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312921 10/02/2012 4:43 PM Form Denartment

Return of Organization Exempt From Income Tax

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

Yes

Form **990** (2009)

S Inte	mal Revenue Sen	The organization may have to use a copy of this return to satisfy state	e reporting require	ments.	inspection
_Ž <u>A</u>	For the 2009 ca	lendar year, or tax year beginning , and ending			
-	Check if applicable:	Please C Name of organization) Employ	er identification number
4 ,	Address change	use RS LEGACY GLOBAL FOUNDATION, INC.	_		
-	Name change	print or Doing Business As		37-1	1440662
⋛ቨ	_	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite 1	Telepho	ne number
	Initial return	See 1423 S. HIGLEY RD. #127			-505-6248
ت 🗆	Termination	Specific Instruc- Crty or town, state or country, and ZIP + 4		3 Gross receip	
4 [Amended return	tions. MESA AZ 85206	T I	<u> </u>	
- - -		F Name and address of principal officer		-l/a) le this a	group return for
∟ `ھ	Application pending	RICHARD E DURFEE JR	'	affiliates	
∞		1423 S HIGLEY RD #127	ı	H(b) Are all a	fillates
9		MESA AZ 85206		included	' — — —
က <u> </u>	Tax-exempt statu			IT NO," B	ttach a list. (see instructions)
→		s 501(c) { 3 } ◀ (insert no.) 4947(a)(1) or 527 EGACYGLOBAL . ORG	 ,	//a\	
SK	Type of organization:		Year of formation: 20	A 4	comption number
*****		X Corporation Trust Association Other ▶ L	Year or formation: 20	OI N	State of legal domicile: AZ
<u>~ £</u>	T				
	1	escribe the organization's mission or most significant activities:			
8		MISSION OF LEGACY GLOBAL FOUNDATION, INC. IS TO BL		OTTE MOE	KTD
nari	BX D	ELIVERING THE PROMISE THAT INSPIRES CHARITABLE GIV	ING.		
II IN ⊕ Ø 701€. Activities & Governance					
ွှင့်	2 Check th	is box ▶ if the organization discontinued its operations or disposed of more via 12	Sycolity net asse	ts.	•
_∞	3 Number	of voting members of the governing body (Part VI, line 1a)	EIVED	3	3
(1865)	4 Number	of independent voting members of the governing body (Part VI, line 1b)	. 2 . 2 . 2		2
⊕ ₹	5 Total nur	nber of employees (Part V, line 2a)	~ <u>~</u> <u>~</u> <u>~</u> <u>~</u> <u>~</u> <u>~</u> <u>~</u> .	5	3
€.5	6 Total nur	nber of volunteers (estimate if necessary)		6	6
3	-		BDEN	7a	
= _	b Net unrel	ated business taxable income from Form 990-T, line 34 Q.C.		7b	0
(Prior Year	4.4.	Current Year
ولي	8 Contribut	ions and grants (Part VIII, line 1h)	3,064	,465	1,042,782
و کے ا	9 Program	ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g) int income (Part VIII, column (A), lines 3, 4, and 7d) (Part VIII, column (A), lines 5, 6d, 8e, 2g, 10e, 2011(a)			
₹	10 investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)	100	,561	-259,502
(Revenue	11 Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
(1)	12 Total reve	enue – add lines 8 through 11 (must equal Part VIII- column (A), line 12)	3,165	,026	783,280
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)	1,719	,676	1,579,530
	14 Benefits	paid to or for members (Part IX, column (A), line 4)			
\$	15 Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	266	,123	111,267
	46a Drofonsia	nal fundraising fees (Part IX, column (A), line 11e)			
	b Total fund	draising expenses (Part IX, column (D), line 25) ▶ 68,704	1. 1. 2. 2. 3. 5.	11.11 1	
OB	17 Other ext	penses (Part IX, column (A), lines 11a-11d, 11f-24f)	161	,466	213,460
1	18 Total exp	enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,147		1,904,257
Ñ		less expenses. Subtract line 18 from line 12	1,017		-1,120,977
8			Beginning of Curre		End of Year
Assets or Balances	20 Total ass	ets (Part X, line 16)	9,116		11,549,390
A Second	21 Total liab	ilities (Part X, line 26)	2,458		4,987,961
25	4	ts or fund balances. Subtract line 21 from line 20	6,658		6,561,429
P		gnature Block	= , , , , , , ,	,	0,001,723
بكبب		fer penalties of perjury, I deplare that I have examined this return, including accompanying schedules	and statements on	t to the best	of my knowledge
	and	belief, it is true correct and complete Declaration of preparer (other than officer) is based on all infi	ormation of which pre	parer has a	ny knowledge.
Sig	1.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			C9.2014
He		South of the			<u> </u>
ne		Signature of officer, chard E. Durfee Ju., President		Date	
		Type or print name and title	_		
- ,	rd Pre	parer's Date	Check if		Preparer's Identifying number (see instructions)
	- I sign	lature & Amm. Well su CPA 18/3	1/2 setf- employed	ı►	P01304892
	parer's	ROEDIGER HOFF PLC	, <u></u>	EIN >	27-3630023
US		n's name (or yours 3060 N SWAN RD		Phone	
		ress, and ZIP + 4 TUCSON, AZ 85712-1225		i .	520-323-3060

May the IRS discuss this return with the preparer shown above? (see instructions)

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	39.51		Yes	No
. 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		165	"
	complete Schedule A	1	х	}
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or Indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	1	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	733		·::
	Schedule D, Part VI.	12/9		* ::
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		100	` • *
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		196	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			: y'-
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		``:	
(Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	```		3
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	` .		; i
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	,		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		₹.	}.,C*\
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No		(:	, ,
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.		(::	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		1	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III X 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? if "Yes," complete Schedule J X 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 X Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I X 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee. substantial contributor, or a grant selection committee member, or to a person related to such an individual? if "Yes," complete Schedule L, Part III X 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes." complete X 28b An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 III, IV, and V, line 1 X 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 X 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? if "Yes," complete Schedule R, Part V, line 2 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O.

