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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009

_		- VC1100 3C1		oto: The loandat		<u> </u>	cc a copy or th				9 1044		—
_				tax year begin	ning				and endir			, 20	
G	Che	ck all th	nat apply	Initial retui				of a former pu	iplic chaut	_		Final return	
_				Amended	return		Addre	ss change		N	ame change		
			Name of foun	dation							A Employer identific	cation number	
į	Jse th	ne IRS											
	lab	el.	THE FARM	ER HOUSE M	USEUM,	INC.					35-	2081590	
	Other	wise,	Number and	street (or P O box	number if n	nail is not de	elivered to stree	address)	Room/sur	te	B Telephone number (see p	age 10 of the instructions)	
	•	int											
_		ype.	334 S. J.	ACKSON							() -	
		pecific ctions.	City or town,	state, and ZIP co	de			· · · · · · · · · · · · · · · · · · ·		1	C If exemption application		Т
"	nstru	cuons.									pending, check here D 1 Foreign organization		┪
			BLOOMING	TON, IN 47	403-14	176					Foreign organization Foreign organization	· —	_
_	Cho	ok tupo		on X Sect			ant private fo	undation		\neg	85% test, check he	ere and attach	٦
7		• •	_	_	-	_			on.		computation		J
4				xempt charitable				ivate foundation		_	E If private foundation s		\neg
ı			t value of all a				thod X C	asn Acc	rual		under section 507(b)(1)(A), check here . P	لـ
			m Part II, col			ther (spec					F If the foundation is in		\neg
		▶ \$		7,440.			a) musi be o	n cash basıs) T	1		under section 507(b)(
	'art I	total o may n	f amounts in co ot necessarily (ue and Expension of the solumns (b), (c), and equal the amount of the instruction of the	nd (d) ts in	expe	venue and enses per looks	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1			c , received (attach sch			1,200					(Gasir Basis Grily)	_
	2	Check I	If the fo	undation is not rec	uired to	<u> </u>	= / =		-				
	3	-	allacii (Sch B					·				_
	4		-	t from securities	ſ		111	<u> </u>	111.		111.		
					1		20,200	<u> </u>	20,200.		20,200.		
	oa L	5a Gross rents			20,200	<u> </u>	3,200.		20,2001				
	b Net rental income or (loss) 15,650.				 				THE				
Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				 							
Š	_		on line 6a –					<u> </u>					_
æ	7	•	•	ne (from Part IV, I	ine 2) R	ECE	VED -						
	8		ort-term capital	•	·		18	<u> </u>					
	9 10 a		modifications ales less returns		8	04 00		}					
		and allow	wances • • • •	•	8 N	OV 08	ZUIU						_
			ost of goods sold	-			<u> </u>	시 대					—
		•	, , ,	attach schedule)	$ \cdot\cdot\cdot\odot $	GDEN	√, UT 40	-				AMOU 1	
	11		ncome (attach					: 4 3	00 211		20 211	ATCH 1	
_	12			ough 11			21,551	+	20,311.		20,311.		
	13	•		, directors, trustees,	• • •		0	1					
5	14			es and wages .				-					
38	15			yee benefits	1			 	-				_
en				edule)		-		ļ					_
<u> </u>	b	Accour	nting fees (attac	ch schedule)			1,295	•					_
ė m	С	Other p	professional fee	s (attach schedu	le)			<u> </u>					_
ۦڲۣۯ	17	Interes	t										_
١	18	Taxes (a	attach schedule) ((see page 14 of the ins	tructions)			<u> </u>					
Ξ	19	Depred	ation (attach s	chedule) and dep	oletion .		6,181		3,154.		3,154.		
틍	20	Occupa	ancy					<u> </u>					
۲	21			and meetings									_
ä	22			ons									
g	23			h schedule) AT			9,492		2,396.		2,396.	7,09	€5
atiı	24		•	dministrative ex									_
Operating			es 13 through 2		·		16,968	.	5,550.		5,550.	7,09	€
ō	25		outions, gifts, gr										_
	26			sements. Add lines 2			16,968		5,550.		5,550.	7,09) 5
_	27		ct line 26 from I	•	T GIN ZO			<u> </u>	, '				Ť
	1				nents		4,583]	ŀ		ļ		
			•	enses and disbursen	1	_	., 505		4,761.				_
	l			ne (if negative, e	′ 1			 	, , , , , ,		14.761.		_
			OR DOLINAAMA										

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $9E1410\,2\,000$

03-067506-067983

JSA

Form **990-PF** (2009)

