Page 9 Part XIII Undistributed Income (see page 26 of the instructions) (b) (a) (c) (d) Years prior to 2008 2008 2009 Corpus Distributable amount for 2009 from Part XI, 27,107. Undistributed income, if any, as of the end of 2009 2 NONE Enter amount for 2008 only . . . . . . . . . Total for prior years 20\_\_\_\_\_, 20\_\_\_\_\_, 20\_\_\_\_\_ NONE Excess distributions carryover, if any, to 2009: NONE From 2004 . . . . . . 2.366. From 2005 . . . . . . From 2006 . . . . . . NONE From 2007 . . . . . . NONE NONE From 2008 . . . . . . 2,366 Total of lines 3a through e . . . . . . . . . . . Qualifying distributions for 2009 from Part XII, line 4· ▶ \$ 9,395. NONE Applied to 2008, but not more than line 2a Applied to undistributed income of prior years (Election NONE required - see page 26 of the instructions) . . . . . Treated as distributions out of corpus (Election NONE required - see page 26 of the instructions) . . . . 9,395 Applied to 2009 distributable amount . . . . . NONE Remaining amount distributed out of corpus . . 2,366. 2,366 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: NONE Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract NONE line 4b from line 2b 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 NONE been previously assessed . . . . . . . . . . . . . d Subtract line 6c from line 6b. Taxable NONE amount - see page 27 of the instructions Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see page NONE 27 of the instructions . . . . . . . . . . . . . f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be 15,346. distributed in 2010....... 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 NONE instructions) . . . . . . . . . . Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the NONE Excess distributions carryover to 2010. NONE Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9: Excess from 2005 . . . NONE NONE Excess from 2006 c Excess from 2007 . . . NONE

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Excess from 2008 . . .

e Excess from 2009 . . .

NONE

NONE

Pai	rt XIV. Private Oper	ating Foundations (	see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABL
	If the foundation has foundation, and the ruling	received a ruling or d	etermination letter tha	t it is a private opera		
ь	Check box to indicate who				4942(1	)(3) or 4942(j)(5)
٥-	<b>.</b>	Tax year		Prior 3 years		
2a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment		· · · · · · · · · · · · · · · · · · ·			
	return from Part X for each year listed					
_						
þ	85% of line 2a			·		
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not	<u> </u>		·		
_	used directly for active conduct					
_	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c	ļ	_	<u></u>		
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets				· · · · · · · · · · · · · · · · · · ·	
	(2) Value of assets qualifying under section					
ь	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment 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)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942		II.			
	(j)(3)(B)(m)					· · · · · · · · · · · · · · · · · · ·
	(3) Largest amount of sup- port from an exempt					
	organization					
Day	t XV Supplementa	ary Information (Co	lata this most	anly if the founds	tion had \$5,000	or more in essets
rar		luring the year - see			tion had \$5,000	or more in assers
1	Information Regarding	•				
a	List any managers of	_		than 2% of the total	contributions receive	ed by the foundation
	before the close of any					•
	N/A					
	List any managers of	the foundation who o	own 10% or more of	the stock of a corpo	ration (or an equally	large portion of the
	ownership of a partners					• .
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
		he foundation only n				
	unsolicited requests for				28 of the instruction	ns) to individuals or
	organizations under oth	ner conditions, comple	te items 2a, b, c, and	a. 		
а	The name, address, and	•	f the person to whom	applications should be	addressed	
	SEE STATEMENT 1			<del></del>		
b	The form in which appl			n and materials they s	hould include:	
	SEE ATTACHED ST	ATEMENT FOR LI	NE 2			
	<u> </u>				<del>-</del>	
C	Any submission deadling		NII O			
	SEE ATTACHED ST	ATEMENT FOR LI	NE Z			
	Any roctrictions "	mitations	auch es hu ====	nhiool onese the site t	do fields locate of t	notitutions of the
a	Any restrictions or lift factors:	mitations on awards,	such as by geogra	pnicai areas, charitab	ie tielas, kinds of i	nsututions, or other
		ד.ד מרט יימושייתי	מוגר כ			