	Statements Regarding Other IRS Fillings and Tax Compliance				г	1
4-	C.A. W		•	chu!	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	.	14	(4.3		
	U.S. Information Returns. Enter -0- if not applicable	1a	0	(7)	W .	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b		(14	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	portabl	l e		7.	1
_	gaming (gambling) winnings to prize winners?	ı 1		. 1c	X	
2a			2	- [?.		Š
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	3		÷.	1 0.5
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	100
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			``.		
٥	instructions)	ما است				1737
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	а бу		20	.3.73	x
L	this return? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	• • • • •		3a		-
4			4	. 30	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a over, a financial account in a foreign country (such as a bank account, securities account, or other fin		•	İ		
	account)?	anGai		4a		x
h	If "Yes," enter the name of the foreign country:	•• •••				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	 Rank	• • • • • • • • • • • • • • • • • • • •	127		1.77
	and Financial Accounts	Dank		. ``\$, ;	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<u> </u>	x
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	tion?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega			35	-	
•	Dushibited Tay Challes Transaction?	3.48		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	 A		. 30		
•	organization solicit any contributions that were not tax deductible?			6a		x
ь	If "Yes," did the organization include with every solicitation an express statement that such contribution			·	ļ	
-	gifts were not tax deductible?			6ь		
	Organizations that may receive deductible contributions under section 170(c).			. <u> </u>		`
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for or	noods			1.7	' 、
	and services provided to the payor?	,		7a		х
b	if "Yes," did the organization notify the donor of the value of the goods or services provided?		*****	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	_		, ,,,	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona				3
	benefit contract?			78		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		71		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7 g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				
	required?			. 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting					1/
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			13.33		% .
	organization, have excess business holdings at any time during the year?			. 8		X
9	Sponsoring organizations maintaining donor advised funds.			1283	113.4	
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter:			11.11	200	1 ×
a	Initiation fees and capital contributions Included on Part VIII, line 12	10a				
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			<i>i</i> ;	
11	Section 501(c)(12) organizations. Enter:	, .	•	1 1/2	(, , ,	4)
a	Gross income from members or shareholders	11a		- Vine	` '	100
b	Gross income from other sources (Do not net amounts due or paid to other sources against				•	ľ.
	amounts due or received from them.)	115				1
1-4	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?)	12a	<u> </u>	ļ
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			<u> </u>	1877

Form 990 (2009) LEGACY GLOBAL FOUNDATION, INC. 37-1440662

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

ction A. Governing Body and Management

1.5 Enter the number of voting members to the governing body b Enter the number of voting members that are independent b Enter the number of voting members that are independent control of the voting members to the are independent control of the voting members that are independent control of the organization delegate control over management duties outstandly performed by or under the direct supervisor of those, directors or numbers, or they employees to a management company or other person? Did the organization become aware during the year of a material devisor of the organization's assets? Enter of the governing body? To best the organization have members or alcoholders? To be set the organization have members and control of a material devision of the organization's assets? To be set the organization have members and control of a material devision of the organization's assets? To be set the governing body? To be an organization ortermporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? The body or the following: The governing body? The body or the following: The governing body? The body or the following: The governing body or the following and provide the following body or following the following and the organization have before any organization than a following the		tion A. Governing Body and Management					
b Enter the number of voting members that are independent! 2 Did any officing clinichort, trustee, or key employee allow a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Did the organization makes any slightfeart changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization have members or stockholders? 5 Did the organization have members or stockholders? 6 Dose the organization have members, stockholders? 7 Dose the organization have members, stockholders? 8 Did the organization have members, stockholders? 8 Did the organization have members, stockholders? 8 Did the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 The governing body? 10 Each committee with authority to act on behalf of the governing body? 11 Each committee with authority to act on behalf of the governing body? 12 Each committee with authority to act on behalf of the governing body? 13 Leave the organization have long dames at If Yes, Provide the names and addresses in Schedule O. 14 Section B. Policiae (This Section B requests information about policies not required by the Internal Provide the propagation of the propagation provided a copy of this Form 990 to all members of its governing be activities of such chapters. 15 Ly Xes the organization have long the provide the manes and addresses in Schedule O. 16 Describe in Schedule O the process, if any, used by the organization to review this Form 990. 17 Ly Section B. Policiae (This Section B requests information about policies not required by the Internal Provided B requests and the propagation for governing b	_			_		Yes	No
2 Did any officer, director, fusities, or key employee have a family relationship or a business relationship with 2	1a	Enter the number of voting members of the governing body	1a		_		
any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees by a management company or other person? 4 Life the organization make say significant changes to its organizations decourants since the prior Form 990 was filled? 5 Did the organization have members or stockholders, or other persons who may elect one or more members of the organization have members or stockholders, or other persons who may elect one or more members of the governing body? 7 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 8 Does the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 9 The five year by the following: 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 11 Each committee with authority to act on behalf of the governing body? 12 Each committee with authority to act on behalf of the governing body? 13 Each committee with authority to act on behalf of the governing body? 14 Each committee with authority to act on behalf of the governing the activities of such chapters, affiliates, and behalf and the organization? 15 Each committee with authority to act on behalf of the governing the activities of such chapters, and the progranization have written policies	b	Enter the number of voting members that are independent	1b	2	_ 17.5	,	1
3 bil the organization delegate control over management duties customarily performed by or under the direct supervision of officens, directors or trustees, or key amployees to a management company or other personn? 4 bil the organization make any significant changes to its organizational documents since the prior Form 990 was filled? 5 bos the enganization have membars or stockholders? 7 bose the organization have membars or stockholders? 8 bos the organization have membars or stockholders, or other persons who may elect one or more members of the governing body? 9 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7 b X 8 b Did the organization changes by subject to approval by members, stockholders, or other persons? 7 b X 8 b Did the organization contemporaceusly document the meetings held or written actions undertaken during the year by the following: 8 b Each committee with authority to act on behalf of the governing body? 8 a X 8 b Each committee with authority to act on behalf of the governing body? 8 a Ex bereamy officer, director, trustee, or key employee listed in Part VII, Sociion A, who cannot be reached at the organization and subject to the organization provider. 8 cection B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 9 b Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 cost the organization have before provided a copy of this Form 990 to all members of its governing be activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 cost the organization regularly and consistently monitor and enforce compliance with the policy? If Yes, a bost the organization regularly and consistently monitor and enforce compliance with the policy? If Yes, a bost the organization regularly and consistently monitor and enforce compliance with the	2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			100	' '	.
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b Other officars or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the	_	The count of the OFO Free the Distance of the OFI					٠.
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Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b if "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the	ט			• • • •	150	77.	
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the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the	D				1,17		
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Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the	0	• • • • • • • • • • • • • • • • • • • •	oniy)				
Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the							
policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the							
State the name, physical address, and telephone number of the person who possesses the books and records of the			rest				
	:0			7 107			

MESA

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- . List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order, individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per			chec		that a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
RICHARD E. DURFEL PRESIDENT	JR. 40.00	x		x				35,900	0	4,65
PAUL PETERSON RECTOR	4.00	x						900	0	
THOMAS BROWN DIRECTOR	1.00	х						900	0	
BRENDA PROSSER TREASURER	4.00			x				1,200	0	
JANEL DURFEE VICE-PRES	2.00			x				0	0	
							-			
										* 17.11
										. "

'Form 990 (2009) LEGACY GLOBAL FOUNDATION, INC. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (A) (C) (D) (E) (F) Position (check all that apply) Name and Title Average Reportable Reportable Estimated hours per compensation compensation amount of Former Institutional trustee Key employee week from from related other dividual trustee ghest compensated holoyee the organizations compensation (W-2/1099-MISC) organization from the (W-2/1099-MISC) organization and related organizations 38,900 4,654 1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 0 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated 3 employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from 1 the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such X individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address (B) Description of services (C) Compensation Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization DAA Form 990 (2009)

