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Form	9	9	0	_	P	F

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

Oi	VI C	NO	13	45-	0052
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		nt of the Tr evenue Sei		Note	: The foundation	n may be	e able to use a copy of th	is return to sati	on sfy state repo	orting requirements	<u> </u>
_				_	x year beginr				and ending		, 20
			nat apply	T	Initial return		Initial return o	<u>`</u>			Final return
_					Amended re	eturn		ss change		Name change	
_			Name of fo	undati						A Employer identifi	cation number
	lee th	e IRS									
١	iab		HORACE	שבח	SON FOUND	ΜΩΤΤΩΝ	•			36~	6059767
(Other						nail is not delivered to street	address)	Room/suite		
	pri				ETTE KAHI			auuiess)	1 TOOM/Suite	B reschious unimer (255)	age to or the instructions)
	or ty	pe.	-, -		SITY STRE		.G		903	/20	6) 000 0641
S	ee Sp	ecific			te, and ZIP code				903	C If exemption applicat	6) 922-2641
İ	nstruc	tions.	City of tow	ii, Stat	le, and zir code	E				pending, check here	
			OD N EET I	T.7	00101					D 1 Foreign organizati	· - —
_					A 98101					2. Foreign organizati 85% test, check h	
뇐		•	of organiz				(3) exempt private for			computation .	
\perp					mpt chantable t		Other taxable pri			E If private foundation :	status was terminated
ı			t value of a				unting method XC	ash [] Acc	rual	under section 507(b)	(1)(A), check here . 🕨 🔛
			m Part II, c				ther (specify)		-	_ F If the foundation is in	a 60-month termination
-		▶ \$	1,	_			column (d) must be or	cash basis)	· · · · · · · · · · · · · · · · · · ·	under section 507(b)	
Ŀ	art	Analy	sis of Rev	enue	and Expense	es (The	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements
					nns (b), (c), and al the amounts		expenses per	incom		income	for chantable purposes
_					of the instructi		books				(cash basis only)
	1	Contributi			eceived (attach sche						
	2	Check	f the	e found ch Sch	lation is not requ	ired to					
	3	Interest			orary cash invest		26,296.	2	6,296.		ATCH 1
	4	Divider	nds and inter	est fro	om securities		40,950.	4	0,950.		ATCH 2
	5 a										
						l					
					of assets not on lin		-32.				
nue		Gross s	ales price for a			,012.				······································	
Revenue	7		on line 6a	ome (from Part IV, Iir	 -					
2	_		_								,
	8				in						
	9 10 a	Gross s	ales less retur	ns	i · · · · · · · ·						
			wances • •								
	I		ost of goods s				····				
	,				ach schedule)						
	11				nedule)		67,214.		57,246.		
_	12				<u>h 11</u>		4,200.		1,800.		2,400
	13				rectors, trustees,		4,200.	· · · · · · · · · · · · · · · · · · ·	1,000.		2,400
۰,	14				and wages .					 -	
Se	15		n plans, em	-		<u>.</u>	110				59
ĕ	16 a		ees (attach			٠٠٠ ا	119	 	60.	0.	59
X	b	Accour	nting feet a	HECK!	etuedale)	ا ۱۰۰ ان			2 500	······································	
ē	c	Other	orofessional	fees (attach schedu	Σ [4].	5,000.		2,500.		2,500
Operating and Administrative Expenses	17	Intere	กักกับ ใช้	v [.] 1	1. 1110 V	어	<u> </u>	ļ		· <u></u>	
str	18				4 2010 :		50.	<u> </u>			ļ <u>.</u>
<u>=</u>	19	Depre	iatiφn (attac	h sche	edule) and dep	e∰oh .					ļ
ģ	20	Occup	ncy . O.	317	EN: UT.	· · - ·					
ΔĎ	21	Travel,	conference	and	meetings	• • • •					
a	22		g and public								
ing	23	Other e	expenses (a	ttach s	schedule) [6]	183.		91.		92
rati	24	Total c	perating an	d adm	ninistrative exp	enses.					
þe]	Add Im	es 13 throug	gh 23			9,552.		4,451.	0.	5,051
0	25		outions, gifts		ts paid		60,300.			·	60,300
	26			. •	ents Add_lines 24	and 25	69,852.		4,451.	0.	65,351
_	27		ct line 26 fro								<u> </u>
	1				ses and disburseme	ents	-2,638.	}			,
	1			-	(if negative, en				52,795.		
	1				negative enter	•		 		-0-	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $279296\ 1143\ 3/30/2010\ 6:12:41\ PM\ V\ 09-5.1$

JSA ** ATCH 5 002-30125-441

Form **990-PF** (2009)

