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# Return of Organization Exempt From Income Tax

**2009**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

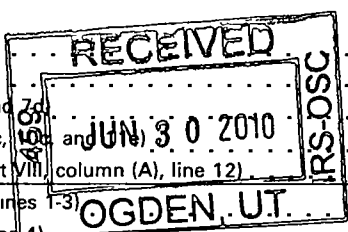
The organization may have to use a copy of this return to satisfy state reporting requirements

**A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	<b>C Name of organization</b> THE SKEGGS FOUNDATION		<b>D Employer identification number</b> 34-6575001	
		Doing Business As		<b>E Telephone number</b> 216 257-4701	
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite P O BOX 94651		<b>G Gross receipts \$</b> 428,890.	
City or town, state or country, and ZIP + 4 CLEVELAND, OH 44101		<b>F Name and address of principal officer:</b> C/O PNC BANK, NA P. O. BOX 94651, CLEVELAND, OH 44101		<b>H(a) Is this a group return for affiliates?</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527		<b>J Website:</b> N/A		<b>H(b) Are all affiliates included?</b> Yes <input type="checkbox"/> No <input type="checkbox"/> If "No," attach a list (see instructions)	
<b>K Form of organization</b> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L Year of formation</b> 1966		<b>M State of legal domicile.</b> OH	

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: SUPPORTING THE SKEGGS LECTURE SERIES AT YOUNGSTOWN STATE UNIVERSITY		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	NONE	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)		
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	368,838	-18,769.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d, and 11e)		
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	368,838	-18,769.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		38,679.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses, Part IX, column (D), line 25) ▶	NONE	
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	22,011	21,972.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	22,011	60,651.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	346,827	-79,420.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	1,920,542	1,841,122.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20.	NONE	NONE



**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

**Sign Here** Signature of officer: *Josephine Naji, trustee* Date: 06/08/2010

Type or print name and title: JOSEPHINE NAJI TRUSTEE

**Preparer's Use Only** Preparer's signature: *[Signature]* Date: 06/08/2010 Check if self-employed  Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4: PNC BANK, N.A. P.O. BOX 94651; CLEVELAND, OH 44101 EIN: Phone no: 216-257-4701

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED JUL 30 2010

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission:  
SUPPORTING THE SKEGGS LECTURE SERIES AT YOUNGSTOWN STATE UNIVERSITY

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: \_\_\_\_\_) (Expenses \$ 38,679. including grants of \$ 38,679.) (Revenue \$ \_\_\_\_\_)  
SUPPORTING THE SKEGGS LECTURE SERIES AT YOUNGSTOWN STATE UNIVERSITY

**4b** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4c** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4d** Other program services. (Describe in Schedule O.)  
(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses ► 38,679.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> . . . . .	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> . . . . .		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> . . . . .		X
5	<b>Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> . . . . .		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> . . . . .		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> . . . . .		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> . . . . .		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> . . . . .		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> . . . . .		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> . . . . .		X
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments other-securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> . . . . .		X
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> . . . . .	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> . . . . .		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> . . . . .		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> . . . . .		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> . . . . .		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . . . . .		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> . . . . .		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> . . . . .		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> . . . . .		X

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> . . . . .	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> . . . . .		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> . . . . .		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If No, go to question 25.</i> . . . . .		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		X
25 a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i> . . . . .		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i> . . . . .		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i> . . . . .		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> . . . . .		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> . . . . .		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> . . . . .		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> . . . . .		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> . . . . .		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i> . . . . .		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> . . . . .		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> . . . . .		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .		X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable . . . . .		
1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	X	
1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .		
2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)		
2b			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .		X
3a			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		X
4a			
b	If Yes, enter the name of the foreign country: ► _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
4b			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		X
5a			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		X
5b			
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .		
5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .		X
6a			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
6b			
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .		X
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		X
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		X
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		X
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		X
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		X
7h			
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		X
8			
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966? . . . . .		X
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		X
9b			
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	10b	
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders . . . . .	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	11b	
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	12a	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	12b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body; 1b Enter the number of voting members that are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a material diversion of the organization's assets?; 6 Does the organization have members or stockholders?; 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?; 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?; b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Does the organization have local chapters, branches, or affiliates?; b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?; 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?; 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Does the organization have a written conflict of interest policy? If "No," go to line 13; b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done; 13 Does the organization have a written whistleblower policy?; 14 Does the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official; b Other officers or key employees of the organization; If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed Ohio
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
Own website [ ] Another's website [X] Upon request [X]
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. PNC BANK, NA TEL: (216)257-4701
P O BOX 94651; CLEVELAND, OH 44101-4651