A	All other contributions, gifts, grants, and similar amounts not included above 1f 1,042,782				
	Noncash contributions included in lines 1a-1f \$ 610,932				
1	Total. Add lines 1a–1f	1,042,782			
	All other program service revenue	The board of the contract of t			
	Total, Add lines 2a–2f			" sa sailer, " " He !	
o	investment income (including dividends, interest, and other similar amounts) ncome from investment of tax-exempt bond proceeds	209,013			209,013
	Royalties				
<u>و</u>	(i) Real (ii) Personal Gross Rents ess. rental exps. Rental inc or (loss)				
Ĭ	Net rental income or (loss)			ĺ	
sa ot La ba	(i) Securities (ii) Other				
	Net gain or (loss)	-468,515			-468,515
(r of S L	Gross income from fundraising events not including \$ if contributions reported on line 1c) See Part IV, line 18 Less: direct expenses Net income or (loss) from fundraising events				
G S L	Gross income from gaming activities. Gree Part IV, line 19 a ess: direct expenses b				
	let income or (loss) from gaming activities				
re L	eross sales of inventory, less eturns and allowances a ess cost of goods sold b let income or (loss) from sales of inventory				
	Miscellaneous Revenue Busn. Code	<i>#</i>		1/2/4/5 ×	108/1000
	All other revenue				· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·				SC 17500
ľ	otal Revenue. See instructions.	783,280	0	0	-259,502
T	otal Revenue. See instructions.	783,280	0		Ö

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Consta and other excistance to accomments and		expenses	Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and				Sec. 27. 1. 182.26
organizations in the U.S. See Part IV, line 21	1,535,573	1,535,573	and Committee	Pro Aller
Grants and other assistance to individuals in				
the U.S. See Part IV, line 22	7,402	7,402	11119	
_			* * * * * * * * * * * * * * * * * * * *	
	26 555	06 555		
	36,555	36,555		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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- · · · · · · · · · · · · · · · · · · ·	42 554	10 000	44 404	04 050
	43,334	10,900	11,401	21,253
	56 000	41 674	14 226	
- 111111 111111 F	30,000	41,0/4	14,326	
	A 372	1 272		
Dayroll taxes			1 070	
Food for continue (non-amplement)	1,341	3,463	1,8/8	
10				
Legal	450		4EO	
	1,592		1,592	
		, , , ,		
	40 711	20 700	7 001	
		32,190	1,921	40 500
Advertising and assessment			040	40,500
		A E 70		
	14,29/	4,572	1,844	1,881
	10 750	7 (0 (0 604	
				2,509
	3,057	1,755	724	578
,				
	740		940	
	/40			
	47		47	
	C 100			
, <u>F</u>	12 200		6,198	
Insurance	15,320	",, ", ", ",	13,320	
Other surrous Heaville series				三字第二章经验
·				经营业 经管理
			このと、縁刻	Same of the second
- 1				
	7		<u>, 13 </u>	
		70,000		
				117
CONTINUING EDUCATION	325		325	
All other expenses				
	1,904,257	1,758,682	76,871	68,704
from a combined educational campaign and				
fundraising solicitation	I			
	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) SERVICES — ART NEWSLETTER BANK CHARGES CONTINUING EDUCATION All other expenses Total functional expenses. Add lines 1 through 24f	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 36 , 555 36 , 555 36 , 555 See Part IV, lines 16 series paid to or for members Compensation of current officers, directors, trustees, and key employees 43 , 554 10 , 900 Compensation for included above, to disqualified persons (as defined under section 4958(c)(3)(8) Cither salaries and wages Pension plan contributions (include section 401(k) and section 403(k)) employer contributions) Cither employee benefits 4 , 372 4 , 372 Payroll taxes 7 , 341 5 , 463 Fees for services (non-employees): Management Legal 450 Accounting 7 , 592 Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees 40 , 711 32 , 790 Cither expenses information technology Royalties Corcupancy 12 , 756 7 , 626 Travel 7 repetition of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest 47 Payments to affiliates Depreciation, depletion, and amortization Insurance 13 , 320 Conferences, conventions, and meetings Interest 47 Payments to affiliates Depreciation, depletion, and amortization Insurance 13 , 320 To , 000 To , 000 To , 000 To , 000 See To Not Revision See To Conferences and Legenses grouped together and labeled miscellaneous may not exceed 5% of total expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) SERVICES - ART NEWSLETTER 70 , 000 To , 000 To , 000 To , 000 See To total functional expenses. Add lines 1 through 24f 1, 904 , 257 1, 758 , 682 Joint Costs. Check here	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of section 4958(c)(3)(3) Cother salaries and vages 56,000 41,674 14,326 Pension plan contributions (include section 4958(c)(3)(3) Cother analysis and vages 56,000 41,674 14,372 4,372 4,372 7,341 5,463 1,878 Fees for services (non-employees): Management Legal 450 450 450 450 450 450 450 45

	X Balance Sheet	725	
		(A) Beginning of year	(B) End of year
1	Cash—non-interest bearing	42	1 25,380
2	Savings and temporary cash investments	420,197	2 218,909
3	Pledges and grants receivable, net		3
4	Accounts receivable, net		4
5	Receivables from current and former officers, directors, trustees, key	7 - 7 - 7 - 7 - 7 - 1 - 1 - 1 - 1 - 1 -	877 M.
	employees, and highest compensated employees. Complete Part II of		5
6		may stake it	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
"	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		
	D. All Control of		4
7			7
8			8
9	Prepaid expenses and deferred charges		9
1 -	Land, buildings, and equipment: cost or		29 (9) (8) (A) (8) (B) (A)
100	· I I +	,712	
_		343,713	/ // A
1	· · · · · · · · · · · · · · · · · · ·		
111	Investments—publicly traded securities	105 004	
12	Investments—other securities. See Part IV, line 11		
13	Investments—program-related. See Part IV, line 11		13
14	Intangible assets		14
15	Other assets See Part IV, line 11	3,320,422	15 6,323,791
16	Total assets. Add lines 1 through 15 (must equal line 34)	9,116,555	16 11,549,390
17	Accounts payable and accrued expenses		17
18	Grants payable		18
19	Deferred revenue		19
20	Tax-exempt bond liabilities		20
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
22	Payables to current and former officers, directors, trustees, key		
	employees, highest compensated employees, and disqualified		(注) 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
1	persons Complete Part II of Schedule L		22
23	, , , , , , , , , , , , , , , , , , , ,		23
24	Unsecured notes and loans payable to unrelated third parties		24
25	Other liabilities. Complete Part X of Schedule D	2,458,124	
26	Total liabilities. Add lines 17 through 25	2,458,124	26 4,987,961
	Organizations that follow SFAS 117, check here ▶ 🔀 and		
}	complete lines 27 through 29, and ilnes 33 and 34.		
27	Unrestricted net assets	6,658,431	27 6,561,429
28	Temporarily restricted net assets		28
29	Permanently restricted net assets		29
1	Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐	Section Section Sections	William Commence
1			
	and complete lines 30 through 34.	25 1	14.44 (1)
30	and complete lines 30 through 34. Capital stock or trust principal, or current funds	T T	30
30	Capital stock or trust principal, or current funds		30
30 31 32	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		31
1	Capital stock or trust principal, or current funds		31 32

om	n 990 (2009) LEGACY GLOBAL FOUNDATION, INC. 37-1440662		Pa	ge 12
βą	まれ Xi Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	45		1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1. 5.	ļ.,	
	Schedule O.		1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	,	X
þ	Were the organization's financial statements audited by an independent accountant?	2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	13.8	33.5	
	Schedule O.	33.8		;;
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			100
	issued on a consolidated basis, separate basis, or both:			1 1
	Separate basis Consolidated basis Both consolidated and separate basis	100	1. 3	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			· ·
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3ь		