PAGE 2

36-6059767

P	art III	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	102,917.	121,917.	122,162.
ĺ	3	Accounts receivable		,	•=
		Less allowance for doubtful accounts		········	
ĺ	4	Pledges receivable		÷ -	
-		Less allowance for doubtful accounts		· · · · · · · · · · · · · · · · · · ·	
ĺ	5	Grants receivable			
,	6	Receivables due from officers, directors, trustees, and other		;	
' [disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)	No. 10	ner to happen to	
- {		Less allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10 a	Investments - U S and state government obligations (attach schedule)			
ł	b	Investments - corporate stock (attach schedule) ATCH. 7.	115,184.		
	11 C	Investments - corporate bonds (attach schedule) ATCH 8 Investments - land, buildings, and equipment basis		451,204.	402,153.
-		(attach schedule)	l l		
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
ļ	15	(attach schedule) Other assets (describe			
١	16	Total assets (to be completed by all filers - see the			
ļ	10	instructions Also, see page 1, item I)	669.305	688.261	1,269,762.
\dashv	17	Accounts payable and accrued expenses	003,003.		1,200,102.
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			_
園	21	Mortgages and other notes payable (attach schedule)			·
اڌ	22	Other liabilities (describe			
-					,
	23	Total liabilities (add lines 17 through 22)	}		
		Foundations that follow SFAS 117, check here			
Į		and complete lines 24 through 26 and lines 30 and 31.	j		
S	24	Unrestricted	669,305.	688,261.	
lances	25	Temporarily restricted			
		Permanently restricted			
or Fund Ba		Foundations that do not follow SFAS 117,			
딆		check here and complete lines 27 through 31. ▶	1		•
5	27	Capital stock, trust principal, or current funds			
ts	28	Paid-in or capital surplus, or land, bldg , and equipment fund			•
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see page 17 of the			
Š		instructions)	669,305.	688,261.	
	31	Total liabilities and net assets/fund balances (see page 17		-	
		of the instructions)	669,305.	688,261.	
		Analysis of Changes in Net Assets or Fund			
1	Tota	I net assets or fund balances at beginning of year - Part II, co	lumn (a), line 30 (must ag	ree with	
	end-	of-year figure reported on prior year's return)		1	669,305.
		r amount from Part I, line 27a		2	-2,638.
		er increases not included in line 2 (itemize) ATTACH	MENT 9	3	30,900.
		lines 1, 2, and 3		4	697,567.
5	Deci	reases not included in line 2 (itemize) ATTACH	<u> MENT 10</u>	5	9,306.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), lir	ne 30 6	688,261.

• •	d describe the kind(s) of property sold (e	-	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr)	(d) Date sole (mo , day, yr
SEE PART IV SCHE	rick warehouse, or common stock, 200 s	shs MLC Co)	D-Donation	(mo, day, yr)	
DEE TAKE TV BONDS			†	 	
	· · · · · · · · · · · · · · · · · · ·		 	 	
(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) mini	
			<u> </u>		
			ļ		
_ 			<u> </u>		
omplete only for assets sho	wing gain in column (h) and owned			Gains (Col (h) g	
(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	COI	(k), but not less t Losses (from co	
			ļ		
			1		
			 		
