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

OMB No 1545-0052 2009

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or type See Special See Specia	vise,		street (or P O box					Room/si	uite	B Telephone number (see page 10 of the instructions)			
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Part I A to make the second of year 16) Part I A to make the year 16) Part I			, state, and ZIP co							C If exemp	tion applic	ation is	
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Secution of year 16) Part I A to make a secundary and		OKEMOS	- Bloomhè - <u>MI-48864-</u> !	. L) M	T 48	322						ations, check here	
Secution of year 16) Part I A to make a secundary and												ations meeting th here and attach	• . 🗀
Part I Adoministrative Exbeuses 1 Condition of years 16) Part I Adoministrative Exbeuses 1 Condition of years 16 2 Condition of years 16 3 Interest 16 4 Condition of years 16 4 Condition of		_				-							▶⊔
of year 16) Part I Adomode a Second and Part I Adomode a S			nexempt charitabl				ivate foundat			E If private	foundation	on status was terr	minated
Part I A to make the part I A to the p			assets at end		unting metho	_	ash Acc	rual		under se	ection 507(b)(1)(A), check he	ere . 🕨 🔙
Part I A to make the part I A		m Part II, col			ther (specify)					F If the fou	indation is	s in a 60-month te	ermination
To make the property of the pr			61,334.		column (d) mu	ist be on	casn basis)		-	under se	ction 507(l	b)(1)(B), check he	
2 Chi 3 Into Additional Property of the Addition	total of may no	amounts in cot necessarily	enue and Expensiolumns (b), (c), and equal the amount the 11 of the instruc	d (d) s in	(a) Revenue expenses books	per	(b) Net inve		(c) Adjusted income		for ch	ursements aritable poses asis only)
3 Into 4 Dry 10		ons, gifts, grants,	etc , received (attach so foundation is not req	hedule) . uired to									
Decenting and Administrative Expenses 5 a Grown Service Control of the control o		allacii	Sch B temporary cash inve		5:	2,783.	5	2,783.		52	,783	ATCH	1
Sa Grint		•	est from securities	ı		6,946.		6,946.			,946		
New Text						-,	_	.,	 			131011	
8 Ne 9 Inc 10 a Grown and 10 a Grown and 10 a Grown and 11 Ot 12 To 13 Co 14 Ot 15 Per 16 a Le c Ot 17 Int 18 Tax 19 De 20 Oc 21 Tra 22 Pri 23 Ot 24 To Add				Ĭ									
8 Ne 9 Inc 10 a Grown and 10 a Grown and 10 a Grown and 11 Ot 12 To 13 Co 14 Ot 15 Per 16 a Le c Ot 17 Int 18 Tax 19 De 20 Oc 21 Tra 22 Pri 23 Ot 24 To Add			ss)		-8	3,207.	15	<u></u>	7017	VED			
8 Ne 9 Inc 10 a Grown and b Les c Gr 11 Ot 12 To 13 Co 14 Ot 15 Pe 16a Le c Ot 17 Int 18 Tax 19 De 20 Oc 21 Tra 22 Pri 23 Ot 24 To Add	Net gain Gross sa	or (loss) from ales price for all	sale of assets not on	, 258.		3, <u>2</u> 0, .	 		21-	0 13.33	10		
8 Ne 9 Inc 10 a Grown and 10 a Grown and 10 a Grown and 11 Ot 12 To 13 Co 14 Ot 15 Per 16 a Le c Ot 17 Int 18 Tax 19 De 20 Oc 21 Tra 22 Pri 23 Ot 24 To Add	assets or	n line 6a		<u> </u>				1	-		Ö	-	•