**Part VIII** Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	1a Federated campaigns . . . . .	1a			
	b Membership dues . . . . .	1b			
	c Fundraising events . . . . .	1c			
	d Related organizations . . . . .	1d			
	e Government grants (contributions) . . . . .	1e			
	f All other contributions, gifts, grants, and similar amounts not included above . . . . .	1f			
	g Noncash contributions included in lines 1a-1f \$ . . . . .				
	<b>h Total. Add lines 1a-1f . . . . .</b>				
<b>Program Service Revenue</b>	<b>Business Code</b>				
	2a _____				
	b _____				
	c _____				
	d _____				
	e _____				
	f All other program service revenue . . . . .				
<b>g Total. Add lines 2a-2f . . . . .</b>					
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts) . . . . .		56,276.	56,276.	
	4 Income from investment of tax-exempt bond proceeds . . . . .				
	5 Royalties . . . . .				
		(i) Real	(ii) Personal		
	6a Gross Rents . . . . .				
	b Less: rental expenses . . . . .				
	c Rental income or (loss) . . . . .				
	d Net rental income or (loss) . . . . .				
		(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory . . . . .	372,614			
	b Less: cost or other basis and sales expenses . . . . .	447,659			
	c Gain or (loss) . . . . .	-75,045			
	d Net gain or (loss) . . . . .		-75,045.	-75,045.	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a			
	b Less: direct expenses . . . . .	b			
c Net income or (loss) from fundraising events . . . . .					
9a Gross income from gaming activities See Part IV, line 19 . . . . .	a				
b Less: direct expenses . . . . .	b				
c Net income or (loss) from gaming activities . . . . .					
10a Gross sales of inventory, less returns and allowances . . . . .	a				
b Less: cost of goods sold . . . . .	b				
c Net income or (loss) from sales of inventory . . . . .					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
11a _____					
b _____					
c _____					
d All other revenue . . . . .					
e <b>Total. Add lines 11a-11d . . . . .</b>					
<b>12 Total Revenue. See instructions . . . . .</b>		-18,769.	-18,769.		

**Part IX Statement of Functional Expenses**

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.**  
**All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	38,679.	38,679.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . .				
7 Other salaries and wages . . . . .				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . .				
9 Other employee benefits . . . . .				
10 Payroll taxes . . . . .				
11 Fees for services (non-employees):				
a Management . . . . .				
b Legal . . . . .				
c Accounting . . . . .				
d Lobbying . . . . .				
e Professional fundraising services See Part IV, line 17				
f Investment management fees . . . . .				
g Other . . . . .				
12 Advertising and promotion . . . . .				
13 Office expenses . . . . .				
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .				
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .				
23 Insurance . . . . .				
24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a -----				
b -----				
c -----				
d -----				
e -----				
f All other expenses -----	21,972.		21,972.	
<b>25 Total functional expenses</b> Add lines 1 through 24f	<b>60,651.</b>	<b>38,679.</b>	<b>21,972.</b>	<b>NONE</b>
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	195,539.	<b>2</b>	180,724.
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b>		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b>		<b>10c</b>
	<b>11</b> Investments - publicly traded securities . . . . .	1,725,003.	<b>11</b>	1,660,398.
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	1,920,542.	<b>16</b>	1,841,122.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .		<b>17</b>	
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	NONE	<b>26</b>	NONE
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .		<b>27</b>	
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .	1,920,542.	<b>30</b>	1,841,122.
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33 Total net assets or fund balances</b> . . . . .	1,920,542.	<b>33</b>	1,841,122.	
<b>34 Total liabilities and net assets/fund balances</b> . . . . .	1,920,542.	<b>34</b>	1,841,122.	