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Part XV Supplementary Information (co 3 Grants and Contributions Paid Durin	ontinued)	oved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation		T
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year			İ	
OPP OWNERPNEN 16				
SEE STATEMENT 16				
	•			
				ļ
		ļ		
Total			> 3a	8,445.
b Approved for future payment				9/113.
2 Approved to retard payment				
i				
				•
		•		
İ				
<u>_</u>				
Total	· · · · · · · · · · · · · · · · · · ·	<del></del>	▶ 3b	

Part XVI-	A Analysis of Income-Produ	cing Activ	vities			
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
1 Program	service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a	00.7100 1070.1100					,
е				<u></u>		
f						
g Fees	and contracts from government agencies					
2 Members	ship dues and assessments					
	n savings and temporary cash investments			<u> </u>		
	Is and interest from securities			14	13,787.	
	al income or (loss) from real estate			ļ		
	t-financed property			-		
	debt-financed property		<del></del>	<u> </u>		
	I income or (loss) from personal property .			-		
	vestment income					
-	oss) from sales of assets other than inventory		·· .			
	me or (loss) from special events		_			
•	ofit or (loss) from sales of inventory					
	venue a			1	2,780.	
	SURANCE DIVIDEND			14	1,702.	
c <u>IN</u> d				1 1 7	1,702.	
e	<del></del>					
	. Add columns (b), (d), and (e)		<del></del>		18,269.	
	dd line 12, columns (b), (d), and (e)			· · · · · · · · · · · · · · · · · · ·		18,269.
	eet in line 13 instructions on page 28 to					1
Part XVI-	B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No.	Explain below how each activithe accomplishment of the fopage 29 of the instructions.)					
			NOT APPLICABL	E		
				·		
			-			
			<del> </del>			
			<del></del>			····
				<u> </u>	<del></del>	
		-			· · · · · · · · · · · · · · · · · · ·	
					·	<del></del>
				<del></del>	<del>-</del>	
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#### 34-6512852 Form-990-PF (2009) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . . 16(1) (2) Purchases of assets from a noncharitable exempt organization . . . . . . 1b(2) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements . . . 16(5) (6) Performance of services or membership or fundraising solicitations . . . . . . 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . . . . . d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (b) Type of organization (c) Description of relationship (a) Name of organization declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and Under penalties of perjupy. belief, it is true, correct, (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge 06/11/2010 Here Signature of officer or trustee Date Title Preparer's identifying number (See Signature on Paid Preparer's Use Only self-employed 🏲 page 30 of the instructions) Preparer's

Form 990-PF (2009)

EIN ► 22-1146430

Phone no

signature

and ZIP code

Firm's name (or yours if

self-employed), address,

BANK,

CLEVELAND

O BOX 94651

Р

44101

06/11/2010

FORM 990PF, PART I - OTHER INCOME 

	NET	INVESTMENT	INCOME	1 1 1 1
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1

TOTALS

MASS MUTUAL DIVIDEND REFUND

DESCRIPTION

1,702. 1,702. 1,702. 2,780. 4,482.

STATEMENT

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M 990PF, PART	

CHARITABLE PURPOSES	750.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	HONE HERE
REVENUE AND EXPENSES PER BOOKS	750.
	TOTALS
DESCRIPTION	PNC BANK, NA

59-75750739584293

FEES	-       
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	NET	INVESTMENT	INCOME		2,627.	1 1 1	2,627.	11 11 11 11	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	4,379.		4,379.		
					CUSTODIAN & MANAGEMENT FEES (A		TOTALS		
			DESCRIPTION		CUSTODIAN &				

STATEMENT

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PHYLLIS H & WM H EVANS CHARITABLE FDN

	NET	INVESTMENT	INCOME	1 1 1 1	. 68	2.		91.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	.68	2.	1 1 1 1 1 1 1 1 1 1	91.	
			DESCRIPTION	1 1 1 1 1 1 1 1	FOREIGN TAXES ON QUALIFIED FOR	FOREIGN TAXES ON NONQUALIFIED		TOTALS	

4

59-75750739584293

EXPENSES	
OTHER	
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990PF,	
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RONEY	AND	EXPENSES	PER BOOKS		
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

200. 200.