Form **990** (2009)

SCHEDULE A. (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047
2009
Open to Public

Inspirction

nal Revenue Service
Name of the organization

partment of the Treasury

LEGACY GLOBAL FOUNDATION, INC

Employer Identification number 37-1440662

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	ert i			ublic Charity								part.)	See II	nstruc	tions.			
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1	Н			f churches, or ass					in section	170(b)(1)(A)(I).							
2	Ц			ection 170(b)(1)(•										
3	Ы			tive hospital servi														
4		A medical re	search org	anization operate	d in co	njunction	with a h	ospital	described	ın sectio	on 170(b)(1)(A)(i	iii). Ente	er the ho	ospital's n	ıame	·,	
		city, and sta																
5		An organizat	ion operate	ed for the benefit	of a col	lege or u	niversity	owned	or operat	ed by a g	ovemme	ental un	it descr	ibed in				
		section 170	b)(1)(A)(lv)). (Complete Part	: II.)													
6		A federal, st	ate, or loca	l government or g	governm	nental un	ıt descrit	oed in s	ection 17	'0(b)(1)(<i>A</i>	\)(v).							
7	X			rmally receives a								from the	gener	al public	:			
	_			'0(b)(1)(A)(vi). (C									3	p				
8	\Box			nbed in section	•	,		ate Pari	HEY									
9	H			rmally receives: (-	contribu	tions me	mhersh	un fees	and on	nee			
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				stment income a							-							
				ation after June 3								V) 11 OI 11	Jusines	303				
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f		_		ved a written dete	erminati	ion from t	ine IRS I	that it is	s a Type I,	Type II,	or Type	III supp	orting					r
		organization,											• -					
9		Since Augus	t 17, 2006,	has the organiza	ation ac	cepted ar	ny gift or	contrib	oution from	any of t	he							
		following pe	sons?															
		(I) A perso	n who direc	ally or indirectly c	ontrols,	either ald	one or to	gether	with perso	ons desc	nbed in ((ii)			_		Yes	No
		and (iii)	below, the	governing body o	of the su	ipported i	organıza	ition?					. 		1	1g(I)		
		(ii) A family	member of	f a person descn	bed in (i) above?	·								1	1g(ii)		
		(III) A 35% d	ontrolled e	ntity of a person	descnb	ed in (i) c	or (ii) abo	ve?								1g(lii)		
h		Provide the	following in	formation about	the sup	ported or	ganizatio	on(s).				,.	•••					
(i) i	dame	of supported		(ii) EIN	(i	ii) Type of	organizat	tion	(Iv) is the	organization	(v) Did	ou notify	(vi)	is the	(vii) Amı	ount of	
	org	anization			•	described			in col. (i) ii	sted in your		ntzation in	organiza	tion in col	,	supp		
						above or l	RC sectio ructions)		governing	document?		of your port?		ized in the .S.?				
						(300 11180	, uctions,	"	Yes	No	Yes	No	Yes	No				
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more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

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Schedule A (Form, 990 or 990-EZ) 2009 LEGACY GLOBAL FOUNDATION, INC. Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
`a	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	· · · · · · · · · · · · · · · · · · ·					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that		Į.			l [
	exceed the greater of \$5,000 or 1% of the					1	
	amount on line 13 for the year						
C	Add lines 7a and 7b			, , , , , , , , , , , , , , , , , , , ,			
8	Public support (Subtract line 7c from line 6)				```		
_	tion B. Total Support		1	,		 -	
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6			 			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	_	st, second, third, fo	•		,	Þ 🗍
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2009 (line 8,	, column (f) divide	ed by line 13, colun	nn (f))		15	%
16	Public support percentage from 2008 Sche	edule A, Part III, I	line 15				%
<u>Sec</u>	tion D. Computation of Investme						
17	Investment income percentage for 2009 (li	ne 10c, column (f) divided by line 13	3, column (f))		17	%_
18	Investment income percentage from 2008	Schedule A, Parl	t III, line 17	····		18	%
	33 1/3 % support tests—2009. If the orga	nization did not c	heck the box on lin	e 14, and line 15 is	s more than 33 1/3	%, and line	
	17 is not more than 33 1/3 %, check this b						▶ 🗆
b	33 1/3 % support tests—2008. If the orga						
	line 18 is not more than 33 1/3 %, check the						▶ 🔲
20	Private foundation. If the organization did	not check a box	on line 14, 19a, or	19b, check this bo	x and see instructi	ons	▶│

Schedule A (F	om 990 or 990-EZ	2009 LEGAC	Y GLOBAL	FOUNDATI	ON, INC		37-1440662	F	Page 4
Part IV							iired by Part II, li ation. See instru	ne 10;	
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SCHEDULE D. (Form 990)

Department of the Treasury ernal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990. Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

he of the organization Employer identification number 37-1440662 LEGACY GLOBAL FOUNDATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 53 Total number at end of year 552,355 490,427 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 1,518,073 61,457 3 Aggregate value at end of year 4,331,566 448.807 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements b Total acreage restricted by conservation easements 2h Number of conservation easements on a certifled historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ __ _ _ _ Number of states where property subject to conservation easement is located ▶ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (I) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	edule D (Form 990) 2009 LEGACY GLC						<u> 37-14</u>		Page 2
P,	ast 胜。 Organizations Maintaining(Collect	ions of Art,	Historic	al Trea	asures,	or Other	Similar As	sets (continued)
3	Using the organization's acquisition, accession collection items (check all that apply):	n, and oth	er records, che	ck any of	he follow	ving that a	re a signific	ant use of its	
1	Public exhibition		d Loan	or exchang	e progra	ams			
b	-		e Other	-	, - pg				
c			, ["] oo.					. – – –	-
4	Provide a description of the organization's colle	ections ar	nd explain how	they furthe	or the org	janization'	's exempt pu	ırpose in	
5		receive do	onations of art,	historical t	reasures	s, or other	similar		П и П и
D.	art W Escrow and Custodial Arrar							"Voc" to E	Yes No
F	IV, line 9, or reported an amo	_	•		_		ii i swei eu	TES IO FI	Jilli 990, Fait
4 -							A		
٦а	Is the organization an agent, trustee, custodian								П., П.,
_	included on Form 990, Part X?		• • • • • • • • • • • • • • • • • • • •						Yes No
b	If "Yes," explain the arrangement in Part XIV ar	nd compl	ete the followin	g table:					
									Amount
C								1c	
d	Additions during the year							1d	·
θ	Distributions during the year							10	
f	Ending balance						• • • • • • • • • • •	. 1f	
2a	Did the organization include an amount on For	m 990, P	art X, line 21?			• • • • •			Yes No
b	If "Yes," explain the arrangement in Part XIV.								
Pa	ert V Endowment Funds. Comple	ete if or	ganization a	nswered	d "Yes"	to Forn	n 990, Pa	rt IV, line 1	0.
		(a) C	urrent year	(b) Pn	or year	(c) Two	years back	(d) Three year	s back (e) Four years back
1a	Beginning of year balance			-		12. 5	11.54	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,
b	Contributions					7 .	12.	1.77	
-	Net investment earnings, gains,					1 1 1	. 47.7.7.4	:::. > "	
·	and losses		i					```	` `
	Grants or scholarships					 	***************************************	### (## (## (## (## C*C)	1
	Other expenditures for facilities					1737	·····		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
			i						
_	and programs	 ·				- [1 14:	***************************************	
	Administrative expenses						1/1 1		
9						19 2 5		<u> </u>	<u> </u>
2	Provide the estimated percentage of the year e								
а			_%						
	Permanent endowment ▶ %								
_	Term endowment ► %								
3а	Are there endowment funds not in the possess	ion of the	organization t	nat are hel	d and ad	ministere	d for the		· · · · · · · · · · · · · · · · · · ·
	organization by:								Yes No
	(i) unrelated organizations					. ,			3a(i)
	(II) related organizations					,			3a(ii)
b	If "Yes" to 3a(ii), are the related organizations if	isted as r	equired on Sch	edule R?					3b
4	Describe in Part XIV the intended uses of the o	organizati	on's endowme	nt funds,					
Pe	art VI investments—Land, Buildin	ngs, an	d Equipmer	it. See F	orm 9	90, Parl	X, line 10	D.	
	Description of investment	(a) Co	st or other basis	(b) Cost or a	other	(c) Acc	umulated	(d) Book value
		(1	nvestment)		basis (oth	er)	depr	eciation	
1a	Land		325,00	0			3. 3.	::	325,000
h	Buildings			-					1 225,000
	Leasehold improvements						 	·	
				+	3.	1,712		19,197	12,515
	Equipment	<u> </u>		 		-, , 12		19,191	14,515
	Other I. Add lines 1a through 1e. (Column (d) must equ	ual Es-	000 8-47	luma (P)	ino 401		l		227 545
ota	ii. Ado iines Ta tirrough Te. (Column (d) must eqt	uai Form	SSU, Part X, CC	iumn (B),	ine 10(C	<u>!:}</u>		<u> </u>	337,515