В	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	year Beginning of year			
u	artn	Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-beari	ng	7,876.	18,640	. 18,640.	
	2		ash investments				
	3						
	-	Less allowance for doubt	tful accounts				
	4						
	,	Less allowance for doubt	tful accounts				
	5						
	6		icers, directors, trustees, and other			<u> </u>	
	"		· · · · · · · · · · · · · · · · · · ·				
	_		ch schedule) (see page 16 of the instructions) ceivable (attach schedule)		 	 	
	7						
			tful accounts				
ţ	8		e				
Assets	9		eferred charges	· 1		 	
Ä			government obligations (attach schedule)				
			stock (attach schedule)				
	11 C	Investments - corporate b	ponds (attach schedule)			 	
	' '	and equipment basis	285,000.			ATCH 3	
		(attach schedule)	tion ▶ 9,335.	278,819.	275,665.	285,000.	
	12		oans				
	13	Investments - other (attac	ch schedule)				
	14	Land, buildings, and equipment basis	▶248,750.			ATCH 4	
		Less accumulated depreciat (attach schedule)	18,162.	233,615.	230,588	383,800.	
	15	Other assets (describe	>)				
	16	Total assets (to be comp	oleted by all filers - see the				
		instructions Also, see pa	ge 1, item l)	520,310.	524,893.	687,440.	
	17	Accounts payable and ac	crued expenses				
	18			l l]	
ø	19					7	
ij	20		s, trustees, and other disqualified persons			7	
Liabilities	21		es payable (attach schedule)			1	
ڐ	22		▶)			1	
			/			1	
	23	Total liabilities (add lines	s 17 through 22)				
_			ow SFAS 117, check here			7	
			through 26 and lines 30 and 31.				
Ś	24	-					
Š	25					7	
<u>ala</u>	26					1	
Net Assets or Fund Balances	20	Foundations that do r				-	
Ĕ			elete lines 27 through 31.				
Ē	27	Capital stock, trust princip	•	520,504.	520,504.		
0	28			320,331.	320,001.	†	
set	29	•	land, bldg , and equipment fund	-194.	4,389	†	
Asi	29		ated income, endowment, or other funds	154.	1,000	<u>'</u>	
et	30		balances (see page 17 of the	520,310.	524,893.		
Z	l	Total liabilities and not a	issets/fund balances (see page 17	320,310.	324,033.	-	
	31		` ' •	520 210	524 002		
			name in Not Appets of Fund	520,310.	524,893.	<u> </u>	
			anges in Net Assets or Fund				
1			ances at beginning of year - Part II, co		·	500 000	
		of-year figure reported				520,310.	
2		r amount from Part I, Iir				4,583.	
3		er increases not included	d in line 2 (itemize) ►		3		
4		lines 1, 2, and 3			4	524,893.	
5	Decr	reases not included in li	ne 2 (itemize) 🕨		5		
6	Tota	I net assets or fund bala	ne 2 (itemize) <u></u>	5) - Part II, column (b), I	ine 30 6	524,893.	

, (a) List and	s and Losses for Tax on Invided describe the kind(s) of property sold (enck warehouse, or common stock, 200 s	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr
a = 0.0., 5			D-Donation	· · · · · · · · · · · · · · · · · · ·	
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a					
b			ļ		
c					
d					
e				 -	
Complete only for assets sho	wing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain 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 to Losses (from co	
a					
b					
C					
d					
e					
Capital gain net income or (net canital insst	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
	or (loss) as defined in sections 1222 line 8, column (c) (see pages 13 and				
	ine 8		3		
Part V Qualification Un	der Section 4940(e) for Reduc	ced Tax on Net Investment Inco			
	ne section 4942 tax on the distributa ot qualify under section 4940(e) Do	able amount of any year in the base point complete this part	period?	\sqsubset	Yes X N
Enter the appropriate amo	unt in each column for each year, se	ee page 18 of the instructions before	making a	iny entries	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution rat (col (b) divided by	
2008	7,453.	Ō.			0.000000
2007	15,410.	0.		(0.000000
2006	0.	0.		(0.000000
2005	0.	0.		(0.000000
2004	0.	0.		(0.000000
Total of line 1, column (d)			2	(0.00000
	or the 5-year base period - divide the ation has been in existence if less the	e total on line 2 by 5, or by the	3	(0.00000
Enter the net value of nonc	charitable-use assets for 2009 from	Part X, line 5	4		293,784.
Multiply line 4 by line 3			5		0.
Enter 1% of net investment	t income (1% of Part I, line 27b)		6		148.
		:	7		148.
	es from Dad VIII be a 4		8	,	7.005
If line 8 is equal to or green	eater than line 7, check the box ii	n Part VI, line 1b, and complete th	nat part u	ısıng a 1% tax	rate See th

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the in-	struct	ions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		:	148.
	here ► X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			148.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			148.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0 .			
d	Backup withholding erroneously withheld			^
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			148.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Por	Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded 11			
	t VII-A Statements Regarding Activities		1	T
па	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4-	Yes	No X
	participate or intervene in any political campaign?	<u>1a</u>		
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	,,		x
	of the instructions for definition)?	1b		Α
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities			Х
	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers (3)			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
e				
2	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
-	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
Ta h	AFTER THE LEGISLA OF THE PROPERTY OF	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		i	
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) \blacktriangleright IN,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G°If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х

3a Did the foundation hold more than a 2% direct or indirect interest in any business

enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

. 4b X

Χ

3b

....▶ Form **990-PF** (2009)

NONE

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

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Pand Contractors (continued)	aid Employ	/ees,	
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none, e	nter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of serv		(c) Comp	
NONE				
				_
				
				
		-		
Total number	er of others receiving over \$50,000 for professional services		▶	NONE
Part IX-A	Summary of Direct Charitable Activities			
	ation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number ins and other beneficianes served, conferences convened, research papers produced, etc.		Expe	nses
	and outer periodical control, control			
1 N/A	·			
	·			
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)			
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amo	unt
1 NONE				
			·	
2				
All -45	and the district of the section of t			
	ram-related investments. See page 24 of the instructions			
3 NONE				
Total Add I	ines 1 through 3			