TOTALS

STATE FILING FEES

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FORM 990PF, PART II - OTHER ASSETS

PHYLLIS H & WM H EVANS CHARITABLE FDN

DESCRIPTION

INSURANCE POLICIES

ENDING BOOK VALUE

ENDING FMV

34-6512852

1 1

129,596. 129,596.

TOTALS

129,619.

129,619.

FORM 990PF,	PART	III -	OTHER	INCREASES	IN NET	WORTH C	R FUND	BALANCES
==========	=====	=====	======	=======	======	======	======	=======

AMOUNT DESCRIPTION 770. POSTED CURR YR FOR PRIOR YR 30. CARRYING VALUE ADJUSTMENT ROUNDING ADJUSTMENT TOTAL 801. =========

FORM 990PF,	PART I	III -	OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES
========	======	=====	=====	========	====	====	=====	====	=====	=======

DESCRIPTION

AMOUNT

POSTED SUBSEQ YR FOR CURR YR

771.

TOTAL

771.

==========

STATE(S) WHERE THE FOUNDATION IS REGISTERED 

OH

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

OFFICER NAME:

PHYLLIS H. EVANS

ADDRESS:

P. O. BOX 30486

CLEVELAND, OH 44130-2301

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

OFFICER NAME:

ELINORE I. EVANS

ADDRESS:

P. O. BOX 30486

CLEVELAND, OH 44130-2301

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 5

PHYLLIS H & WM H EVANS CHARITABLE FDN
FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

PHYLLIS EVANS

ADDRESS:

P. O. BOX 30486

CLEVELAND, OH 44130-2301

RECIPIENT'S PHONE NUMBER: 216-621-2500

FORM, INFORMATION AND MATERIALS:

SUBMIT A LETTER STATING CHARITABLE PURPOSE OF GRAND AND

INCLUDE A COPY OF IRS EXEMPTION LETTER

SUBMISSION DEADLINES:

NO SUBMISSION DEADLINE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

GRANTS ARE MADE TO QUALIFYING CHARITIES

UNDER IRC 501 (C) 3.

RECIPIENT NAME:

BETHESDA HOSPITAL FOUNDATION

ADDRESS:

2815 SOUTH SEACREST BLVD BOYNTON BEACH, FL 33435

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 6,210.

RECIPIENT NAME:

LAKE COUNTY YMCA

ADDRESS:

933 MENTOR AVENUE

PAINESVILLE, OH 44077

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

RECIPIENT NAME:

WVIZ TV

ADDRESS:

P. O. BOX 30486

CLEVELAND, OH 44130-0486

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID .....

STATEMENT 12

50.

RECIPIENT NAME:

MASTERS SCHOOL

ADDRESS:

19 CLINTON AVENUE

DOBBS FERRY, NY 10522

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

RECIPIENT NAME:

FREEDOM IN CREATION

ADDRESS:

1903 AUBREY PLACE COURT

VIENNA, VA 22182

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

RECIPIENT NAME:

MARCH OF DIMES

ADDRESS:

P. O. BOX 2547

DECATUR, IL 62525-2547

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

RECIPIENT NAME:

MUSICAL ARTS ASSOCIATION
ADDRESS:

11001 EUCLID AVENUE

CLEVELAND, OH 44106
RELATIONSHIP:
NONE

PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY

AMOUNT OF GRANT PAID ......

STATEMENT

14

25.