			 		
	L	<u> </u>	 		
Capital gain net income or (gain, also enter in Part I, line 7			2.0
	· · · · · · · · · · · · · · · · · · ·	(loss), enter -0- in Part I, line 7	2		-32
	or (loss) as defined in sections 122:		. 1		
•	line 8, column (c) (see pages 13 an		-		
If (loss), enter -0- in Part I, I	line 8		3 1		
art V Qualification Ur or optional use by domestic	nder Section 4940(e) for Reductions subject to the s	ced Tax on Net Investment Inc	ome)	
art V Qualification Ur or optional use by domestic section 4940(d)(2) applies, keep the foundation liable for the	private foundations subject to the steam this part blank the section 4942 tax on the distributions	ection 4940(a) tax on net investment location 4940(a) tax on net investment location and locatio	ome nt income] Yes [X]
art V Qualification Ur or optional use by domestic section 4940(d)(2) applies, le as the foundation liable for to Yes," the foundation does n	private foundations subject to the seave this part blank the section 4942 tax on the distribution qualify under section 4940(e)	ection 4940(a) tax on net investment location 4940(a) tax on net investment able amount of any year in the base on not complete this part	ome nt income	🗆] Yes X
art V Qualification Ur or optional use by domestic section 4940(d)(2) applies, ke as the foundation liable for to Yes," the foundation does in Enter the appropriate amo (a)	private foundations subject to the seave this part blank the section 4942 tax on the distribution qualify under section 4940(e) Disput in each column for each year, section 4940, and the section 494	able amount of any year in the base o not complete this part	ome nt income	any entries	
art V Qualification Ur or optional use by domestic section 4940(d)(2) applies, le as the foundation liable for to Yes," the foundation does in Enter the appropriate amo (a) Base period years	private foundations subject to the seave this part blank the section 4942 tax on the distribution qualify under section 4940(e)	ection 4940(a) tax on net investment location 4940(a) tax on net investment able amount of any year in the base on not complete this part	ome nt income	any entries (d) Distribution ra	atio
pert V Qualification Unor optional use by domestic section 4940(d)(2) applies, least the foundation liable for the Yes," the foundation does in Enter the appropriate amo	private foundations subject to the seave this part blank the section 4942 tax on the distribution qualify under section 4940(e) Dount in each column for each year, section (b)	able amount of any year in the base o not complete this part lee page 18 of the instructions before	ome nt income	any entries	atio col (c))
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e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ►\$ NONE 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes. 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a X 4b If "Yes," has it filed a tax return on Form 990-T for this year? 5 X If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument? 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 X 8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► IL. 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 9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(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 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. 10 Ax	d				
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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		By state legislation that effectively amends the governing instrument so that no mandatory directions that		v	
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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	_		GB	<u> </u>	<u> </u>
27)? If "Yes," complete Part XIV	9				1
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.					х
names and addresses	40		-		<u> </u>
	10		10		х
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Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address ►N/A			
14	The books are in care of ▶ JEANNETTE D. KAHLENBERG Telephone no ▶ (206) 92		41	
	Located at ▶900 UNIVERSITY STREET, APT 903 SEATTLE, WA ZIP+4 ▶ 98101-	3721		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Ν/A	▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	ļ	X
	Organizations relying on a current notice regarding disaster assistance check here			ĺ
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		-	
	were not corrected before the first day of the tax year beginning in 2009?	1c	 	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			· '
	6e, Part XIII) for tax year(s) beginning before 2009? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	٦.	N N	 /A
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	1 1V/	-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_			1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	İ		
	checiphise at any unite during the year	1	l	
ь	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			į
	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	34	N,	/A
. -	foundation had excess business holdings in 2009)	3b 4a	 ′	x
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	"	1	
D	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		х
_		om 99	n DE	

Par	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requir	red (continued)		
5 a	During the year did the foundation pay or incur any amount	to				
	(1) Carry on propaganda, or otherwise attempt to influence	legislation (section 4	945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public election (see	ee section 4955), or to	carry on,		}	
	directly or indirectly, any voter registration drive?			Yes X No	·	
	(3) Provide a grant to an individual for travel, study, or other	r sımılar purposes?		. Yes X No	,	
	(4) Provide a grant to an organization other than a charitab	le, etc , organization (described in			
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (sec	e page 22 of the instr	uctions)	Yes X No	,	
	(5) Provide for any purpose other than religious, charitable,	scientific, literary, or	educational			1 1
	purposes, or for the prevention of cruelty to children or	anımals?		. Yes X No	,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa	actions fail to qualify	under the exceptions	described in		
	Regulations section 53 4945 or in a current notice regardi	ng disaster assistance	e (see page 22 of the	instructions)?	5b	N/A
	Organizations relying on a current notice regarding disaster	assistance check her	е	▶ 🔲		
c	If the answer is "Yes" to question 5a(4), does the foundation					
•	because it maintained expenditure responsibility for the grain	•		Yes No	,	
	If "Yes," attach the statement required by Regulations section			. — —		
6.0	Did the foundation, during the year, receive any funds, direct		v premiume			
0 a	on a personal benefit contract?			Yes X No	,	
h	Did the foundation, during the year, pay premiums, directly				6ь	l x
_	If "Yes" to 6b, file Form 8870	or manechy, on a per-	Sonai Beneni Congact.		52	
7 2	At any time during the tax year, was the foundation a party t	to a prohibited tay she	elter transaction?	Yes X No		
	If yes, did the foundation receive any proceeds or have any	•	-		7b	N/A
ė	t VIII Information About Officers, Directors			Highly Paid Emp		
	and Contractors	·				
_1	List all officers, directors, trustees, foundation man	agers and their co	mpensation (see pa (c) Compensation	ge 22 of the instruct		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred compensation	(e) Expens other allo	
		devoted to position		and deterred compensation		
 ΔΤ	TACHMENT 11		4,200.	o.)		0
<u> </u>	TACINIMIT II			<u>_</u>		
						
2	Compensation of five highest-paid employees (othe	r than those include	ded on line 1 - see n	age 23 of the instruc	tions)	
-	If none, enter "NONE."					
		(b) Title, and average		(d) Contributions to employee benefit	(e) Expens	se account.
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other all	
			<u> </u>	compensation	 -	
						