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Pa	wart X Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions)	eign foundatior	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	13,258.
C		1c	285,000.
d		1d	298,258.
е	d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	298,258.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	•	
	of the contractions	4	4,474.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	293,784.
6	Minimum investment return. Enter 5% of line 5	6	14,689.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privious foundations and certain foreign organizations check here ▶ and do not complete this	ate operating	
1	Minimum investment return from Part X, line 6	1	14,689.
2a	Tax on investment income for 2009 from Part VI, line 5	8.	
b		7	
С		2c	148.
3	Distributable amount before adjustments Subtract line 2c from line 1		14,541.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	14,541.
6	Deduction from distributable amount (see page 25 of the instructions)	. 6	<u>:</u>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	14,541.
			<u> </u>
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	7,095.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	•	
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	•	
а	Suitability test (prior IRS approval required)	3a	0.
b		AL	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	7,095.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	148.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,947.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when calculating when the column (b) is subsequent years when years when years when years when years when years when ye	hether the founda	
	qualifies for the section 4940(e) reduction of tax in those years		

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Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7				14,541.
2	Undistributed income, if any, as of the end of 2009				
a					
_	Total for pnor years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009	-			
-	i				-
b	110111 2003				
С.	From 2006				
d					
e	From 2008	0			
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$7,095.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				7,095.
е	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.			0.
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Pnor years' undistributed income Subtract				
_	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has				
	been previously assessed				
4	Subtract line 6c from line 6b Taxable				
u	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2010				7,446.
7	Amounts treated as distributions out of corpus				,
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
	applied on line 5 or line 7 (see page 27 of the				
•	instructions)		-		
9	Excess distributions carryover to 2010.	0.			
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9		1		
	Excess from 2005				
	Excess from 2006]		
С.					
d					
е	Excess from 2009 0 .		1		I

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pai	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	letermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	is effective for 2009, enter	r the date of the ruling		•	
b	Check box to indicate whe				4942()(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Pnor 3 years		(e) Total
2 4	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) rotar
	I or the minimum investment					
	return from Part X for each year listed	}				
D	85% of line 2a		-	*****		
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .				-	
d	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
	2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter		ŀ			
_	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
ь	4942(j)(3)(B)(i)				· · · · · · · · · · · · · · · · · · ·	
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
_	line 6 for each year listed					-
·	"Support" alternative test - enter	ľ				
	(1) Total support other than gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)				_	
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization	1				
	(4) Gross investment income					
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets
	at any time	during the year - se	e page 28 of the in	structions.)		
1	Information Regarding	Foundation Manager	s:	<u> </u>		
а	List any managers of	the foundation who h	nave contributed mor	e than 2% of the tota	I contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if th	ney have contributed	more than \$5,000) (S	ee section 507(d)(2))	
	N/A					
_	List any managers of	the foundation who	own 10% or more o	f the stock of a corno	oration (or an equally	large portion of the
	ownership of a partner					large portion of the
		,				
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
_	<u> </u>				table organizations r	and does not accept
	unsolicited requests f	for funds. If the found	dation makes difts (rants etc (see page	28 of the instruction	ons) to individuals or
	organizations under ot				20 01 110 1110111011	marriadaio or
_		`				
а	The name, address, ar	ia telepnone number oi	r the person to whom a	ipplications should be a	adaressea	
	N/A					
þ	The form in which appl	ications should be subr	mitted and information	and materials they sho	ould include	
	N/A		_			
C	Any submission deadli	nes				
	N/A					
d	Any restrictions or li	imitations on awards.	, such as by geogra	aphical areas, charita	ble fields, kınds of	institutions, or other
	factors					
	N/Δ					

Form	990-PF (2009)			35-2081590 Page 11			
Pai	t XV Supplementary Information (co	ntinued)					
3	Grants and Contributions Paid Durin	g the Year or App		uture Payment			
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
	Name and address (home or business)	or substantial contributor	recipient	contribution			
а	Paid during the year						
			-				
	Total			▶ 3a			
b	Approved for future payment						
				•			
	Total			▶ 3b			

	amounts unless otherwise indicated		vities ted business income	Evoluded by	section 512, 513, or 514	(e)
Liner gross	amounts, unless quietwise indicated	(a)	(b)	(c)	(d)	Related or exempt function income
1 Progran	n service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
			 			
b			_			
c					_	
u	 -					
f —						
g Fee	s and contracts from government agencies		_		· 	
_	rship dues and assessments					
	on savings and temporary cash investments					
4 Dividen	ds and interest from securities			14	111.	
5 Net rent	tal income or (loss) from real estate					
	ot-financed property					
	debt-financed property			16	15,650.	
	al income or (loss) from personal property .					
	vestment income					
•	loss) from sales of assets other than inventory		 "			71-2 - 12
	ome or (loss) from special events		 -			172.
	profit or (loss) from sales of inventory					
	evenue aSCELLANEOUS			_		40
-						40.
						2.2-17
e			,			
	I Add columns (b), (d), and (e)				15,761.	40.
	Add line 12, columns (b), (d), and (e)					
(See works)	heet in line 13 instructions on page 28 to	venfv calculat	ions)			13,001.
	Relationship of Activities			xempt Purp	oses	·
Line No. ▼	Explain below how each activithe accomplishment of the forpage 29 of the instructions)	ty for whic bundation's	h income is reporte exempt purposes (ed in column other than b	(e) of Part XVI-A cont by providing funds for	ributed importantly to such purposes) (Se
			NOT APPLICABL	E		
						
						