**Part XI Financial Statements and Reporting**

**1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .

**b** Were the organization's financial statements audited by an independent accountant? . . . . .

**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

**d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>		X
<b>2c</b>		
<b>3a</b>		X
<b>3b</b>		

**Public Charity Status and Public Support**

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization <b>THE SKEGGS FOUNDATION</b>	Employer identification number <b>34-6575001</b>
--	---

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 

	Yes	No
11g(i)		X
  - (ii) A family member of a person described in (i) above? 

	Yes	No
11g(ii)		X
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? 

	Yes	No
11g(iii)		X
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
SEE STATEMENT 1									
<b>Total</b>									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) N/A

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 %
15 Public support percentage from 2008 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
16b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
17b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

N/A

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
6 Total. Add lines 1 through 5 . . . . .						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b. . . . .						
8 Public support (Subtract line 7c from line 6) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6. . . . .						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
13 Total support. (Add lines 9, 10c, 11, and 12.) . . . . .						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here . . . . .

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►





THE SKEGGS FOUNDATION  
 Schedule D Detail of Long-term Capital Gains and Losses

34-6575001

Description	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Long-term Gain/Loss
<b>CAPITAL GAINS (LOSSES) FROM SECURITIES</b>					
.99 GNMA GTD PASS THRU CTF					
POOL #169637 DTD 09-01-86	06/03/1987	01/15/2009	1.00		1.00
1. GNMA GTD PASS THRU CTF					
POOL #169637 DTD 09-01-86	06/03/1987	02/15/2009	1.00		1.00
1.01 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	03/15/2009	1.00		1.00
1.02 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	04/15/2009	1.00		1.00
1.02 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	05/15/2009	1.00		1.00
1.03 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	06/15/2009	1.00		1.00
1.04 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	07/15/2009	1.00		1.00
519. ISHARES TR MSCI					
EMERGING MKTS INDEX FD	05/13/2005	07/20/2009	17,937.00	11,502.00	6,435.00
740. ISHARES TR RUSSELL	VAR	07/20/2009	38,710.00	51,590.00	-12,880.00
800. VANGUARD EMERGING	04/03/2008	07/20/2009	27,206.00	39,004.00	-11,798.00
1.05 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	08/15/2009	1.00		1.00
1.06 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	09/15/2009	1.00		1.00
100000. FHLB					
4.5% 10/09/09	04/03/2008	10/09/2009	100,000.00	103,093.00	-3,093.00
1.07 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	10/15/2009	1.00		1.00
1000. CITIGROUP CAP IX	03/05/2004	11/13/2009	16,163.00	25,745.00	-9,582.00
450. KROGER CO COM	08/14/2008	11/13/2009	10,422.00	13,176.00	-2,754.00
555. OMNICOM GROUP INC COM	VAR	11/13/2009	20,213.00	23,610.00	-3,397.00
545. WEATHERFORD INTL LTD	04/03/2008	11/13/2009	9,642.00	20,558.00	-10,916.00
1.07 GNMA GTD PASS THRU					
CTF POOL #169637 DTD 09-01-86	06/03/1987	11/15/2009	1.00		1.00
<b>Totals</b>					