9 India a Grown and Market State 9 India a Grown and Market State 10 a Grown and Market State 11 Ot 12 To 13 Co 14 Ot 15 Pe 16 A Le 5 Ac 6 Ot 17 Int 18 To 20 Ot 21 Tra 22 Pri 23 Ot 24 To Add			me (from Part IV,				0		1 00 5	2 2010	0		
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c Gr 11 Ot 12 To 13 Co 14 Ot 15 Pe 16a Le 6 Ac 7 Ot 17 Int 18 Ta 19 De 20 Oc 21 Tr 22 Pr 23 Ot 24 To Add	and allow	wances · · ·	• •						سا لسا	.00,00		_	
11 Ot 12 To 13 Co 14 Ot 15 Pe 16a Le b Ac c Ot 17 Int 18 Ta: 19 De 20 Ot 21 Tra 22 Pri 23 Ot 24 To Ado		st of goods sold							 				
12 To 13 Co 14 Ot 15 Pe 16a Le 16a Le 17 Int 17 Int 18 Ta: 19 De 20 Oc 21 Tr 22 Pri 23 Ot 24 To Add			(attach schedule)		<u></u>	148.		148.	-		148	7 MOII	
13 Co 14 Ot 15 Pe 16a Le 16 Ac 17 Int 18 Ta: 19 De 20 Ot 21 Tra 22 Pri 23 Ot 24 To Add			n schedule)		3	6,670.			1	110	,877	· ATCH	3
14 Ot 15 Pe 16a Le 15 Pe 16a Le 16a Le 16a Le 17 Int 18 Tax 19 De 20 Ot 21 Tra 22 Pri 24 To 24 Add			<u>rough 11</u>					9,877.	1	119	,0//	\	20 400
15 Pe 16a Le 6 Ac C Ot 17 Int 18 Ta: 19 De 20 Oc 21 Tra 22 Pri 23 Ot Ac Ac Ac Ac Ac Ac Ac A			rs, directors, trustees			8 , 100.		9,620.	<u> </u>			 -	38,480
Oberating and Administrative Expense 16a Le 16a Le 17 Int 18 Ta: 19 Occ 21 Tra 23 Ot 24 To 25 Cc			ries and wages .						<u> </u>			 	
Oberating and Administrative Experion Operating and Administrative Experion Operation Oper			oyee benefits						ļ			_	
b Ac C Oberating and Administrative Ex	Legal fe	ees (attach sc	hedule)			2 455		401				 	1 000
Coberating and Administrative 17 Int 18 Tax 19 De 20 Oct 21 Tra 22 Pri 23 Ot 24 To 25 Co	Accoun	ting fees (att	hedule) ach schedule) ^{ATC}	н 4		2,457.	ļ	491.	 		0	-	1,966
Oberating and Administrat 18 Tax 19 De 20 Oc 21 Tra 22 Pri 23 Ot 24 To 25 Cc 25 Cc	Other p	orofessional fe	ees (attach schedu	le) .*	4	2 , 357.		8,471.	<u> </u>				33,887
Oberating and Administ 18 Tax 19 De 20 Oct 21 Tra 22 Pri 23 Ot 24 To 25 Co 25	Interest								<u> </u>			_	
Oberating and Admir 20 Oct 21 Tra 22 Pri 23 Ot 24 To Add 25 Co	Taxes (at	ttach schedule)	(see page 14 of the ins	tructions) *		1,123.		0.	·				
Oberating and Adi 21 Tra 22 Pro 23 Ot 24 To Adi 25 Co	Depreci	iation (attach	schedule) and de	pletion.		_			<u> </u>				
21 Tra 22 Pro 23 Ot 24 To Ad 25 Co													
22 Pri 23 Ot 24 To Ad 25 Co			and meetings	T I									
23 Ot 24 To Ad 25 Co			tions										
O 25 Co	Other e	expenses (atta	ach schedule) $^{ m AT}$	СН 7		228.		46.					182
Ad O 25 Co			l administrative ex										
O 25 Co			h 23		9.	4,265.	1	8,628.			0		74,515
			grants paid		12	0,000.				_			120,000
1		_	rsements Add lines 2	Г	21	4,265.	1	8,628.	\Box		0		194,515
	_	ct line 26 from		. r anu 20									
			penses and disbursem	ente	-17	7 , 595.							
			ome (if negative, e			<u> </u>	10	1,249.		•			
			e (if negative, ente	' I					 	119	,877		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 5 JSA ** 9E1410 1 0000 HQOOGH 507R 6/17/2010 6:36:47 PM V 09-6.4 129800