(e) Description of security or category (h) Book value (c) Method of valuation: Cost or end-of-year market value Incial derivatives Closely-held equity interests Cther Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VII Investments—Program Related. See Form 990, Part X, line 13. (a) Description of investment type (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-year market value 1. (Column (b) must equal Form 990, Part X, col. (B) line 13.) 1. (Column (b) must equal Form 990, Part X, col. (B) line 13.) 2. (a) Other Assets. See Form 990, Part X, line 15. (b) Book value (c) Book value (d) Book value (e) Method of valuation: Cost or end-of-year market value (e) Method of valuation: Cost or end-of-year market value (f) Book value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Method of valuation: Cost or end-of-year market value (g) Book value (g) B	Schedule D (Form-990) 2009 LEGACY GLOBAL FOUN		37-1440662	Page 3
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Cost or end-of-year market value			(c) Method of	reducation:
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Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 4,987,961				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ 4,987,961				` ` ` ` ; ;
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total. (Column (b) must equal Form 990, Part X, col. (b) line 25.)		1 007 00		
2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the				

organization's liability for uncertain tax positions under FIN 48.

	dule D (Form-990) 2009 LEGACY GLOBAL FOUNDATION, INC. 37-14406		Page 4
	Reconciliation of Change in Net Assets from Form 990 to Audited Financial State		· · · · · · · · · · · · · · · · · · ·
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
7	Total expenses (Form 990, Part IX, column (A), line 25)	2	
	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments		
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
	Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	·····
1	Total revenue, gains, and other support per audited financial statements	11	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1555	
- а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b	1:33	
	Recoveries of prior year grants 2c	Ⅎ ℷℨℷ	
C		- 1/(≦)	
ď	The state of the s	+ 1	
e	Add lines 2a through 2d	29	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	- [,≾]	
þ	Other (Describe in Part XIV.)	-∤′	
_C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u> 5 </u>	
	Reconciliation of Expenses per Audited Financial Statements With Expenses per		
1	Total expenses and losses per audited financial statements	1 27 27	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
4	Donated services and use of facilities 2a	- 743月	
þ	Prior year adjustments 2b	4 / / / / / / / / / / / / / / / / / / /	
C	Other losses 2c		
ď	Other (Describe in Part XIV.)	- ∤⊖4	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
and 2	b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete		
	art to provide any additional information.		
			
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Sche	edul	le D	Fo	om (990)	200	9	L	EG/	AC:	Y i	GL(OBA	AL.	F	שכ	ND.	ΑT	IO	N,	I	NC				3	<u>7-:</u>	44	06	62					ı	Page 5
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Schedule F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

name of the organization

partment of the Treasury mail Revenue Service

Employer identification number

LEGACY GLOBAL FOUNDATION, INC. 37-1440662 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States. 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.) (c) Number of (e) If activity listed in (d) is (a) Region (b) Number of (d) Activities conducted in (f) Total offices in the employees or region (by type) (i e., a program service, expenditures for region agents in fundraising, program services, describe specific type of region region grants to recipients located in service(s) in region the region) SUB-SAHARAN AFRICA PROGRAM SERVICES MISSIONARY SERVICE 14,300 RUSSIA PROGRAM SERVICES ORPHAN EDUCATION 15,755 EAST ASIA AND THE PACIFIC PROGRAM SERVICES TEACH ENGLISH 6,500 Same Sign

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Page 2 appraisal, other) (i) Method of (book, FMV, vafuation Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, (h) Description of non-cash assistance Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (g) Amount of non-cash assistance (f) Manner of cash disbursement 37-1440662 (e) Amount of cash grant (d) Purpose of grant INC. Use Schedule F-1 (Form 990) if additional space is needed. LEGACY GLOBAL FOUNDATION, (c) Region (b) (RS code section and EIN (if applicable) % >4. Schedule F (Form 990) 2009 (a) Name of organization ;

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Schedule F (Form 990) 2009

Page 3

Schedule F (Form 990) 2009 LEGACY GLOBAL FOUNDATION, INC. 37-1440662

Fart III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

(h) Method of valuation (book, FMV,	appraisal, other)						***************************************						
(g) Description of non-cash assistance													
(f) Amount of non-cash assistance													
(b) Manner of cash disbursement		CHECK	AVARO	CHECK	CHECK								
(d) Amount of cash grant		14,300	7 7 7	FIG. 100	6,500								
(c) Number of recipients	N AFRICA	2	y	AND THE PACT	1								
(b) Region	SUBSAHARAN AFRICA		RUSSIA	EAST ASIA									
(a) Type of grant or assistance (b) Region (c) Number of (c)		GRANT - LIVING EXPENSES	NOTHER GOOD AND THE MENT - TIME AS		GRANT - TRANSPORTATION								