				 		
				ļ		
		1		}		
		L	L	L		
Tota	I number of other employees paid over \$50,000 .	<u> </u>	. <u></u>	<u> </u>	<u></u>	NONE
					Form 99	0-PF (2009)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (continued)	ly Paid Employees,
3 Five highe	est-paid independent contractors for professional services (see page 23 of the instruc	tions). If none, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type	
NONE		
~		
		
~		
Total number	er of others receiving over \$50,000 for professional services	NONE
		NONE
Part IX-A	Summary of Direct Charitable Activities	
	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nui ns and other beneficiaries served, conferences convened, research papers produced, etc.	mber Expenses
1 NONE		
2		
	· · · · · · · · · · · · · · · · · · ·	
3		
. 		
4		
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)	
	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
	ram-related investments. See page 24 of the instructions	
3 NONE		
	·	
T-4-1 A-2-1		NONE
rotar. Add II	nes 1 through 3	Form 990-PF (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part Foreig see page 24 of the instructions)	n foundation	s,
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	989,561.
b	Average of monthly cash balances	1b	109,432.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	1,098,993.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,098,993.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	16,485.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,082,508.
6	Minimum investment return. Enter 5% of line 5	6	54,125.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ► and do not complete this page 1.5.		
1	Mınımum investment return from Part X, line 6	1	54,125.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 628.		
ь	Income tax for 2009 (This does not include the tax from Part VI)	} }	
С	Add lines 2a and 2b	2c	628.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	53,497.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 2 and 4	5	53,497.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	53,497.
		l · · · · -	
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	65,351.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	numoses	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	65,351.
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	628.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	64,723.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheti	<u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years	als lourida	

Form 990-PF (2009)

۲a	TaxIII Undistributed income (see page	20 of the instruction	13)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				53,497.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			65,325.	
b	Total for prior years 20,20,20		0.		
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
	From 2005				
С	From 2006 0.				
d	From 2007 0.			j	
е	From 2008 0 .				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$65,351.				
а	Applied to 2008, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		65,325.	
b	Applied to undistributed income of prior years (Election				
-	required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				26.
e	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	0.			0.
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				•
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been			Í	
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions		0.		
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions			NONE	
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1 This amount must be				
	distributed in 2010				53,471.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	·			
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9				
а	Excess from 2005				
	Excess from 2006				
	Excess from 2007 0 .				
	Excess from 2008 0 .				
	Excess from 2009 0 .				

Pa	Private Oper	ating Foundations	(see page 27 of the	instructions and F	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	-		at it is a private op	7.	
	foundation, and the ruling		=		•	()(0) - 1 (0)(0)(0)
ь	Check box to indicate whe		nvate operating foundation		49420	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	- 	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b	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					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets(2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed	ł				
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),		į			
	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					
	(4) Gross investment income		<u> </u>	<u> </u>		<u> </u>
Pa		ary Information (C during the year - se			ndation had \$5,000	or more in assets
1	Information Regarding					
а	List any managers of before the close of any	the foundation who f tax year (but only if the	nave contributed mor ney have contributed	more than 2% of the to more than \$5,000)	otal contributions receil (See section 507(d)(2)	ved by the foundation)
	NONE					
b	List any managers of ownership of a partner					ly large portion of the
	NONE					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if t unsolicited requests f organizations under ot	for funds If the foun-	dation makes gifts,	grants, etc (see pa	aritable organizations age 28 of the instructi	and does not accept ons) to individuals or
a	The name, address, an				e addressed	
b	The form in which appli	cations should be subr	mitted and information	and materials they s	should include	
c	Any submission deadling	nes	· 			
d	Any restrictions or lifactors	mitations on awards	, such as by geogr	aphical areas, chai	ritable fields, kinds of	institutions, or other

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual,	Foundation status of					
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount			
a Paid during the year	or designation						
ATTACHMENT 12	ľ		!				
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T-A-I	L	<u> </u>	<u> </u>	60,300.			
b Approved for future payment	 	,	▶ 3a	00,300.			
b Approved for future payment			!				
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		1	!				
		-					
		}					
		}					
		1		}			
Total			▶ 3b	NONE			
Total				Form 990-PF (2009)			

	Analysis of Income-Production ounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
	ervice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
=				 		the mandadina /
_						
f						
g Fees a	nd contracts from government agencies					
Membersh	rp dues and assessments					
	avings and temporary cash investments			14	26,296.	
Dividends	and interest from securities			14	40,950.	
Net rental	ncome or (loss) from real estate					·
	nanced property			<u> </u>		
b Not de	bt-financed property					
	come or (loss) from personal property			_		
Other inve	stment income			 		
Gain or (loss	s) from sales of assets other than inventory	ļ		18	-32.	
	e or (loss) from special events					
	it or (loss) from sales of inventory					
	nue a		ļ. ———			
ь					<u>-</u>	
						