FEDERAL CAPITAL GAIN DIVIDENDS

=====

LONG-TERM CAPITAL GAIN DIVIDENDS

-----

15% RATE CAPITAL GAIN DIVIDENDS

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

-----  
1,915.00

TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

-----  
1,915.00  
=====





**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

THE SKEGGS FOUNDATION

Employer identification number

34-6575001

**PROCESS OF REVIEW**

**PART VI, LINE 10**

TRUSTEE AND OTHER OFFICERS REVIEW THE ANNUAL REPORT

SCHEDULE A, PART I (h) - INFORMATION ABOUT SUPPORTED ORGANIZATIONS

NAME OF SUPPORTED ORGANIZATION:

YOUNGSTOWN STATE UNIVERIS

TYPE OF ORGANIZATION FROM PART I: SCHOOL

IS THE ORGANIZATION LISTED IN GOVERNING DOCUMENT?: YES

DID YOU NOTIFY THE ORGANIZATION OF YOUR SUPPORT?: YES

IS THE ORGANIZATION ORGANIZED IN THE U.S.?: YES

TOTAL SUPPORT:

-----  
NONE  
=====

SCH I, PART II - GRANTS AND OTHER ASSISTANCE TO ORG'S INSIDE THE US

=====

NAME OF ORGANIZATION:

YOUNGSTOWN STATE UNIVERSITY

ADDRESS:

ONE UNIVERSITY PLAZA  
YOUNGSTOWN, OH 44505

IRC SECTION:

501 (C) 3

AMOUNT OF CASH GRANT.....

38,679.

PURPOSE OF GRANT:

SUPPORTING YOUNGSTOWN STATE UNIVERSITY

TOTAL CASH GRANTS.....

38,679.

=====



## Investment Detail

0140D526006 | THE SKEGGS FOUNDATION AG

08-Jun-2010 3 02

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, L. 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	9.300%	\$180,723.95	\$180,723.95	\$0.00
Common Stock	40.147%	\$781,999.46	\$737,022.55	\$44,976.91
Corporate Bonds	16.087%	\$313,352.00	\$302,723.00	\$10,629.00
Government Bonds	12.376%	\$241,069.74	\$226,467.85	\$14,601.89
Mutual Funds	20.883%	\$406,769.57	\$368,264.77	\$38,504.80
Preferred Stock	1.200%	\$23,930.00	\$25,920.00	(\$1,990.00)
<b>Totals</b>		<b>\$1,947,844.72</b>	<b>\$1,841,122.12</b>	<b>\$106,722.60</b>

## DETAIL

Cash: 0.000%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
CASH - INCOME	-	5.200%	101,656.7200	1.0000		\$101,656.72	\$101,656.72
CASH - PRINCIPAL	-	(5.200)%	(101,656.7200)	1.0000		(\$101,656.72)	(\$101,656.72)
<b>Subtotal</b>		<b>0.000%</b>				<b>\$0.00</b>	<b>\$0.00</b>

Cash Equivalents: 9.300%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
PNC MONEY MARKET FD I SHS	99ARMONY7	9.300%	180,723.9500	100.0000%	31-Dec-2009	\$180,723.95	\$180,723.95
Asset ID 99ARMONY7							
<b>Subtotal</b>		<b>9.300%</b>				<b>\$180,723.95</b>	<b>\$180,723.95</b>

Common Stock: 40.147%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
ABBOTT LABS	002824100	0.800%	285.0000	53.9900	31-Dec-2009	\$15,387.15	\$15,027.59