ATCH 6

Form 990-PF (2009)

В	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	art II	Dalalice Sileets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
l	• 1	Cash - non-interest-beari	ing			
	2	Savings and temporary	cash investments	304,679.	53,663.	53,663.
	3	Accounts receivable ೬				
ı		Less allowance for doub	btful accounts ▶			
- 1	4	Pledges receivable ▶_				
		Less allowance for dou	btful accounts ▶			
			fficers, directors, trustees, and other			
			ach schedule) (see page 16 of the instructions)			
			receivable (attach schedule)			
ı			btful accounts			
		Inventories for sale or us		·		
ssets	9	Dranged expenses and d	Se			
SS	40.0	trepaid expenses and d	leferred charges	353,166.	202,566.	217,831.
۷			e stock (attach schedule) ATCH 9	2,324,718.	2,600,393.	3,166,154.
				702,519.	600,019.	620,966.
	11 °	Investments - corporate Investments - land, buildings and equipment basis Less accumulated deprecia (attach schedule)		702,313.	000,013.	020,300.
	12		loans			
	14	Investments - other (atta Land, buildings, and equipment basis Less accumulated deprecia	ach schedule)			
		(attach schedule) Other assets (describe	´	25,000.	75,847.	102,720.
ı				23,000.	73,017.	102/720
		•	pleted by all filers - see the	3,710,082.	3,532,488.	4,161,334.
\dashv			age 1, item l)	3,710,002.	3,332,400.	4,101,334.
		•	accrued expenses	327,357.	384,857.	
				327,337.	304,037.	
Liabilities						
Ę I			ors, trustees, and other disqualified persons .	-		
jat			otes payable (attach schedule)			
_	22	Other liabilities (describe	e ▶)		· · · · · · · · · · · · · · · · · · ·	
				327,357.	384,857.	
\dashv			es 17 through 22)	321,331.	304,037.	
S		and complete lines	low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.			
힏				_		
9	25				· · · · · · · · · · · · · · · · · · ·	
ä	26	•				
Ĕ			not follow SFAS 117,			
띤			plete lines 27 through 31. X	3,382,725.	2 147 621	
0	27		cipal, or current funds	3,302,723.	3,147,631.	
ë	28		r land, bldg, and equipment fund			
155			ulated income, endowment, or other funds		0.	
Net Assets	30	Total net assets or fund	d balances (see page 17 of the	2 200 705	2 147 621	
Ž		instructions)		3,382,725.	3,147,631.	
			t assets/fund balances (see page 17	2 210 200		
		of the instructions)	· · · · · · · · · · · · · · · · · · ·	3,710,082.	3,532,488.	·
			anges in Net Assets or Fund		, ,	
1			alances at beginning of year - Part II		_	
			d on prior year's return)			3,382,725.
2	Ente	r amount from Part I,	line 27a led in line 2 (itemize) ▶ATTACH		2	-177,595.
3	Othe	r increases not includ	led in line 2 (itemize) ► ATTACH	MENT 12	3	<u>1</u> .
4	Add	lines 1, 2, and 3			4	3,205,131.
5	Decr	eases not included in	line 2 (itemize) ▶ATTACH	IMENT 13	5	57,500.
			alances at end of year (line 4 minus			3,147,631.
			**ATCH 8			Form 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on Inv	estment Income	(b) How	(a) Data		
• (a) List and 2-story bri	acquired P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)			
la						
b			ļ			
<u>c</u>						
			-		<u> </u>	
e	40 Decrease allowed	(g) Cost or other basis	-	(b) Gain or (le)cc)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
a b						
c						
d					_	
e						
Complete only for assets sh	lowing gain in column (h) and owr	ned by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less Losses (from co		
a						
b						
С			ļ			
d						
<u>e</u>		<u></u>	 			
Capital gain net income or	(not cantal loce)	gain, also enter in Part I, line 7				
	(1)	(loss), enter -0- in Part I, line 7	2	 -		
• • •	or (loss) as defined in sections 12					
-	line 8, column (c) (see pages 13	· ·				
	ne 8	uced Tax on Net Investment Inc	3 Comp			
	the section 4942 tax on the distrib not qualify under section 4940(e).	outable amount of any year in the b	ase perio	d? [Yes X N	
<u></u>			oforo mol	una ony ontrino	=	
(a)		r, see page 18 of the instructions be	eiore mai	(d)		
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution r		
2008	469,850.	3,943,216.		(col (b) divided by	0.119154	
2007	136,933.	4,076,523.	<u> </u>		0.033591	
2006	315,917.	4,842,442.	1		0.065239	
2005	219,382.	4,980,628.	1		0.044047	
2004	469,255.	6,117,627.			0.076705	
				_		
? Total of line 1, column (d)			2		0.3387 <u>36</u>	
3 Average distribution ratio f	for the 5-year base period - divide	e the total on line 2 by 5, or by the				
number of years the found	lation has been in existence if less	s than 5 years	3		0.067747	
Enter the net value of non-	charitable-use assets for 2009 fro	om Part X, line 5	4	3,	540,507.	
Multiply line 4 by line 3			5		239,859.	
Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6	6 1,012		
Add lines 5 and 6			7		240,871.	
S. Entor munifolism described to	no from Dort VIII line 4				207 015	
If line 8 is equal to or gre Part VI instructions on page	eater than line 7, check the box is a 18	in Part VI, line 1b, and complete	that part	using a 1% ta	307,015. x rate. See th	