		<u> </u>			<u> </u>	
e					67.014	
Subtotal A	add columns (b), (d), and (e)				67,214.	67 214
Subtotal A Total. Add	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to	verify calcula	tions)	_	13	67,214
Subtotal A	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activi	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B Line No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B .ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B .ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B .ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purp	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B .ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the income is reported.	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly
Subtotal A Total. Add ee workshee art XVI-B .ine No.	line 12, columns (b), (d), and (e) et in line 13 instructions on page 28 to Relationship of Activities Explain below how each activithe accomplishment of the form	verify calcula to the Ac	tions) complishment of the complishment of th	Exempt Purpled in column (other than the column than the colum	ooses (e) of Part XVI-A con	tributed importantly

Pa	t XVII	Information R Exempt Organ		ransfers To and	Transactions a	and Relati	onships With	lonc	harit	able
1 a	in sec organi Transf	ne organization directly ction 501(c) of the Coc zations? ers from the reporting found	le (other than dation to a nonch	section 501(c)(3) organization	anizations) or in sition of	ection 527, r	relating to political	-	Yes	-
		ash						1a(1)		X
h		ther assets						1a(2)		
_		ales of assets to a nonchari	table exempt org	janization				1b(1)		X
	(2) Pu	ırchases of assets from a n	onchantable exe	mpt organization				1b(2)		Х
		ental of facilities, equipment								X
		eimbursement arrangement							L	X
		ans or loan guarantees . erformance of services or m								X
С		g of facilities, equipment, m	•	*						X
d	If the	answer to any of the	e above is "Y	es," complete the foll	lowing schedule	Column (b) s	should always show	the	faır ı	market
		of the goods, other a in any transaction or			-					
(a)	ine no	(b) Amount involved	(c) Name of no	oncharitable exempt organizat	tion (d) Desc	ription of transfer	s, transactions, and share	ng arran	 igemen	ıts
		N/A			N/A					
										
										
							 			
		 					· ·			
			·			-				
							· · · · · · · · · · · · · · · · · · ·			
			 							
	section	foundation directly or ii n 501(c) of the Code (othe	r than section 5						es 🖸	 No
t	<u>If</u> "Yes	 complete the following so (a) Name of organization 	chedule	(b) Type of organ	nization		c) Description of relations	hip		
N	/A	(a) Hame of organization		(b) Type of organ	in a second		of Boson, priori or relations	р	_	
								_		_ ,
	Under	penalties of perjury, I declar	ete Declaration o	imined this return, including f preparer (other than taxpa	accompanying sched	lules and statem sed on all inform	nents, and to the best chation of which prepare	of my k	nowled ny knor	ge and wledge
<u>e</u>	<u> </u>	gnature of officer or trustee			Date		Trtle			
Sign Here	Paid Preparer's Use Only	Preparer's signature	Patricia	Godfrey Moss	Date March 31, 2010	Check if self-employe	Preparer's number (S page 30 of the P00394	ee Signa ne instru	ature o	
	Prepa Use (Firm's name (or yours if		& YOUNG U.S. LL			EIN ▶ 34-6565	596		
	اد ۵	self-employed), address, and ZIP code		UTH WACKER DRIV			210.0	70 0	000	
			CHICAG	O, IL	606	606	Phone no 312-8	79-2		(2000)
								UI 111 33	V-I' I'	(4003)

HORACE DAWSON FOUNDATION

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVEST	MENT INCOME

<i>U</i>	APITAL GA	INS AND LO	<u> </u>	R IAX ON	INVES I	IN	IENT INCOM	
Kind of Property Description				0.0	Date acquired	Date sold		
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	М	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis		or (loss)	
50,000.	CHONGE	50,000 CD Si					01/19/2005	02/04/2009
12.		27 SHS FAIR	POINT COMMUN	NICATIONS			09/14/1977 -32.	04/14/2009
OTAL GAIN (L	oss)				• • • • • •			·
								!
		1						
iA								<u> </u>

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT	INCOME	26,296.
REVENUE AND EXPENSES	PER BOOKS	26,296.
		INVESTMENTS
	DESCRIPTION	MERRILL LYNCH EMA INVE JPMORGAN CHASE

26,296.

26,296.

TOTAL

PAGE 17

SECURITIES
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40,950.
40,950.
TOTAL
JERRILL LYNCH EMA INVESTMENTS

HORACE DAWSON FOUNDATION

1 002-30125-441

ATTACHMENT 3

ATTACHMENT 3

FORM 990PF, PART I - LEGAL FEES

	CHARITABLE	PURPOSES
ADJUSTED	NET	INCOME
NET	INVESTMENT	INCOME
REVENUE AND	EXPENSES	PER BOOKS
		DESCRIPTION

59.

60.