Par	t XVII	Information Exempt Orga		ansfers To and	Transactions	s and Relat	ionships	With N	lonc	harit	able
1	in se	ne organization directly ction 501(c) of the Co zations? ers from the reporting fou	or indirectly e	section 501(c)(3) orga	anizations) or in					Yes	No
ŭ		ash							1a(1)		Х
		ther assets							1a(2)		X
b		transactions									
		ales of assets to a noncha							1b(1)		X
	٠,	urchases of assets from a		. •					1b(2)		X
(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements [1b(3)] [1b(4)]										X	
		pans or loan guarantees						• • • • •	1b(5)		X
		erformance of services or							1b(6)		Х
c		g of facilities, equipment,	•	•					1c		Х
d		answer to any of t				Column (b)	should alv	vays show	the	fair r	narket
		of the goods, other		- ·	=						
	value	in any transaction or	shanng arrange	ement, show in colun	nn (d) the value	e of the good	ls, other a	issets, or	service	es rec	eived
(a) I	ine no	(b) Amount involved	(c) Name of no	nchantable exempt organiza	tion (d) De	escription of transfe	ers. transactio	ns. and shari	no arrar	aemen	ts.
(, -		N/A	(2,713.112.21.112.21		N/A		,			<u> </u>	
		· 									
				•							
						 					
					•						
							·				
											
											
	section	foundation directly or n 501(c) of the Code (oth	ner than section 50 schedule	01(c)(3)) or in section 52	⁷ ?			[es 🗀	∐ No
		(a) Name of organization		(b) Type of organ	IIZATION	'	(c) Description	n of relations!	пр		
				-							
	Under belief,	penalties of perjury, I declar it is true, correct, and comp	are that I have exar plete Declaration of	nined this return, including preparer (other than taxpa	accompanying sch iyer or fiduciary) is	nedules and stater based on all infon	ments, and to mation of wh	the best on the preparer	f my kı r hasaı	nowied(ny knov	ge and vledge
Ì		Mass Al	-0-	_	1 . /.	,	Page 7.	. 4- 14	2.	١,	•
a		gnature of officer or trustee	<u> </u>	<u></u>	10 / 2_	5/10	Title	m of	20ar	<u> </u>	
ē	31	gradure of officer of pusies			Date	<u> </u>		Preparer's	identify	rıng	
Sign Here	Paid Preparer's Use Only	Preparer's signature	F & m	· Many (A	10/20/1	Check if self-employ	ed ►	number (Sepage 30 of the P00771)	ee Signa ne instru	ature o	
,	Pali repai se O	Firm's name (or yours if	BKD, LI	LP CIT	μ <u> (</u> '		,	4-01602			
	₹ ⊃	self-employed), address	<u> </u>	EST BLOOMFIELD	ROAD SUITE	В		•			
		and ZIP code	BI.OOMIN	JGTON IN	Δ	7403	Phone so	812 33	36-81	550	

9E7000 1 000	REI	NA TV	DR	OY.	<u>ALTY INC</u>	OME			
Taxpayer's Name THE FARMER HOUSE							1		ing Number 81590
DESCRIPTION OF PROPERTY									
RENTAL			•					-	
	tively participate in th					20	,200	1	
REAL RENTAL INCO	ME.		- •				200	\dashv	
TOTAL GROSS INCOME · · · ·			• • • •		<u> </u>	· · · · · · · · · · · · · · · · · · ·			20,200.
OTHER EXPENSES:									
SEE ATTACHMENT						-		-	
	<u> </u>							1	
	-								
								4	
								_	
								-	
					· -			-	
DEPRECIATION (SHOWN BELOW)		-		3,1	54.		=	
LESS: Beneficiary's Portion									
AMORTIZATION								_	
LESS: Beneficiary's Portion								4	
DEPLETION LESS: Beneficiary's Portion									
								-	5,550.
TOTAL EXPENSES	ME (LOSS)							:	14,650.
Less Amount to	, , , , , , , , , , , , , , , , , , ,								
Rent or Royalty								_	
Depreciation						• • •			
								_	
Investment Interest Expense								_	
Other Expenses			• • • •			• • •		_	
Net Rent or Royalty Income (Loss	\								14,650.
Deductible Rental Loss (if Applica	ıble)								
SCHEDULE FOR DEPREC	IATION CLAIME	D		1		r	1	<u> </u>	
(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des	(e) Bus %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
SEE ATTACHMENT									
				ļ			ļ		
				-					
							1		
							<u> </u>		
				ļ			 	ļ	
						_	 	<u> </u>	
							+		
						-	1		
					<u> </u>	L	<u> </u>	<u> </u>	

03-067506-067

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER DEDUCTIONS

MANAGEMENT FEES
REAL ESTATE TAXES

1,000.

1,396.

2,396.

RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET <u>INCOME</u>
RENTAL	20,200.	3,154.	2,396.	14,650.
TOTALS	20,200.	3,154.	2,396.	14,650.

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE AND

EXPENSES PER BOOKS

40.

<u>DESCRIPTION</u>
MISCELLANEOUS

TOTALS

40.

717	
MITCHIN	MODEOM.
11011011	1000
מהאמגה	FARMER
E E	175

35-2081590

ATTACHMENT 2

FXPFNSFS
- OTHER
PART T
990PF
FORM

		1 11
NUE ES OKS	2,396. 3,915. 1,000. 2,106.	9,492.
REVENUE AND EXPENSES PER BOOKS		
7		70
		TOTALS
	NSES	
	(EXPEI	
NO	OYALT:	
DESCRIPTION	RENT AND ROYALTY EXPENSE UTILITIES REPAIRS SECURITY INSURANCE FEES	
DESC	RENT UTII REPI SECU	

3,914. 1,000. 75.