Schedule F (Form 990) 2009

Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other additional information.
PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS
FOREIGN GRANTS ISSUED BY LEGACY ARE MONITORED BY WRITTEN AGREEMENT WITH THE
RECIPIENT (PRIOR TO ANY DISTRIBUTIONS BEING MADE). WRITTEN REPORTS
REGARDING THE EXPENDITURE OF GRANT FUNDS ARE PROVIDED BY THE RECIPIENT AND
EXAMINED BY LEGACY ON AN ANNUAL BASIS. THESE REPORTS MAY BE PROVIDED MORE
FREQUENTLY BASED ON THE INITIAL WRITTEN AGREEMENT. SUBSEQUENT GRANT FUNDS
ARE WITHHELD FROM THE INTENDED RECIPIENT UNTIL APPROPRIATE EXPENDUTURE
DOCUMENTATION IS RECEIVED BY LEGACY. RECEIPTS AND THIRD-PARTY STATEMENTS
ARE CONSIDERED TO BE PART OF THE WRITTEN EXPENDITURE REPORTS. RECIPIENT
ORGANIZATIONS OUTSIDE OF THE US MUST BE REGISTERED WITHIN THEIR OWN COUNTRY
AND IN GOOD STANDING TO QUALIFY TO RECEIVE FUNDS.
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SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

UMB No 1545-0047

Open to Public

ž COMMUNITY DEVELOPMNT COMMUNITY DEVELOPMNT COMMUNITY DEVELOPMENT COMMUNITY DEVELOPMNT HUMANITARIAN RELIEF inspection GENEALOGY RESEARCH Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed MEDICAL RESEARCH GENERAL PURPOSES (h) Purpose of grant YOUTH PROGRAMS or assistance Yes Grants and Other Assistance to Governments and Organizations In the United States. Complete if the organization answered "Yes" to X Employer identification number non-cash assistance (g) Description of 37-1440662 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 980, Part IV, lines 21 or 22. Governments, and Individuals in the United States (d) Amount of cash grant (e) Amount of non-cash assistance ■ Attach to Form 990. 50,000 33,590 12,000 11,000 200,000 16,000 19,500 315,500 228,000 the selection criteria used to award the grants of assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (c) IRC section if applicable $\widehat{\mathbb{C}}$ 3 (3) 3 $\widehat{\mathbb{C}}$ (3) (3) (3) 3 INC 20-8418629 20-8649499 43-6061673 44-0577787 04-2203836 86-1001113 55-0644643 86-0531132 86-0139651 General Information on Grants and Assistance (b) EIN LEGACY GLOBAL FOUNDATION, the selection criteria used to award the grants or assistance? NORTH MOUNTAIN CHRISTIAN ASSEMBLY 02215 AZ 85296 DC 20036 MO 65483 AZ 85020 25045 C/O MARK, DISKIN, COPILE, ET AL AZ 85022 AZ 85007 85373 (a) Name and address of organization DREAM CENTER/CITY HELP INC : \$ AZ DAVID GOURLEY MINISTRIES or government 1601 GRAND AVENUE INTL MISSIONS OUTREACH PHOENIX WORLD OUTREACH PHOENIX FIRST ASSEMBLY JOSLIN DIABETES CENTER 13613 N CAVE CREEK RD 13613 N CAVE CREEK RD 341 E MOUNTAIN VIEW 714 E MESQUITE AVE ARIVACA BOYS RANCH GENESYS FOUNDATION P.O. BOX 1145 1 JOSILIN PLACE Department of the Treasury Internal Revenue Service Name of the organization P.O. BOX 380 WASHINGTON CLENDENIN GILBERT HOUSTON PHOENIX PHOENIX PHOENIX PHOENIX Part II BOSTON Part

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2009

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² Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

Page 2 37-1440662

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) THE MAJORITY OF GRANTS ISSUED BY LEGACY GLOBAL FOUNDATION, INC. ARE FOR GENERAL OPERATIONS FOR THE PERIOD OF ONE YEAR WHEN THE FOUNDATION ISSUES A FUNDING FROM LEGACY GLOBAL ARE, IN MOST CASES, REQUIRED TO SUBMIT A FINAL MULTI-YEAR GRANT FOR A SPECIFIED PURPOSE. ORGANIZATIONS RECEIVING GRANT REPORT DESCRIBING THE RESULTS OF THEIR FUNDED PROGRAM OR UPDATE LEGACY - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS non-cash assistance (d) Amount of Use Part IV and Schedule I-1 (Form 990) if additional space is needed 3,902 1,500 2,000 (c) Amount of cash grant (Form 990) 2009 LEGACY GLOBAL FOUNDATION, (b) Number of recipients ന SCHOLARSHIPS (a) Type of grant or assistance EXPENSE PART I, LINE 2 EDUCATIONAL MEDICAL TUITION Part IV

LEGACY GLOBAL AND THE GRANTEE DETAILING DOCUMENTED BENCHMARKS THAT MUST BE

GLOBAL ON THEIR PROGRESS TO DATE. GRANT AGREEMENTS ARE PREPARED BETWEEN

THESE REPORTS OUTLINE THE RETURN ON INVESTMENT FOR THE GRANTEE, THE DONOR,

ACHIEVED BY THE GRANTEE PRIOR TO RECEIVING THE NEXT GRANT INSTALLMENT.

Page 2 (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) THE FOUNDATION, THE COMMUNITY AND ANY OTHER STAKEHOLDERS INVOLVED. non-cash assistance (d) Amount of Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV

37-1440662

Schedule | (Form 990) 2009 LEGACY GLOBAL FOUNDATION,

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Department of the Treasury

Part

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III

Open to Public OMB No 1545-0047 2009 Inspection

CULTURE & HUMANITIES COMMUNITY DEVELOPMNT HUMANITARIAN RELIES HUMANITARIAN RELIEF Employer identification number ADDICTION RECOVERY (h) Purpose of grant or assistance YOUTH PROGRAMS YOUTH PROGRAMS 37-1440662 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II. non-cash assistance (g) Description of (c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, f applicable essistance other) 374,488 108,945 50,000 25,000 10,000 40,000 20,000 INC. $\widehat{\mathbb{C}}$ (3) (3) ල 0 3 (3) LEGACY GLOBAL FOUNDATION, 86-0255257 95-6111928 87-0212465 26-0499689 94-1156347 87-0212453 84-0385934 (P) EIN I 1 i ı 1 1 ı Į 1 85703 84070 84119 90004 84104 22313 80901 ١ (a) Name and address of organization 1 5 AZ 15 15 F ဥ 1 15 1 ١ or government 1 Į ١ YOUNG LIFE OF PRESCOTT 210 8 RIO GRAND AVE 440 EAST 8680 SOUTH 3150 SOUTH 900 WEST ļ JEWISH COMMUNITY FOR 8464 N ORACLE RD 615 SLATERS LANE 590 N VERMONT AVE COLORADO SPRINGS 1 Name of the organization THE SANDY CLUB SALT LAKE CITY TREN CHALLENGE SALVATION ARMY UTAH FOOD BANK SALT LAKE CITY THE ROAD HOME P.O. BOX 520 1 LOS ANGELES ALEXANDRIA I TUCSON SANDY

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

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Schedule 1-1 (Form 990) 2009