Ticker ABT   Asset ID 002824100	ABT							
ACE LIMITED Ticker ACE   Asset ID H0023R105	H0023R105	1 600%	600 0000	50.4000	31-Dec-2009	\$30,240 00	\$31,824 00	
APACHE CORP Ticker APA   Asset ID 037411105	ACE 037411105	0 800%	160 0000	103.1700	31-Dec-2009	\$16,507 20	\$16,500 80	
APPLE INC Ticker AAPL   Asset ID 037833100	APA 037833100	1 100%	100 0000	210 7320	31-Dec-2009	\$21,073 20	\$20,361.00	
AT & T INC Ticker T   Asset ID 00206R102	AAPL 00206R102	0 700%	475 0000	28 0300	31-Dec-2009	\$13,314 25	\$14,701.25	
AUTOZONE COM Ticker AZO   Asset ID 053332102	T 053332102	0 800%	100 0000	158 0700	31-Dec-2009	\$15,807 00	\$15,577 50	
CHUBB CORP COM Ticker CB   Asset ID 171232101	AZO 171232101	0 900%	369 0000	49 1800	31-Dec-2009	\$18,147.42	\$14,958 71	
CISCO SYS COM Ticker CSCO   Asset ID 17275R102	CB 17275R102	1.700%	1,400 0000	23 9400	31-Dec-2009	\$33,516 00	\$33,852 00	
COLGATE-PALMOLIVE COM Ticker CL   Asset ID 194162103	CSCO 194162103	1 800%	425 0000	82 1500	31-Dec-2009	\$34,913 75	\$33,110 90	
CVS/CAREMARK CORP Ticker CVS   Asset ID 126650100	CL 126650100	1 400%	845 0000	32 2100	31-Dec-2009	\$27,217 45	\$14,341 44	
DEERE & CO Ticker DE   Asset ID 244199105	CVS 244199105	1 200%	450 0000	54 0900	31-Dec-2009	\$24,340.50	\$30,235 50	
DOLLAR STORES INC Ticker DLTR   Asset ID 256746108	DE 256746108	0 700%	300 0000	48 3000	31-Dec-2009	\$14,490 00	\$14,639 22	
ENERGEN CORP Ticker EGN   Asset ID 29265N108	DLTR 29265N108	0 800%	325 0000	46 8000	31-Dec-2009	\$15,210 00	\$17,296 50	
EXELON CORP Ticker EXC   Asset ID 30161N101	EGN 30161N101	0 700%	275 0000	48 8700	31-Dec-2009	\$13,439 25	\$20,418 75	
GOOGLE INC Ticker GOOG   Asset ID 38259P508	EXC 38259P508	1 600%	50 0000	619 9800	31-Dec-2009	\$30,999 00	\$24,928 00	
ISHARES TR NASDAQ BIO INDX FD Ticker IBB   Asset ID 464287556	GOOG 464287556	1 200%	275 0000	81 8300	31-Dec-2009	\$22,503 25	\$24,403 50	
JOHNSON & JOHNSON	IBB							
JOHNSON &	478160104	0.800%	255 0000	64 4100	31-Dec-2009	\$16,424 55	\$15,039 87	