CHARITABLE PURPOSES 7,095.

	FAIL	ENDING	BALANCE		9, 335.	9,335
ENT 3	ECIATION DE		DISPOSALS			
ATTACHMENT 3	ACCUMULATED DEPRECIATION DETAIL		ADDITIONS		3,154	
	ACC	BEGINNING	BALANCE		6, 181	6, 181.
S, EQUI PMENT				0.	0	! 넴
BUILDING		ENDING	BALANCE	162,000.	123,000	285,000.
INVESTMENTS LAND, BUILIDINGS, EQUI PMENT	FIXED ASSET DETAIL		DISPOSALS			
INVESTM	FIXED AS		ADDITIONS			
		BEGINNING	BALANCE	162,000.	123,000	285,000
		METHOD/	CLASS	ч	M39	
			ASSET DESCRIPTION	LAND	BUILDING	TOTALS

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

ATTACHMENT 4

INC
MOSEUM,
HOUSE MU
FARMER

1	ENDING BALANCE	18,162		18,162.
ACCUMULATED DEPRECIATION DETAIL	ADDITIONS DISPOSALS			
CUMULATED DEPR		3,027.		
ACC	BEGINNING BALANCE	15,135		15,135
	ENDING BALANCE	118,050.	130, 700	248,750
FIXED ASSET DETAIL	ADDITIONS DISPOSALS			
FIXED AS	ADDITIONS			
	BEGINNING	118,050.	130,700	248,750
	METHOD/ CLASS	SL	-1	
	ASSET DESCRIPTION	BUILDING	LAND	TOTALS

ATTACHMENT 4

ATTACHMENT 5

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

EXPENSE ACCT AND OTHER ALLOWANCES	.0	· o	·	ó	·o	.0	0
CONTRIBUTIONS E TO EMPLOYEE BENEFIT PLANS	·	Ö	Ċ	Ċ	·	.0	0
COMPENSATION	0	o	Ö	·	·	.0	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	SECRETARY 1.00	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	DIRECTOR 1.00	GRAND TOTALS
NAME AND ADDRESS	CHRIS STURBAUM 334 S. JACKSON BLOOMINGTON, IN 47403-1476	BOB ZALTSBERG 334 S. JACKSON BLOOMINGTON, IN 47403-1476	PATTY PIZZO 334 S. JACKSON BLOOMINGTON, IN 47403-1476	JIM CAPSHEW 334 S. JACKSON BLOOMINGTON, IN 47403-1476	LAUREN COWEN 334 S. JACKSON BLOOMINGTON, IN 47403-1476	LOIS SILVERMAN 334 S. JACKSON BLOOMINGTON, IN 47403-1476	

Form 4562

Depreciation and Amortization

► See separate instructions.

(Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

2009 Attachment Sequence No 67

Department of the Treasury Internal Revenue Service (99)
Name(s) shown on return

your tax return. Sequence No 6 / Identifying number

Т	HE FARMER HOUSE MUS	EUM, INC.							<u>35-20</u> 81590
Busir	ness or activity to which this form relates								
G	ENERAL DEPRECIATION					<u> </u>			
Pa	rt I Election To Expense Cer								
	Note: If you have any list				you comple	ete Part I.			r " -
1	Maximum amount See the instructions						•••	1	<u> </u>
2	Total cost of section 179 property place						•••⊢	2	
3	Threshold cost of section 179 property					<i></i> .	•••⊢	3	
5	Reduction in limitation Subtract line 3 ft Dollar limitation for tax year Subtract line 4 from line separately, see instructions	1 If zero or less, enter -0-	If mamed filing				$\cdots \vdash$	5	
6	(a) Description of	f property		(b) Cost (b)	usiness use only	(c) Elect	ed cost		
7	Listed property Enter the amount from						. 1		
8	Total elected cost of section 179 prope						$\cdots \vdash$	8	
9	Tentative deduction Enter the smaller							9	
10	Carryover of disallowed deduction from						$\cdots \vdash$	10	
11	Business income limitation Enter the							11	
12	Section 179 expense deduction Add In	·					'	12	
13	Carryover of disallowed deduction to 20 as: Do not use Part II or Part III below for		•		. 🕨 🛚 13	ı			
	rt Special Depreciation A				o not includ	le listed prone	rty 1/Se		estructions)
	Special depreciation allowance fo								locadono /
14	during the tax year (see instructions)							14	
15	Property subject to section 168(f)(1) ele							15	
16	Other depreciation (including ACRS)						–	16	3,027
	rt III MACRS Depreciation (D								<u> </u>
				tion A	•				
17	MACRS deductions for assets placed i	n service in tax years	beginning bef	ore 2009				17	
18	If you are electing to group any a	-	-		ar into one	or more gener	al		
	asset accounts, check here								
	Section B - Assets	Placed in Service D	Ouring 2009	Tax Year	Using the G	eneral Depre	iation S	yst	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for o (business/invo only - see in	estment use	(d) Recovery period	(e) Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property								
b	5-year property	<u> </u>	•						
c	7-year property						ļ		
d	10-year property]					ļ		
	15-year property]					ļ		
	20-year property]							
9	25-year property	<u></u>			25 yrs		S/L		
h	Residential rental				27 5 yrs	MM	S/L		
	property				27 5 yrs	MM	S/L		
i	Nonresidential real				39 yrs	MM	S/L		
	property					MM	S/L		<u> </u>
	Section C - Assets PI	aced in Service Du	iring 2009 I	ax Year U	sing the Alt	ernative Depr		Sys	stem
	Class life	4			12 100	·	S/L		
	12-year	-			12 yrs	ММ	S/L		
	40-year rt IV Summary (See instruction	l one)	J		40 yrs	IVIIVI	S/L		l
		•						21	
21	Listed property Enter amount from line Total. Add amounts from line 12, line			n column (n) and line ?:		· · · · -	<u> </u>	
22	and on the appropriate lines of your re							22	3,027
23	For assets shown above and placed in	•	•				<u>• • • •</u>		3,027
23	portion of the basis attributable to secti				23				
F	Description And Marking				23	1		-	4500