Page 2	L	(f) Description of non-cash assistance										Schedule I-1 (Form 990) 2009
	990), Part III.)	(9) Method of valuation (book, FMV, appraisal, other)										
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NC. 37-14	duais in the United Sta	(c) Amount of cash grant										
FOUNDATION, I	ASSISTANCE TO INDIVI	(a) Number of recipients										
Schedule 1-1 (Form 980) 2009 LEGACY GLOBAL FOUNDATION, INC. 37-1440662	Tart ii Continuation of Grants and Oth	(a) Type of grant of assistance										

SCHEDULE L. (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

➤ Complete If the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047

2009

Open To Public

ne of the o	rganization LEGACY GLOBAL FO	OUNDA	TIC	ON, IN	ic.			Employe 37-1				ı numl	ber	_
Part I	Excess Benefit Transactions (se Complete if the organization answered "Ye								- 41	^				
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Part II	Loans to and/or From Interested	d Perso	ns.											
	Complete if the organization answered "Ye		·	·····		1								
(á	a) Name of interested person and purpose	or fro	.can to on the oration?	• •	Onginal pal amount	(d) Bai	ance due	(e) in c	default?	by bo	proved pard or nittee?		/ntten ment?
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Total		· · · · · · · · ·			.,. ▶	\$					·		13. g	
Part III	Grants or Assistance Benefitting	_												
	Complete if the organization answered "Ye	es on Fo	m 99	T				7						
	(a) Name of interested person			(B) K	•	reen interested p rganization	erson and	the (C) A	moom	i and t	type of	assist	ance
									_					
									_					
														
Clark H.	Business Transactions Involvin	a Inton		d Pomor										
Part IV	Complete if the organization answered "Ye					or 28c.								
	(a) Name of interested person			nship betwe		Amount of	(d)	Descripti	ion (of trans	saction	n	(e) S	haring
	,,	Inte		person and (anization	he tra	ensaction	, ,	•						org. nues?
MELODIE	שישים כתונת	FAN		MEMBE		32,000	EMPL	VABB					Yes	No
PETON TE	DONE EE	BAN		richide.	`	32,000	CLIRT	O I DE					 	X
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		1			I		ı						1	ı

SCHEDULE M. (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No. 1545-0047

2009

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Papartment of the Treasury mai Revenue Service

Employer Identification number name of the organization LEGACY GLOBAL FOUNDATION, INC. 37-1440662 Types of Property Pari (b) (d) (a) (c) Check if **Number of Contributions** Revenues reported on Method of determining applicable Form 990, Part VIII, line 1g revenues Art—Works of art Art—Historical treasures 2 Art—Fractional interests 3 Books and publications 111 5 Clothing and household Cars and other vehicles Boats and planes 7 8 Intellectual property q Securities—Publicly traded Securities—Closely held stock 10 Securities—Partnership, LLC, 11 or trust interests X 2 573,668 MARKET SALE VALUE Securities—Miscellaneous 12 Qualified conservation 13 contribution—Historic structures Qualified conservation 14 contribution—Other Real estate—Residential 37,264 Real estate—Commercial INDEPENDENT APPRAISAL 16 Real estate—Other 17 18 Collectibles Food inventory 19 20 Drugs and medical supplies 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24

28 Other ►(
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29 0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that		·	
	it must hold for at least three years from the date of the initial contribution, and which is not required to be		. :	
	used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.		././	`
31	Does the organization have a gift acceptance policy that requires the review of any non-standard			
	contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			
	contributions?	32a	<u> </u>	X
	If "Yes," describe in Part II		- ` `	
	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,	, .		Į.
	describe in Part II.	: `.	*	, ge

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26

27

Other ►(______)

Other ►(______)

Schedule M (Form	n 990) 2009	LEGACY	GLOBAL	FOUNDATION	I, INC.	37-1440662	Page 2
Part II	Suppler	nental Infor	mation. Co	omplete this part is s part for any add	to provide the	e information required by Part I, lines	30b,
	JZD, am	1 33. AISO C	ombiere im	s part for any aut	altional inform	iauon.	

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

2009

Open to Public Inspection

"oartment of the Treasury mai Revenue Service

BUSINESS RELATIONSHIP

ivame of the organization **Employer Identification number** 37-1440662 LEGACY GLOBAL FOUNDATION INC. LINE 4A - FIRST ACHIEVEMENT HUMANITARIAN RELIEF, RESEARCH, MEDICAL ASSISTANCE, COMMUNITY SERVICE AND YOUTH PROGRAMS GRANTS ARE MADE WITHIN THE UNITED STATES AND INTERNATIONALLY FOR THE BENEFIT OF MANKIND. FORM 990, PART VI, LINE 2 RELATED PARTY INFORMATION AMONG OFFICERS JANEL DURFEE RICHARD DURFEE VICE-PRES PRESIDENT FAMILY RELATIONSHIP RICHARD DURFEE RENDA PROSSER TREASURER PRESIDENT

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
FORM 990 IS PRESENTED TO THE BOARD AND THE FINANCE COMMITTEE FOR REVIEW
PRIOR TO FILING FORM 990. THE FINANCE COMMITTEE IS COMPOSED OF THE
ORGANIZATION'S SECRETARY, TREASURER, CONTROLLER AND KEY FINANCE PERSONNEL.

12C - ENFORCEMENT FORM 990, PART LINE OF CONFLICTS VI, POLICY A WRITTEN CONFLICT OF ORGANIZATION HAS POLICY TRUSTEES, COMMITTEE MEMBERS AND EMPLOYEES TO DISCLOSE ON AN ON-GOING BASIS POTENTIAL CONFLICTS OF THEMSELVES AND THEIR FAMILY MEMBERS. ALL POTENTIAL CONFLICTS ARE SUBMITTED TO THE BOARD FOR REVIEW.

Name of the organization

LEGACY GLOBAL FOUNDATION, INC

Employer identification number 37-1440662

LEGACI GLOBAL FOUNDATION, INC.	7-1440002
OF A POTENTIAL CONFLICT, PROSPECTIVE ACTIONS INCLUDE THE C	ONFLICTED PARTY
ABSTAINING FROM VOTING ON THE MATTER, AND RECORDKEEPING IN	
THE ORGANIZATION'S WRITTEN DOCUMENT RETENTION AND DESTRUCT	
FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP	OFFICIAL
COMPENSATION OF EMPLOYEES, INCLUDING THE EXECUTIVE MANAGEM	ENT TEAM, IS SET
AND APPROVED BY INDEPENDENT BOARD MEMBERS. COMPENSATION I	S SET USING DATA
OF COMPARABLE POSITIONS AND THE PROCESS IS DOCUMENTED. THE	INDEPENDENT
BOARD MEMBERS FORM THE COMPENSATION COMMITTEE AND EVLUATE	EXECUTIVE
PERFORMANCE AGAINST GOALS FOR THE YEAR AND APPROVES COMPEN	SATION BASED ON
PERFORMANCE.	
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSUR	E EXPLANATION
HE ORGANIZATION'S ARTICLES OF INCORPORATION, BYLAWS, CONFL	ICT OF INTEREST
POLICY, FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE TO	THE PUBLIC UPON
REQUEST.	
, , , , , , , , , , , , , , , , , , ,	
***************************************	*****