JOHNSON								
Ticker JNJ   Asset ID 478160104	JNJ							
JOY GLOBAL INC	481165108	1 200%	465 0000	51 5700	31-Dec-2009	\$23,980 05	\$23,815 95	
Ticker JOYG   Asset ID 481165108	JOYG							
JPMORGAN CHASE & CO COM	46625H100	1 200%	575 0000	41 6700	31-Dec-2009	\$23,960 25	\$21,016 25	
Ticker JPM   Asset ID 46625H100	JPM							
KBR INC	48242W106	1 100%	1,100 0000	19 0000	31-Dec-2009	\$20,900 00	\$25,047 00	
Ticker KBR   Asset ID 48242W106	US48242W1062							
	KBR							
MARATHON OIL CORP	565849106	0 400%	225 0000	31 2200	31-Dec-2009	\$7,024.50	\$10,921 07	
Ticker MRO   Asset ID 565849106	MRO							
MCDONALDS CORP	580135101	0 800%	257 0000	62 4400	31-Dec-2009	\$16,047 08	\$14,961 54	
Ticker MCD   Asset ID 580135101	MCD							
MICROSOFT CORP	594918104	1 700%	1,075 0000	30 4800	31-Dec-2009	\$32,766 00	\$2,449 63	
Ticker MSFT   Asset ID 594918104	MSFT							
NABORS INDUSTRIES LTD	G6359F103	0 800%	715 0000	21 8900	31-Dec-2009	\$15,651 35	\$24,874 85	
Ticker NBR   Asset ID G6359F103	NBR							
NATIONAL OILWELL VARCO INC	637071101	0 800%	375 0000	44 0900	31-Dec-2009	\$16,533 75	\$26,568 75	
Ticker NOV   Asset ID 637071101	NOV							
OCCIDENTAL PETE CORP	674599105	1 300%	300 0000	81 3500	31-Dec-2009	\$24,405 00	\$23,112 00	
Ticker OXY   Asset ID 674599105	OXY							
ORACLE CORP	68389X105	1 600%	1,250 0000	24 5300	31-Dec-2009	\$30,662 50	\$7,871 09	
Ticker ORCL   Asset ID 68389X105	ORCL							
PEPSICO INC	713448108	1 000%	335 0000	60 8000	31-Dec-2009	\$20,368 00	\$18,804 23	
Ticker PEP   Asset ID 713448108	PEP							
PFIZER INC	717081103	0 700%	740 0000	18 1900	31-Dec-2009	\$13,460 60	\$12,676 20	
Ticker PFE   Asset ID 717081103	PFE							
PHILLIP MORRIS INTL INC	718172109	1 000%	400 0000	48 1900	31-Dec-2009	\$19,276 00	\$22,016 00	
Ticker PM   Asset ID 718172109	PM							
PROCTER & GAMBLE CO	742718109	1 200%	370 0000	60 6300	31-Dec-2009	\$22,433 10	\$25,967 05	
Ticker PG   Asset ID 742718109	PG							
QUALCOMM INC	747525103	1 200%	485 0000	46 2600	31-Dec-2009	\$22,436 10	\$10,796 10	
Ticker QCOM   Asset ID 747525103	QCOM							
SCHLUMBERGER LTD COM	806857108	0 900%	265 0000	65.0900	31-Dec-2009	\$17,248 85	\$14,972 31	

Ticker SLB   Asset ID 806857108	SLB							
SELECT SPDR MATERIALS FUND	81369Y100	0.800%	450 0000	32.9900	31-Dec-2009	\$14,845 50	\$17,689 50	
Ticker XLB   Asset ID 81369Y100	XLB							
STATE STR CORP	857477103	0.600%	250 0000	43.5400	31-Dec-2009	\$10,885 00	\$16,655 00	
Ticker STT   Asset ID 857477103	STT							
TEVA PHARMA INDS ADR	881624209	1.000%	350 0000	56.1800	31-Dec-2009	\$19,663 00	\$16,359 86	
Ticker TEVA   Asset ID 881624209	TEVA							
TEXAS INSTRS INC	882508104	0.900%	700 0000	26.0600	31-Dec-2009	\$18,242 00	\$18,158 00	
Ticker TXN   Asset ID 882508104	TXN							
VERIZON COMMUNICATIONS COM	92343V104 US92343V1044	0.600%	337 0000	33.1300	31-Dec-2009	\$11,164 81	\$10,031 98	
Ticker VZ   Asset ID 92343V104	VZ							
WAL MART STORES INC	931142103	0.800%	309 0000	53.4500	31-Dec-2009	\$16,516 05	\$15,041 66	
Ticker WMT   Asset ID 931142103	WMT							
<b>Subtotal</b>		<b>40.147%</b>				<b>\$781,999.46</b>	<b>\$737,022.55</b>	

Corporate Bonds: 16.087%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
BELLSOUTH CAP FDG 7 75% 2/15/10	079857AG3	2.600%	50,000 0000	100.7980%	31-Dec-2009	\$50,399.00	\$52,392 00
Asset ID 079857AG3							
GOLDMAN SACHS GP 4 5% 6/15/10	38143UBE0	5.200%	100,000 0000	101.8020%	31-Dec-2009	\$101,802 00	\$100,718 00
Asset ID 38143UBE0							
INTL BUSINESS MACH 4 75% 11/29/12	459200BA8	8.300%	150,000 0000	107.4340%	31-Dec-2009	\$161,151 00	\$149,613 00
Asset ID 459200BA8							
<b>Subtotal</b>		<b>16.087%</b>				<b>\$313,352.00</b>	<b>\$302,723.00</b>