Form	n 4562 (2009)											35	-2081	590	Page 2
	rt V Listed P	roperty (include						cles,	cellular	telepl	nones,	certa	in con	puters	
		used for entertain									_				
	Note: For	any•vehicle for wans (a) through (c) o	hich you ar of Soction A	e usin	g the sta	andard	1 mileag	ge rai	te or ded	lucting	lease e	expense	e, compl	ete on	Iy 24a,
		Depreciation and										2225	utomobil		
24-								-					$\overline{}$	-	1 21-
24a	Do you have evidence	to support the busine		it use c	iaimed / [No	24b f "Y	T		ice writt	en/ [Yes [No
	(a)	(b)	(c) Business/		(d)	Bas	(e) sis for depre	ciation	(f)	1	g)		(h)		(i)
	Type of property (list vehicles first)	Date placed in service	investment usi percentage	Cost	or other bas		siness/inves use only	stment	Recovery period	Meti Conv	nod/ ention		eciation uction		l section cost
		<u></u>								L	T				
25	Special depreciation	•			•			-							
	year and used more the				IISH UCHOTS	·) · ·	<u>· · · · · </u>	• • •	• • • • •	• • • •	. 25				
26	Property used more th	ian 50% in a quaimed			-				I	T					
				%								ļ			
				%		_				-		<u> </u>			
		<u> </u>		%		<u> </u>			<u> </u>	<u> </u>		L			
27	Property used 50% or	less in a qualified bu								,		,			
				%					<u> </u>	S/L -					
				%						S/L -					
			Ç	%						S/L -					
28	Add amounts in colum	nn (h), lines 25 throug	h 27. Enter he	ere and	on line 21,	page	1				. 28	<u> </u>			
29	Add amounts in colum	n (i), line 26 Enter he	ere and on line	e 7, pag	je 1								. 29		
			Secti	on B -	Informati	ion or	Use of	Vehi	cles						
Con	plete this section for	vehicles used by a	sole proprieto	or, part	ner, or otl	her "m	ore than	5%	owner," or	related	person	If you	provided	vehicles	to you
emp	loyees, first answer the	e questions in Section	n C to see if y	ou mee	et an excep	otion to	complet	ting th	nis section	for those	e vehicle	s			
				<u> </u>	a)	- (b)		(c)	6	d)		(e)		f)
30			Inven		icle 1		de 2	v	ehicle 3	Vehi	•		icle 5		cle 6
	during the year (do					•									
31	miles) Total commuting mile														
32		rsonat (noncommu	·												
JZ	•	•	iting)							i					
22	miles driven														
33	Total miles driven	•													
	_			V	- No.	V	84.5	V	. I At a	V	N.				
34	Was the vehicle		T T	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
	use during off-duty ho		-		+ +				-				1		
35		used primarily t	′							}		,			
	more than 5% ow	•	ſ		1			<u> </u>							
36	Is another vehicle	available for per	sonal												
	use?	 								<u> </u>	L	l	<u> </u>		
		Section C - Ques	tions for E	nploye	ers Who F	Provid	le Vehic	les fo	or Use by	Their E	mploye	es			
	wer these question		•		eption to	com	pleting	Secti	on B for	vehicle	s used	by em	ployees	who a	are not
mor	e than 5% owners o	or related persons	see instruct	ons)											T
37	Do you maintain a	a written policy s	tatement that	at prol	hibits all	perso	nal use	e of	vehicles,	including	g comi	nuting,	by	Yes	No
	your employees?														
38	Do you maintain a	written policy stater	nent that pro	ohibits	personal	use of	vehicles	s, exc	ept comm	iuting, b	у уоиг	employe	es?		
	See the instructions for	or vehicles used by c	orporate offic	ers, dire	ectors, or 1	l% or r	nore own	ners .	<i>.</i> .						
39	Do you treat all use of														
40	Do you provide m	nore than five vel	nicles to yo	our em	nployees,	obtair	ınform	ation	from yo	our emp	loyees	about	the		
	use of the vehicles, ar	nd retain the informat	ion received	,											
41	Do you meet the re	quirements concerni	ng qualified	autom	obile dem	onstra	tion use	? (Se	e instruction	ons)					
	Note: If your answer to														
Pa	rt VI Amortizat			-	-				-				_		
		· - · ·	<i>1</i> E.1						•		(e)			
	(a)		(b) Date amortiz	ation		(c)			(d)		Amortiz	ation		(f)	
	Description of	COSIS			I Amo	mizable.	amount		Code se	CTION .	neno	dor I	Amortizat	ion for the	s vear

Pa	rt V Amortization						
(a) Description of costs		(b) Date amortization begins	(c) Amortizable amount	1 1-7		ation or tage	(f) Amortization for this year
42	Amortization of costs that begins dur	ng your 2009 tax ye	ear (see instructions)				
43	Amortization of costs that began before y		43				
44	Total. Add amounts in column (f) See the	instructions for where	to report			44	
JSA							5 4E62 (0000)