119.

TOTALS

LEGAL FEES

.09

119.

59.

PAGE 18

0.40

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE <u>PURPOSES</u>	2,500.	2,500.
NET INVESTMENT INCOME	2,500.	2,500.
REVENUE AND EXPENSES PER BOOKS	2,000.	5,000.
		TOTALS
DESCRIPTION	TAX PREPARATION - EY	

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

ESTIMATED TAX PAYMENTS

50.

TOTALS

50.

PAGE 21

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	CHARITABLE	79.	13.	92.
NET	INVE			91.
REVENUE AND	EXPENSES	158.	25.	183.
	NOTHOLOGIA	BANK FEES-MERRILL LYNCH	IL SECRETARY OF STATE FILING	TOTALS

STOCK	
CORPORATE	
ı H	
PART I	
990PF,	
FORM	

ENDING	110,143. 70,103. 102,565. 105,640. 111,537. 13,480. 98,834. 49,165. 83,980. 0.
ENDING BOOK VALUE	3,015. 6,561. 1,733. 39,283. 9,752. 18,848. 8,737. 9,451. 17,760. 0.
BEGINNING BOOK VALUE	3,015. 6,561. 1,733. 39,283. 9,752. 18,848. 8,737. 9,451. 17,760.
DESCRIPTION	BP PLC SPON ADR - 1,900 SHS AT&T (BELLSOUTH) - 2,501 SHS BURLINGTON NORTHERN S.F1,040 FPL GROUP - 2,000 SHS CONOCOPHILLIPS - 2,184 SHS PEPCO HOLDINGS - 800 AT&T (SBC) - 3,526 SHS VERIZON - 1,484 SHS INTEGRYS ENERGY - 2,000 SHS FAIRPOINT COMM 27 SHS

FORM 990PF, PART II - CORPORATE BONDS

FORM SHOFF, PARI II - CORFORATE BONDS	103	ATTACHMENT	8
DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING <u>FMV</u>
BELL ATLANTIC PEN BONDS	49,067.	49,067.	44,602.
PROP. TR. 8.75%-1900 UN	30,017.	30,017.	28,987.
TR. 8.75%-1000	12,214.	12,214.	11,810.
AAG HOLDING COMPANY -2118 UNIT	35,307.	35,307.	31,318.
-100	2,521.	2,521.	2,237.
Ъ	50,000.	50,000.	49,221.
50,000 SHS AMERICAN FINANCIAL GROUP	2,934.	2,934.	2,643.
SENIOR NOTE - 115 SHS			
	22,940.	22,940.	20,685.
SENIOR NOTE - 900 SHS AMERICAN FINANCIAL GROUP	12 749	12 749	11 492
	15/12		• 7/1/17
FINANCIAL GRO	58,739.	58,739.	52,861.
ELECTRIC	40,000.	40,000.	39,815.
RICAN G	50,000.	50,000.	34,653.
ING GROUP NV	30,608.	30,608.	24,494.
TOTALS	451,204.	451,204.	402, 153.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

AMOUNT DESCRIPTION

2009 CONTRIBUTIONS NOT YET CLEARED 30,900.

> TOTAL 30,900.

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

DESCRIPTION		<u>AMOUNT</u>
2008 CONTRIBUTION CHECKES CLEARED BANK IN 2009 2008 ATTORNEY FEES CHECKS CLEARED		9,250. 56.
BANK IN 2009	TOTAL	9,306.

HORACE DAWSON FOUNDATION

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

36-6059767

ATTACHMENT 11 (CONT'D)	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER COMPENSATION BENEFIT PLANS ALLOWANCES		4,200. 0. 0.
FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR <1 hr	GRAND TOTALS
FORM 990PF, PART VIII - LIST	NAME AND ADDRESS	ELIZABETH A CHABIN TUCSON, AZ	

	AMOUNT	5,000.	5,000.	5,000.	5,000.	5,000.	1,000	2,500.	1,000	1,000.	2,400.
	PURPOSE OF GRANT OR CONTRIBUTION	THE FRANCES L DAWSON SCHOLARSHIP FUND	THE DAWSON FUND IN MEMORY OF WILLIAM AND HORACE DAWSON	EMPLOYEE EDUCATION FUND	SUPPORT PROGRAM SERVICES	RICHARD W KAHLENBERG SCHOLARSHIP	SUPPORT PROGRAM SERVICES	SUPPORT PROGRAM SERVICES	SUPPORT PROGRAM SERVICES	SUPPORT PROGRAM SERVICES	SUPPORT PROGRAM SERVICES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	FOUNDATION STATUS OF RECIPIENT	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE
	RECIPIENT NAME AND ADDRESS	SIMPSON COLLEGE INDIANOLA, IA	MARYVILLE COLLEGE MARYVILLE, TN	GENEVA FOUNDATION OF PRESBYTERIAN HOMES EVANSTON, IL	HIGH HOPES HEAD INJURY PROGRAM COSTA MESA, CA	PRESBYTERIAN ASSOCIATION OF CHAUTAUQUA CHAUTAUQUA, NY	DONALD R LEDLIE MEMORIAL FARK C/O SCOTCH RIDGE PRESBYTERIAN CHURCH CARLISLE, IA	THE CENTURY FOUNDATION NEW YORK, NY	CPHS FALCON FOUNDATION PLEASANT HILL, CA	NATURAL RESOURCES DEFENSE COUNCIL NEW YORK, NY	ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL