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne ins	tructio	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
•	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		1,0	12.
	here X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2	_		
3	Add lines 1 and 2		1,0	12.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1,0	12.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 8,000.			
b	Exempt foreign organizations-tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		8,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			88.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 - Refunded ▶ 11		6,9	88.
Par	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1 b		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1 c		Χ
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Χ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) >			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		-	
_	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	1		
	27)? If "Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	"		
	names and addresses	10		Х
	<u> </u>		i	ı

Form **990-PF** (2009)

Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions).

(b) Title, and average

hours per week devoted to position

(c) Compensation

				▶			_
F	ori	m	9	90-	PF	(2009)

(e) Expense account,

other allowances

If none, enter "NONE."

NONE

(a) Name and address of each employee paid more than \$50,000

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

(d) Contributions to

employee benefit plans and deferred

compensation

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors (continued)	oyees,
Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If non-	e, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		
'adal ayyarb	and others are always as a CCO CCO for manifestation of the control of the contro	NONE
otal numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the foun	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number	
	ons and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A		
2		
3		
4		.
Dort IV B	Summary of Program-Related Investments (see page 23 of the instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
		•
2		
-		-
All other pro	gram-related investments. See page 24 of the instructions	
3 NONE	2	
~		•
Fotal. Add	lines 1 through 3	

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. see page 24 of the instructions.)	Foreign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	3,415,252.
b	b Average of monthly cash balances	1b	179,171.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	d Total (add lines 1a, b, and c)	1d	3,594,423.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cultivate line O from line 1d	2	3,594,423.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25	; · · · <u>F</u>	
		_	53,916.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,540,507.
6	Minimum investment return. Enter 5% of line 5	6	177,025.
Pa	Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5 foundations and certain foreign organizations check here ► and do not complete) private operating	
1	Minimum investment return from Part X, line 6	1	177,025.
2 a		012.	
b			
С		2c	1,012. 176,013.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	176,013.
4	Recoveries of amounts treated as qualifying distributions		
5			176,013.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	176,013.
Pa	Part XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a		1a	194,515.
b			0.
2	b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	• • • • • • • • • • • • • • • • • • • •	
-	***********	اما	0.
3	Amounts set aside for specific charitable projects that satisfy the.		`
о a		3a	0.
a b			112,500.
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	307,015.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		307,013.
ə	· ·		1,012.
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	306,003.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula qualifies for the section 4940(e) reduction of tax in those years	iting whether the f	oundation

Form **990-PF** (2009)

_Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	line 7	· · · · · · · · · · · · · · · · · · ·			176,013.
_	Undistributed income, if any, as of the end of 2009				
2	· · · · · · · · · · · · · · · · ·				
a	Enter amount for 2008 only				
ь	· · · — · — · — ·				
3	Excess distributions carryover, if any, to 2009 From 2004 166,817.				
a			1		
b	From 2005				
C	••••				
d	From 2007				
e		521,950.			
f	Total of lines 3a through e	321, 930.			<u> </u>
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 307,015.				
а	Applied to 2008, but not more than line 2a				
ь	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				176,013.
e	Remaining amount distributed out of corpus	131,002.			
5	Excess distributions carryover applied to 2009			··	
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	652 , 952.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
٨	Subtract line 6c from line 6b Taxable				
ŭ	amount - see page 27 of the instructions				
e	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions				
_					
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010.				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
^	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	166,817.			
9	Excess distributions carryover to 2010.	406 105			
	Subtract lines 7 and 8 from line 6a	486,135.			
	Analysis of line 9				1
а	Excess from 2005				
b	Excess from 2006 80,198.				
С	Excess from 2007				
d	Excess from 2008 274, 935.				
e	Excess from 2009 131,002.				<u> </u>