9X2310 1 000

THE FARMER HOUSE MUSEUM, INC

Description of Property

35-2081590

3,027 3,027 3,027 Current-year depreciation Current-year amortization Current-year 179 expense ACRS CRS class class Lfe 39 000 Me-thod Conv Code 18,162 SL Accumulated amortization (Beginning Ending
Accumulated Accumulated depreciation depreciation 18,162 18,162 Accumulated / 15, 135 15,135 15, 135 Basis for depreciation 118,050 118,050 118,050 Basis Reduction 179 exp reduction in basis 100.000 100 000 Bus. % Unadjusted Cost or basis 118,050. 130,700 248,750 248,750 Cost or basis 1/01/2004 01/01/2004 Date placed in service Date placed in service Less Retired Assets TOTALS..... Asset description Asset description GENERAL DEPRECIATION
DEPRECIATION **AMORTIZATION** Less Retired Assets TOTALS BUILDING LAND

*Assets Retired JSA 9X9024 1 000

Depreciation and Amortization

See separate instructions.

(Including Information on Listed Property)

OMB No 1545-0172

Sequence No Identifying number

Attachment

35-2081590

Department of the Treasury Internal Revenue Service

THE FARMER HOUSE MUSEUM, INC

Attach to your tax return.

Business or activity to which this form relates RENTAL **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount. See the instructions for a higher limit for certain businesses. 2 Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions (a) Description of property (c) Elected cost Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 10 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) 3,154 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (q) Depreciation deduction penod only - see instructions) 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property 27 5 yrs MM S/L h Residential rental 27 5 yrs ММ S/I property ММ S/L 39 yrs i Nonresidential real ММ S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L c 40-year MM S/L Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 3,154. and on the appropriate lines of your return. Partnerships and S corporations - see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form	4562	(2009)	
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Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and

	Note: For	any•vehicle for w ans (a) through (c) (hich you a	re using	g the s	tandard	l milea				lease 6	expense	, compi	lete on	iy 24a,
		Depreciation and									r nasse	enger ar	ıtomohi	les 1	
24a	Do you have evidence					T T	28		4b If "\					Yes	No
		1	(c)	1		- '	(e)	10 2		1		l .			
	(a) Type of property (list vehicles first)	(b) Date placed in service	Business/ investment us percentage	se Cost	(d) or other ba		is for depressiness/inve	stment	(f) Recovery period	Met	g) hod/ ention	Depre	h) ciation iction	Elected	i) section cost
25	Special depreciation year and used more the	•			•			•			. 25				
26	Property used more th									•					
	Troporty about more at			%								· · · · · · · ·			
				%						 		 		 	
			-	%						 -		 			
	Droporty wood 50% or	less is a sublified by	1010000 1100	, ₀		l		L		l		L			
27	Property used 50% or	less in a qualified bu	Isiness use	o/l						100					
			-	%						S/L -		<u> </u>			
				%						S/L -		ļ		ļ	
				%						S/L -		ļ			
28	Add amounts in colum	` '				1, page	1				. 28				
29	Add amounts in colum	nn (i), line 26 Enter h	ere and on lir	ne 7, pag	e 1 .		<u></u>	· · · ·					. 29		
	nplete this section for ployees, first answer the		sole proprie		ner, or o	other "m	ore thai	n 5% ov	wner," oi				provided	vehicles	to you
30	Total business/investment miles driven during the year (do not include commuting		(a) Vehicle 1			(b) Vehicle 2		(c) Vehicle 3 Ve		d) icle 4	1 .	(e) Vehicle 5		(f) Vehicle 6	
31	miles)	ee driven during the	· · · · · ·					<u> </u>		1		 			
32	_	rsonal (noncommi	=			-						 			
32	•	•	umy)												
	miles driven							1		1		 			
33	Total miles driven		Add												
	lines 30 through 32				l N-			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T	V	N-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
34	Was the vehicle	•		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty ho			<u> </u>			ļ	1		<u> </u>	ļ			_	
35	Was the vehicle	used primarily l	by a				}								
	more than 5% ow	mer or related pe	erson?	<u> </u>				<u> </u>	-			<u> </u>			
36	Is another vehicle use?	•													
		Section C - Ques	stions for E	mploye	rs Who	Provid	e Vehi	cles for	Use by	Their E	mploye	ees			
	swer these question re than 5% owners of		-		eption 1	to com	pleting	Sectio	n B for	vehicle	s used	by em	ployees	who a	re not
37	Do you maintain	a written policy s	statement ti	nat proh	nibits a	II perso	nal us	e of v	ehicles,	ıncludın	g com	muting,	by	Yes	No
38	your employees? Do you maintain a	written policy stater							pt comm	outing, t	y your	employe	es?		
	See the instructions f	or vehicles used by c	corporate offi	cers, dire	ectors, or	1% or r	nore ow	ners							
39	Do you treat all use of														
40	Do you provide m	nore than five ve	hicles to y	our em	ployees,	obtain	ınforn	nation	from ye	our emp	oloyees	about	the	I	
	use of the vehicles, ai													<u></u>	
41	Do you meet the re	equirements concern	ing qualified	automo	obile de	monstra	tion us	e? (See	instruction	ons)					
	Note: If your answer t														
Pa	rt VI Amortizat	ion												,	
			(6)	,							(e	2)			
	(a) (b) Description of costs (begin		ization	(c) nortizable	(c) zable amount		(d) Code section		Amortization period or percentage		(f) Amortization for this year				
42	Amortization of cost	s that begins during	g your 2009	9 tax ye	ear (see	ınstructi	ons)				•				
	•														
43	Amortization of costs	that began before vou	ır 2009 tax v	ear	•						•	43		·	
44	Total. Add amounts in			•	to report							44			
JSA 9X23	310 1 000							<u>-</u>					For	m 4562	(2009)