RECIPIENT NAME:
SAINT PETERS EPISCOPAL CHURCH
ADDRESS:
110 NORTH WARSON ROAD
ST LOUIS, MO 63124
RELATIONSHIP:
NONE

PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PUBLIC CHARITY

PHYLLIS H & WM H EVANS CHARITABLE FDN 34-6512852 FORM 99.0PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID 

RECIPIENT NAME: COVENANT HOUSE

ADDRESS:

P. O. BOX 39282 FT LAUDERDALE, FL 33339

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 75.

TOTAL GRANTS PAID:

8,445.



#### **Investment Detail**

#### 013BF331006 | EVANS CHARITABLE FDN

21-Apr-2010 9 23 /

This is a printable page only and may require the Landscape print layout (see the FAQ for more details)

**Asset Types:** 

Cash, Cash Equivalents, Common Stock, Common Trust Funds, Corporate Bonds, Government Bonds, Liat

Miscellaneous, Municipal Bonds, Mutual Funds, Options/Futures, Other, Preferred Stock

Data Current as of: 31-Dec-2009

SUMMARY

Asset Type	Current Allocation	Market Value	Total Cost	Unrealized Gain/Loss
Cash	0 000%	\$0.00	\$0.00	\$0.00
Cash Equivalents	4 700%	\$21,875 12	\$21,875.12	\$0.00
Mutual Funds	95 306%	\$444,242 48	\$507,072 64	(\$62,830.16)
Other	0 001%	\$4 00	\$4 00	\$0.00
Totals		\$466,121.60	\$528,951.76	(\$62,830.16)

п		

Cash: 0.000%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
CASH - INCOME	-	2 600%	12,274 4100	1.0000		\$12,274 41	\$12,274.41
	- -				* * * * * * * * * * * * * * * * * * *		3
CASH - PRINCIPAL	· -	(2 600)%	(12,274.4100)	1.0000	A 14	(\$12,274 41)	(\$12,274 41) .
	-	t č	[		:	;	t
Subtotal	T	0.000%	1			\$0.00	\$0.00

Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
PNC OH MUNI MNY MKT FD	99AROHMU9 - -	4 700%	21,875 1200	100 0000%	31-Dec-2009	\$21,875 12	\$21,875.12
Asset ID 99AROHMU9	_	,				•	
Subtotal		4.700%				\$21,875.12	\$21,875.12

Mutual Funds: 953	06%						
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
ISHARES TR MS	CI 464287465	7.100%	595 0000	55.2800	31-Dec-2009	\$32,891 60	\$44,012 15

Ticker.EFA | Asset

ID:464287465

**EFA** 

		95.306%	i		1	\$444,242.48	\$507,072.64
Ticker VOHIX   Asset ID 921929204	VOHIX		; 			<u>,</u>	
LONG-TERM T/E	-	,	,	,,,,,,,	, -	4_10,01_10	42.0,.0020
Ticker VIFSX   Asset ID 922908496 VANGUARD OHIO	921929204	45 100%	17,575 0000	11 9700	31-Dec-2009	' \$210,372.75	\$210,188 25
#1340	VIFSX	,				•	
INDEX SIGNAL SHS	922908496	37 100%	2,038 7540	84 8100	31-Dec-2009	\$172,906 73	\$220,798 50
Ticker IWM   Asset ID 464287655	IWM	•					
ISHARES TR RUSSELL 2000	464287655 - -	4 200%	310 0000	62 4400	31-Dec-2009	\$19,356.40	\$24,139.70
Ticker EEM   Asset ID 464287234	EEM		1			,	
ISHARES TR MSCI EMERG MKT	464287234 - -	1 900%	210 0000	41 5000	· 31-Dec-2009	\$8,715 00 [	\$7,934 04