Form **990-PF** (2009)

	foundation, and the ruling				· · · · I	(1) (2) 01 4040(1) (5)
)	Check box to indicate whe	ther the foundation is a Tax year	private operating found	Prior 3 years	on 4942((j) (3) or 4942(j) (5)
	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	For the minimum investment return from Part X for each year listed					
•	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed .					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b or c for the alternative test relied upon *Assets" alternative test - enter					
	(1) Value of all assets(2) Value of assets qualifying under section					
)	4942(j)(3)(B)(i) "Endowment" alternative testenter 2/3 of minimum investment return shown in Part X,					
	line 6 for each year listed			-		
;	"Support" alternative test - enter (1) Total support other than					
	gross investment income (interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)), or royalties)					<u> </u>
	exempt organizations as provided in section 4942 (j)(3)(B)(iii)					<u> </u>
	(3) Largest amount of sup- port from an exempt organization					_
	(4) Gross investment income	une Information (C	Complete this port	anly if the four	 dation had \$5,000	or more in sees
Ć.		luring the year - se			dation nad \$5,000	or more in asse
а	Information Regarding List any managers of t before the close of any	he foundation who h	nave contributed moi	re than 2% of the to	tal contributions recei	ved by the foundatio
	NONE NONE	tax year (but only if the	ney nave contributed	more than \$5,000)		
)	List any managers of ownership of a partners					y large portion of the
	NONE	O the late of the	Oith Lass Oakalass	his sta Dansana		
	Information Regarding Check here ▶ If the	•			ırıtable organizations	and does not accer
	unsolicited requests forganizations under other	or funds If the foun ner conditions, compl	dation makes gifts, ete items 2a, b, c, and	grants, etc. (see pa	ge 28 of the instructi	
a 	The name, address, ar	nd telephone number	of the person to who	m applications should	be addressed:	
o	The form in which appl	ications should be su	bmitted and informat	ion and materials the	ey should include.	
	NO SPECIFIC	FORMAT FOR A	PPLICATIONS			
С	Any submission deadling	nes				
	 	ON DEADLINES				
d	Any restrictions or linfactors:	mitations on awards	, such as by geogr	raphical areas, char	itable fields, kinds of	institutions, or othe

Part XV Supplementary Information (continued) 3. Grants and Contributions Paid During the Year or Approved for Future Payment									
	ing the Year or Appl								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient							
a Paid during the year									
ATTACHMENT 16									
Total	 		3a	120,000					
b Approved for future payment									
7.555 A.S.			1						
ATTACHMENT 17									
		1	İ						
				1					
		<u> </u>							
Total	<u> </u>			384,857					

er gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exemp
-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
Program service revenue a ATTACHMENT 18		148.			and mod dodono
·					
·					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments			14	52,783.	
Dividends and interest from securities			14	66,946.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	-83,207.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
·					
	1				
t					
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	to verify calc	ulations) complishment of Ex	empt Purp	oses	
Fotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importar
Fotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
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Fubtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities Explain below how each activities the accomplishment of the forpage 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Fubtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities Explain below how each activities the accomplishment of the forpage 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Fubtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities Explain below how each activities the accomplishment of the forpage 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Fubtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities Explain below how each activities the accomplishment of the forpage 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the for page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 or t XVI-B Relationship of Activities The No. Explain below how each activities the accomplishment of the form page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan
the accomplishment of the for page 29 of the instructions)	to verify calc	ulations) complishment of Exch income is reported	empt Purp	oses (e) of Part XVI-A cont	ributed importan