HORACE DAWSON FOUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MEALS ON WHEELS OF CONTRA COSTA COUNTY WALNUT CREEK, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000
THE BAY AREA CRISIS NURSEY CONCORD, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000
ST JOHN'S ON THE DESERT PRESBYTERIAN CHURCH TUCSON, AZ	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000
AMISTAD Y SALUD TUCSON, AZ	NONE	SUPPORT PROGRAM SERVICES	1,000.
HOMESTREET - BANYAN TREE, INC BEAVERTON, OR	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000.
FOOD BANK OF CONTRA COSTA & SOLANO WALNUT HILL, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	3,400.
INTERFAITH COUNCIL OF CONTRA COSTA CONTRA COSTA, CA	NONE PUBLIC CHARITY	WINTER NIGHTS SHELTER	1,000
PLANNED PARENTHOOD FEDERATION OF AMERICA NEW YORK, NY	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	500.
RECOVERY CAFE SEATTLE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000
UNIVERSITY FOOD BANK SEATTLE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000

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FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ALAN GUTTMACHER INSTITUTE NEW YORK, NY	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	500.
CHAUTAUQUA INSTITUTION CHAUTAUQUA, NY	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000
WELLESLEY CENTERS FOR WOMEN WELLESLEY, MA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	400.
KJZZ NATIONAL PUBLIC RADIO TEMPE, AZ	NONE PUBLIC CHARITY	SUFPORT PROGRAM SERVICES	200
BRENT HOUSE CHICAGO, IL	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000.
CHILDREM'S HOSPITAL AND RESEARCH CENTER OAKLAND, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	2,000
COMMUNITY FOOD BANK TUCSON, A2	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	400.
UNITED STREET MINISTRY, TEEN FEED SEATTLE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	500.
WASHINGTON AREA WOMEN'S FOUNDATION WASHINGTON, DC	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	400
CHURCH WORLD SERVICE ELKHART, IN	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	EOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HORIZON HOUSE PARTNERS IN CARING SEATTLE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000.
HUMAN RELIEF ORGANIZATION HAMPTON, VA	NONE PUBLIC CHARITY	IMANA, CDRS CHIKAR PROJECT	300.
CADE MUSEUM FOUNDATION WASHINGTON, DC	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	300.
STREET LAW, INC SILVER SPRINGS, MD	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	400.
THE WELLNESS COMMUNITY GREATER WASHINGTON DC	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	300
SPECIAL OLYMPICS, MARYLAND LINTHICUM, MD	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	200.
CFSD FOUNDATION TUCSON, AZ	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	.005
CAMP CASEY, KIWANIS MEMORIAL FUND SEATTLE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	. 000.
KUOW PUGET SOUND PUBLIC RADIO SEATILE, WA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	. 800.
FOUNDATION FOR PLEASANT HILL EDUCATION PLEASANT HILL, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000

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CONTRIBUTIONS
AND
GRANTS
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FORM

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND EQUINDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNITED MT DIABLO ATHLETIC FOUNDATION CONCORD, CA	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	400
	NONE PUBLIC CHARITY	TRINITY EDUCATION FOR EXCELLENCE PROGRAM	1,400.
	NONE PUBLIC CHARITY	SUPPORT PROGRAM SERVICES	1,000

60,300

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 12 PAGE 32

V 09-5 1

002-30125-441

SCHEDULE D' (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name	e of estate or trust				Employer identi	ficatio	n number
	ORACE DAWSON FOUNDATION				36-60597	67	
Note	: Form 5227 filers need to complete onlyPa						
Par	Short-Term Capital Gains and Lo	osses - Assets	Held One Ye	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							<u> </u>
				<u> </u>			
			,				
							