Other: 0.001%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
CONN MUTUAL LIFE POL #2,256,338	IN0059668	0.000%	1 0000		01-Jan-2006	\$1 00	\$1 00 `
Asset ID IN0059668 CONN MUTUAL LIFE POL #2,576,289	; - , IN0059650 ; -	0 000%	1.0000	1 0000	01-Jan-2006	\$1.00	\$1 00 <u>.</u>
Asset ID IN0059650 CONN MUTUAL LIFE POL #2,576,290	IN0059635	0 000%	1 0000	1 0000	01-Jan-2006	\$1 00	\$1 00 .
Asset ID.IN0059635 CONN MUTUAL LIFE POL #2,576,321	- IN0059643 -	0 000%	1 0000	1 0000	01-Jan-2006	\$1 00	\$1.00 <sub>(</sub>
Asset ID IN0059643	<u>-</u>						
Subtotal		0.001%	<u> </u>			\$4.00	\$4.00

## Form **8868**

(Rev. April 2009)

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

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No. 1545-1709

	_	Month Extension, complete only Part I and o			<b>. X</b>					
<ul> <li>If you are for Do not comple</li> </ul>	lling for an <b>Additional (N</b> <i>te Part II unless</i> you hav	ot Automatic) 3-Month Extension, complete already been granted an automatic 3-month	only Part II (on page extension on a prev	ge 2 of this form riously filed Form	). n 8868.					
Part I Auto	matic 3-Month Exter	sion of Time. Only submit original (no co	pies needed).							
		-T and requesting an automatic 6-month exte		ox and complete	,					
Part I only					▶ 📖					
	orations (including 112 ome tax returns.	P-C filers), partnerships, REMICs, and trusts	s must use Form 7	004 to request	an extension of					
Electronic Fili	n <b>g <i>(e-file)</i>.</b> Generally, yo	can electronically file Form 8868 if you v	want a 3-month aut	tomatic extensio	on of time to file					
electronically i	f (1) you want the add	nonths for a corporation required to file Fotional (not automatic) 3-month extension of	r (2) you file Forms	990-BL, 6069,	or 8870, group					
		I From 990-T. Instead, you must submit the c filing of this form, visit www.irs.gov/efile an								
Type or					ification number					
print	THE BILL IN THE BUT OF THE BUT IN CHARLET BELL I'M									
-		or suite no. If a P.O. box, see instructions.		L						
due date for	ne by the									
filing your return See		tate, and ZIP code. For a foreign address, see instri	uctions.							
instructions.	CLEVELAND, OF	44101								
Check type o	f return to be filed (file	separate application for each return):								
Form 990		Form 990-T (corporation)	For	rm 4720						
Form 990	-BL	Form 990-T (sec. 401(a) or 408(a) trust)	For	rm 5227						
Form 990	rm 6069									
X Form 990-PF										
Telephone  If the organ  If this is for	a Group Return, enter t		Number (GEN)	nd attach a list	- ▶ ☐ If this is with the					
	s of all members the ex									
until	at an automatic 3-m 08/16,201 ganization's return for: calendar year 2009 tax year beginning		for the organization							
2 If this tax	year is for less than 12	nonths, check reason: Initial return	Final return	Change in ac	counting period					
	plication is for Form 9 dable credits. See instru	0-BL, 990-PF, 990-T, 4720, or 6069, ente tions.	r the tentative tax,		\$ 89.					
b If this ap	plication is for Form 99	-PF or 990-T, enter any refundable credits	and estimated tax p	payments						
		payment allowed as a credit.		-	\$ 410.					
		om line 3a. Include your payment with this								
		ed, by using EFTPS (Electronic Federal	Tax Payment Syste		4.					
instructio				<del></del>	\$					
_		ectronic fund withdrawal with this Form 8868	8, see Form 8453-E(	J and Form 887	9-EO					
for payment in:				· · · · · · · · · · · · · · · · · · ·						
FOR PRIVACY AC	t and Paperwork Reduc	ion Act Notice, see Instructions.		Form	8868 (Rev. 4-2009)					