35-2081590

THE FARMER HOUSE MUSEUM, INC

Description of Property

3, 154 Current-year depreciation Current-year amortization Current-year 179 expense ACRS CRS class class 39 Lfe Me-thod Conv Σ Code SL Ending Accumulated amortization Beginning Ending
Accumulated Accumulated depreciation depreciation 9, 335 9,335 9,335 Accumulated 6, 181. 6, 181 6, 181 Basis for depreciation 123,000 123,000 123,000 Basis Reduction 179 exp reduction in basis 100 000 000 00 Bus % Unadjusted Cost or basis 123,000 162,000. 285,000 285,000 Cost or basis 01/01/2007 Date placed in service 01/01/2007 Date placed in service ess Retired Assets TOTALS..... Asset description Asset description Subtotals RENTAL DEPRECIATION Less Retired Assets **AMORTIZATION** TOTALS BUILDING LAND

*Assets Retired JSA 9X9024 1 000

03-067506-067983

Form 8868

(Rev April 2009)

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

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Department of the Treasury

File a separate application for each return.

Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box 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 unlessou 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 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 From 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 and click on e-file for Charities & Nonprofits Employer identification number Name of Exempt Organization Type or THE FARMER HOUSE MUSEUM, INC. 35-2081590 print Number, street, and room or suite no. If a P.O. box, see instructions File by the due date for 334 S. JACKSON filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions BLOOMINGTON, IN 47403-1476 Check type of return to be filed (file a separate application for each return) Form 4720 Form 990 Form 990-T (corporation) Form 5227 Form 990-T (sec 401(a) or 408(a) trust) Form 990-BL Form 990-T (trust other than above) Form 6069 Form 990-EZ Form 8870 Form 990-PF Form 1041-A The books are in the care of ► MONROE BANK Telephone No ▶ 812 331-3425 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 3-month (6 months for a corporation required to file Form 990-T) extension of time 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 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 250. nonrefundable credits. See instructions 3a 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 Balance Due. 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 250. instructions

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.

Form 8868 (Rev 4-2009)

Form 8868 (Re	4-2009)			Page 2			
If you ar	e filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this box		▶ X			
Note. Only	complete Part II if you have already been granted an automatic 3-month extensi	sion on a previously filed Fo	rm 88	368			
If you ar	e filing for an Automatic 3-Month Extension, complete only Part I (on page	1)					
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no cop	ies	needed).			
Tuna ar	Name of Exempt Organization	Employer identifi	identification number				
Type or print	THE FARMER HOUSE MUSEUM, INC.	35-208159	0				
File by the	Number, street, and room or suite no. If a P.O. box, see instructions						
extended	334 S. JACKSON						
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions		1				
return See Instructions	BLOOMINGTON, IN 47403-1476						
Check typ	e of return to be filed (File a separate application for each return)						
	n 990 X Form 990-PF	Form 1041- A	Γ	Form 6069			
-	Form 990-B L Form 990-T (sec 401(a) or 408(a) tr ust) Form 4720						
	n 990-EZ Form 990-T (trust other than above)	Form 5227	-] Form 8870			
	not complete Part II if you were not already granted an automatic 3-mo		usly	filed Form 8868.			
	ks are in the care of MONROE BANK						
	ne No ▶ 812 331-3425 FAX No ▶			_			
	panization does not have an office or place of business in the United States, che	eck this box		_			
	for a Group Return, enter the organization's four digit Group Exemption Numbe		his is				
	ele group, check this box > If it is for part of the group, check this	· · · — — — — — — — — — — — — — — — — —		,			
	names and EINs of all members the extension is for	box P and attack	,,, ,				
	uest an additional 3-month extension of time until 11/15/2010						
•	alendar year 2009, or other tax year beginning	and ending	_				
	tax year is for less than 12 months, check reason Initial return	_1	- ID 6	accounting period			
_	<u> </u>	That letum Chang	C 111 6	accounting period			
	IN detail why you need the extension TIONAL TIME IS REQUIRED TO ACCUMULATE THE INFORMATION	N NECESSARY TO					
	A COMPLETE AND ACCURATE RETURN.	DN NECESSARI TO					
<u> </u>	A COMPLETE AND ACCORATE RETORN.						
0 . If th.	application in far Form 000 BL 000 BE 000 T 4700 or 6060 anter the	toptotwo toy loss are:	 				
	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						
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated						
	tax payments made Include any prior year overpayment allowed as a credit and any amount paid						
	previously with Form 8668						
	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit						
with	FTD coupon or, if required, by using EFTPS(Electronic Federal Tax Payment S		8c	\$			
Indos	Signature and Verificatio			basinladas t t			
	es of perjury, I declare that I have examined this form, including accompanying schedules a ect, and complete, and that I am authorized to prepare this form	no statements, and to the best of	n my	knowledge and belief,			
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Summatura 🕨	T.U.	D-4-					
Signature >	Title >	Date		0000 10 100			
	SKD, LLP		Form	8868 (Rev 4-2009)			
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1600 WEST BLOOMFIELD ROAD SUITE E BLOOMINGTON, IN 47403