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			-			-	
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		1			1		
			I		- 		
b	Enter the short-term gain or (loss), if any, fro	m Schedule D-1	, line 1b			1b	
2	Short-term capital gain or (loss) from Forms	4684, 6252, 678	31, and 8824			2	
						·	
3	Net short-term gain or (loss) from partnershi	•		•		3_	
4	Short-term capital loss carryover Enter the	•		·		١.	,
5	Carryover Worksheet	se 1a through 4 i	n column (f) Er	ter here and on line		4	,
5	column (3) on the back	_				5	
Par		s - Assets Held I	More Than One	Year			
	art II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 or 1) (see						(f) Gain or (loss) for
_	(a) Description or property (b) Date acquired (c) Date solid (d) Sales price (see page 4)				(see page 4 of instructions)		the entire year Subtract (e) from (d)
6a							
	1 100			***************************************			
—_				·-··			
		 		·			
		1.00		***************************************			
			-	<u> </u>			
b	Enter the long-term gain or (loss), if any, from	m Schedule D-1,	, line 6b			6b	-32.
7	Long-term capital gain or (loss) from Forms	2439, 4684, 625	2, 6781, and 88	324		7	
	Not have down one of the or force and a set of						
8	Net long-term gain or (loss) from partnership	os, S corporation	s, and other es	tates or trusts		8	
9	Capital dain distributions					9	
3	Capital gain distributions					-	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter the	amount, if anv. fr	om line 14 of th	e 2008 Capital Loss			
	Carryover Worksheet	•		· ·		11_	<u>(</u>
12	Net long-term gain or (loss). Combine line	s 6a through 11	ın column (f) E	nter here and on line	14a,		
		_					
	column (3) on the back	<u></u>	<u> </u>	. <u> </u>	<u> ▶</u>	12	-32.

	fule D (Form 1041) 2009						Page 2
Par	Summary of Parts I and II Caution: Read the instructions before completing this p	oart.	1 ' '	eneficiaries' e page 5)	(2) Esta		(3) Total
13	Net short-term gain or (loss)	13					
14	Net long-term gain or (loss):	<u> </u>		_			
	Total for year	14a					-32.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b	<u> </u>				
	28% rate gain	14c	1	-			
15	Total net gain or (loss). Combine lines 13 and 14a	15	1				-32.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form	$\overline{}$	T. Part I. II	ne 4a) If lines	14a and 15,	column (2	r), are net gains, go
	ort V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV						
Par	t IV Capital Loss Limitation						
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, III	ne 4c, if a	trust), the sr	naller of		
а	The land on the 45 column (2) and b (2) 000				1	16 (32 ;
Note	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag	e 1, lir	ne 22 (or	Form 990-T, I	ne 34), is a l	oss, comp	plete the Capital Loss
	yoveWorksheeton page 7 of the instructions to figure your capital loss carryove Tax Computation Using Maximum Capital Gains Rate						
			2\		anunt in ant	orod in i	Dort Los Dort Hand
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu e is an entry on Form 1041, line 2b(2). and Form 1041, line 22, is more			uns, or an an	nount is eni	erea in i	Part I or Part II and
	tion: Skip this part and complete the worksheet on page 8 of the instruction.						
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or						
 Bot 	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar						
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and	1 comple	te the work	sheet on pa	age 8 of	the instructions if
eithe	er line 14b, col (2) or line 14c, col (2) is more than zero						
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17				
18	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19					i	
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0-			1			
22	Subtract line 21 from line 20 If zero or less, enter -0		22				
23	Subtract line 22 from line 17 If zero or less, enter -0-		23				
	-						
24	Enter the smaller of the amount on line 17 or \$2,300		24				
25	Is the amount on line 23 equal to or more than the amount on line 24?						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23						
26	Subtract line 25 from line 24		26			Ì	
27	Are the amounts on lines 22 and 26 the same?		ŀ				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	e 22	27				
			1				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
29	Subtract line 28 from line 27		29	1			
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat					1	
	(see the Schedule Ginstructions in the instructions for Form 1041) .					31	
32	Add lines 30 and 31				<u>.</u> . , .	32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rat	te Sch	nedule fo	or Estates a	nd Trusts		

Schedule D (Form 1041) 2009

33

G, line 1a (or Form 990-T, line 36)

(see the Schedule Ginstructions in the instructions for Form 1041)

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

Name of estate or trust as shown on Form 1041 Do not e	enter name and employer	ridentification number if	shown on the other side	Employer identifi					
HORACE DAWSON FOUNDATION 36-6059767 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year									
6a 50,000 CD SAFARI NB OF NEW									
Y CLD	01/19/2005	02/04/2009	50,000.	50,000.					
27 SHS FAIRPOINT	00/14/1077	04/14/2000	12	4.4	20				
COMMUNICATIONS	09/14/1977	04/14/2009	12.	44.	-32.				
									
	-				<u> </u>				
			<u> </u>						
		,							
	<u></u>								
6b Total. Combine the amounts in column	n (f) Enter here and	I on Schedule D, lin	e 6b	<u> </u>	-32				
				Schedule D	-1 (Form 1041) 2009				