Open to Public Inspection Schedule R (Form 990) 2009 OMB No. 1545-0047 2009 Employer identification number (f) Diract controlling (f) Direct controlling entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) N/A 37-1440662 (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section Complete If the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. (d) Total income **501C3** Related Organizations and Unrelated Partnerships ▶ See separate instructions. (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) AZ FUND ADMIN (b) Pnmary activity (b) Primary activity Attach to Form 990. For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 74-2416546 LEGACY GLOBAL FOUNDATION, INC. : (a) Name, address, and EIN of related organization (a) Name, address, and EIN of disregarded entity : AZ 85206 : 1423 S. HIGLEY ROAD, SUITE 127 AMERIFIRST FOUNDATION, INC. : Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part Part MESA : :

Page 2 (j) General or managing partner? Yes No Schadiile D (Earn 880) 2008 Percentage ownership Code V—UBI amount in box 20 of Schedule K-1 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (Form 1085) end-of-year assets Share of 9 (h) Dispro-portionate alloc ? Yes No (g) Share of end-of-year Share of total income 888915 (f) Share of total Income (C corp, S corp, Type of entity or trust) Predominant income (related, unrelated, tom tax under sectors sectors 512-514) Direct controlling 37-1440662 (d) Direct controlling Legal domicile foreign country) (state or (c) Legal domicile (state or foreign country) Schedule R (Form 990) 2009 LEGACY GLOBAL FOUNDATION, INC. Primary activity Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part E Part : ¥a

Page 3 Schedule R (Form 990) 2009 × M M M M × M M ¥e8 Amount involved Ē 10 9 눆 4 ÷ 3 Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Transaction type (a-r) 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts IHIV? e Loans or loan guarantees by other organization(s) Lease of facilities, equipment, or other assets to other organization(s) 37-1440662 Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Receipt of (i) interest (II) annuities (III) royatties (Iv) rent from a controlled entity Name of other organization Schedule R (Form 990) 2009 LEGACY GLOBAL FOUNDATION, INC. :: d Loans or loan guarantees to or for other organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Lease of facilities, equipment, or other assets from other organization(s) Reimbursement paid to other organization for expenses Sharing of facilities, equipment, mailing lists, or other assets Other transfer of cash or property from other organization(s) Gift, grant, or capital contribution from other organization(s) Gift, grant, or capital contribution to other organization(s) Other transfer of cash or property to other organization(s) Reimbursement paid by other organization for expenses Purchase of assets from other organization(s) Sale of assets to other organization(s) Sharing of paid employees Exchange of assets Pan V 0 σ 9 ϵ 2 ල 3 3

Page 4

37-1440662

Schedule R (Form 990) 2009 LEGACY GLOBAL FOUNDATION, INC.

Part VI

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

or gross revenue) that was not a related organization of mistocholds regarding exclusion of certain investment partitions.	יבותאוחו זמו מביותוו וווא	esurient parmersm	ż.				•	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Are all partners	(e) Share of	(f) Disproportionale	(9) Code V—UBI	(h) General or	ŏ
		(state or foreign country)	section 501(c)(3) organizations?	end-of-year assets	allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	ے م
			Yes No		Yes No		Yes	2
		·						
							į	
								1
						Schedule R (Form 990) 2009	m 990) 2	600

Department of the Treasury Internal Revenue Service

ne(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return

OMB No 1545-0172 2009

Attachment Sequence No 67

See separate instructions.

Identifying number

	LEGACY	GLOBAL FOU	JNDATION, IN	C.			37-	144	0662
	ness or activity to which this form relates								
	NDIRECT DEPRECIATED FOR EXPE		orby Undon Cootio	470					
5 7			perty Under Section ty, complete Part V			nnioto P	ort i		
1	Maximum amount. See the instru							1	250,000
2	Total cost of section 179 property		o inchangle		•• •		• • • • • •	2	230,000
3	Threshold cost of section 179 property			·····	• ••			3	800,000
4	Reduction in limitation. Subtract	line 3 from line 2. If ze	m or less enter A	αιοπε <i>)</i>				4	000,000
5	Dollar limitation for tax year. Subtract I					nuctione		5	
6		on of property		et (business us			Elected cost		
<u> </u>				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					13 1 44 32 M
				-					··. · · · · · · · · · · · · · · · · · ·
7	Listed property. Enter the amoun	t from line 29			7				
8	Total elected cost of section 179	property. Add amount	ts in column (c), lines 6 a	 ind 7		L		8	
9	Tentative deduction. Enter the sn	naller of line 5 or line	8		• • • • • •		•• •••	9	
10	Carryover of disallowed deduction	n from line 13 of your	2008 Form 4562				• • • • •	10	
11	Business income limitation. Ente	r the smaller of busine	ess income (not less than	zero) or line	 5 (see	instruction	ns)	11	· · · · · · · · · · · · · · · · · · ·
12	Section 179 expense deduction.						,	12	
13	Carryover of disallowed deduction				13				
	: Do not use Part II or Part III belo								<u></u>
P;	ert II Special Deprecia	tion Allowance a	nd Other Deprecia	tion (Do no	ot inc	lude list	ed prop	erty.)	(See instr.)
14	Special depreciation allowance for	or qualified property (o	ther than listed property)	placed in ser	vice				
	during the tax year (see instruction	ons)						14	
a ~	Property subject to section 168(f)	(1) election						15	
	Other depreciation (including AC	RS)	· · · · · · · · · · · · · · · · · · ·					16	6,198
Pi			ude listed property.						
			Section A						_
17	MACRS deductions for assets pla	aced in service in tax y	years beginning before 2	009			<u>. </u>	17	0
18	If you are electing to group any assets							``;``	7 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	Section B—	· · · · · · · · · · · · · · · · · · ·	vice During 2009 Tax Y	ear Using the	Gene	ral Depre	ciation Sy	/stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery penod	(e) C	convention	(f) Met	hod	(g) Depreciation deduction
19a	3-year property	1888年(1777)							
b	5-year property								
С	7-year property				<u> </u>				
<u>d</u>	10-year property				ļ				
ę	15-year property		· · · · · · · · · · · · · · · · · · ·		<u> </u>				
<u>Ť</u>	20-year property			<u> </u>	L				
9	25-year property	is we're		25 yrs	L		S/L	·	
h				27.5 yrs.		MM	S/L	<u> </u>	
	property			27.5 yrs.		MM	S/L		
ı	Nonresidential real		!	39 yrs.		MM	S/L		
	property	<u>. </u>			<u> </u>	MM	S/L		
	Section C—A	ssets Placed in Serv	ice During 2009 Tax Ye	ar Using the	Altern	ative Depi	eciation S	Syster	1
20a	Class life						S/L		
_ <u>b</u>	12-year			12 yrs.	<u> </u>		S/L	<u> </u>	
	40-year	<u> </u>		40 yrs	<u> </u>	ММ	S/L		
P	Summary (See in	structions.)							
21	Listed property. Enter amount fro	m line 28							
								21	
	Total. Add amounts from line 12,		ines 19 and 20 in colum	1 (g), and line	 21 Er	ter here	••••	27	
		lines 14 through 17, I				nter here	····	22	6,198
23	Total. Add amounts from line 12,	lines 14 through 17, lour return. Partnership ced in service during t	s and S corporations—s	ee instruction:		nter here	····		6,198