Government Bonds: 12.376%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
GNMA POOL #169637 9% 8/15/16	36216NLS0	0.000%	118 1800	111.2590%	31-Dec-2009	\$131 49	\$0 05
Ticker 169637X   Asset ID 36216NLS0	169637X						
U S TREASURY NOTE 4 125%	912828DV9	4.100%	75,000 0000	106.6250%	31-Dec-2009	\$79,968 75	\$75,079 10

5/15/10							
Asset ID 912828DV9							
U S TSY NOTES 4 25% 9/30/12	912828HE3	8.300%	150,000.0000	107.3130%	31-Dec-2009	\$160,969.50	\$151,388.70
Ticker 912828HE3   Asset ID 912828HE3	912828HE3						
<b>Subtotal</b>		<b>12.376%</b>				<b>\$241,069.74</b>	<b>\$226,467.85</b>

Mutual Funds: 20.883%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
ISHARES TR LEHMAN AGG BND	464287226	7.600%	1,437.0000	103.1900	31-Dec-2009	\$148,284.03	\$150,975.84
Ticker AGG   Asset ID 464287226	AGG						
ISHARES TR MSCI EAFE IDX	464287465	5.000%	1,745.0000	55.2800	31-Dec-2009	\$96,463.60	\$88,826.49
Ticker EFA   Asset ID 464287465	EFA						
ISHARES TR MSCI EMERG MKT	464287234	1.300%	606.0000	41.5000	31-Dec-2009	\$25,149.00	\$13,430.31
Ticker EEM   Asset ID 464287234	EEM						
ISHARES TR RUSSELL 2000	464287655	1.700%	535.0000	62.4400	31-Dec-2009	\$33,405.40	\$30,775.87
Ticker IWM   Asset ID 464287655	IWM						
ISHARES TR RUSSELL MIDCAP	464287499	5.300%	1,254.0000	82.5100	31-Dec-2009	\$103,467.54	\$84,256.26
Ticker IWR   Asset ID 464287499	IWR						
<b>Subtotal</b>		<b>20.883%</b>				<b>\$406,769.57</b>	<b>\$368,264.77</b>

Preferred Stock: 1.200%							
Asset Name	CUSIP ISIN SEDOL Ticker	Current Allocation	Quantity	Current Price	Date Priced	Market Value	Total Cost
JP MORGAN CHASE CAP XII	46626X203	1.200%	1,000.0000	23.9300	31-Dec-2009	\$23,930.00	\$25,920.00
Ticker JPM X   Asset ID.46626X203	JPM X						
<b>Subtotal</b>		<b>1.200%</b>				<b>\$23,930.00</b>	<b>\$25,920.00</b>

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

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form). **Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 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

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

File by the due date for filing your return See instructions	Name of Exempt Organization <b>THE SKEGGS FOUNDATION</b>	Employer identification number <b>34-6575001</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P O BOX 94651</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CLEVELAND, OH 44101</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ PNC BANK, NA

Telephone No. ▶ (216) 257-4701 FAX No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/23, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year 2009 or
- ▶  tax year beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_, \_\_\_\_\_.

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c</b> <b>Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

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

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form). Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 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

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>	Name of Exempt Organization <b>THE SKEGGS FOUNDATION</b>	Employer identification number <b>34-6575001</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P O BOX 94651</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CLEVELAND, OH 44101</b>	
	File by the due date for filing your return. See instructions	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ PNC BANK, NA

Telephone No. ▶ (216) 257-4701 FAX No. ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/23, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year 2009 or
- ▶  tax year beginning \_\_\_\_\_, \_\_\_\_\_, and ending \_\_\_\_\_

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c <b>Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.