Pa	t XVII	Information Exempt Orga		ransfers To and	Transa	ctions a	ınd Relati	onships	With N	lonc	harit	able
1 '	ın sec	ne organization directly	ode (other than	section 501(c)(3) or	ganızatıons						Yes	No
а		zations? iers from the reporting fo										v
		ish								1a(1)	<u> </u>	$\frac{X}{X}$
_		ther assets		• • • • • • • • • • • • •			• • • • • •			1a(2)		
D		transactions ales of assets to a nonch	varitable exempt o	rganization						1 b(1)		Х
		rchases of assets from								1b(2)		X
		ental of facilities, equipm								1b(3)		X
		eimbursement arrangeme								1b(4)		X
	(5) Loans or loan guarantees											X
		erformance of services o								1b(6)		X
		ig of facilities, equipmen								_1c	<u> </u>	X
d		answer to any of t										
		of the goods, other	·	. ,								
	value	in any transaction or	snaring arrang	gement, snow in coil	ımn (a) tı	ie value	ot the good	s, other as	sets, or	Service	es rec	eivea
(a)	ine no	(b) Amount involved	(c) Name of r	oncharitable exempt organ	ization	(d) Desc	ription of transf	ers, transaction	ns, and shar	ing arra	angeme	nts
		N/A	(,, , , , , , , , , , , , , , , , , , ,	<u> </u>		N/A	<u> </u>	·				
								. ,	_			
							 					
	-											
												
				-								
									-			
					_							
	section	foundation directly or n 501(c) of the Code (oth	ner than section 5			nore tax-e	xempt organi	zations desc		Y	es 🗀	No.
<u>b</u>	If "Yes	s," complete the following (a) Name of organization		(b) Type of org			_	(c) Description	of rolation	-bin		
	_	(a) Name of organization		(b) Type of oig	janization			(c) Description	1 Of Telations	sub		
	•											
_												
	Under belief,	penalties of perjury, I decl it is true, correct, and com	are that I have explete Declaration of	amined this return, including preparer (other than tax	ng accompa payer or fidi	iciary) is bas	sed on all infor	mation of whi	ch prepare	r haś a	nowled	lge and wledge
_	_	Chamas	· Juggle	<u>~</u>		7/26	10		dent			
ere	Sı	gnature of officer or trustee	1/		T	Date	, 	Title	Dropororio		6	
Sign Here	Paid Preparer's Use Only	Preparer's signature	Deu 1	1) Wollas	Pate 6/	1/10	Check if self-employ	ed ►X	Preparer's number (Sepage 30 of 368-48	e Sign the inst	ature o	
5,	Prepa Use C	Firm's name (or yours if	HENRY	W. WOLCOTT, C	PA		1		8-3523		-	
	₽ ⊃	self-employed), address		N. MICHIGAN AV	E SI	JITE 10)1					
		and ZIP code	LANSI	NG, MI		489	917	Phone no	517-3	27-6	5766	
						<u></u>			F	orm 99	90-PF	(2009)

HAL & JEAN GLASSEN MEMORIAL FOUNDATION

38-3012223

FORM 990-PF - PART XV

GRANTS & CONTRIBUTIONS PAID DURING THE YEAR

2009

			\mount
			Paid in
Recipient's Name	Purpose of the Grant		2009
Michigan State University	Boone & Crockette Club Chair - pmt 2 of 5	\$	50,000
Maple Valley Schools	Fishing Instructor Program - final pmt	\$	2,000
Wildflower Association	2009 School Program	\$	3,000
Michigan 4H Foundation	Shooting Sports Instructor Program	\$	5,000
MSU School of Vet Medicine	Scholarship Awards Program	\$	5,000
Michigan State University	Conservation Medicine Graduate Specialist Program	\$	50,000
MSU-WKAR	Underwriting National Parks Broadcast	\$	3,000
Maple Valley Schools	Fishing Instructor Program	\$	2,000
TOTAL GRANTS	& CONTRIBUTIONS PAID IN 2009	_\$	120,000

SCHEDULE D . (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

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

OMB No 1545-0092

2009

Name	e of estate or trust				Employer identi	ficatio	n number
	HAL & JEAN GLASSEN MEMORIAL F				38-30122	23	
	: Form 5227 filers need to complete only Pa						
Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
							
b	Enter the short-term gain or (loss), if any, f	rom Schedule D	-1, line 1b			1 b	
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	ships, S corpora	tions, and other	estates or trusts .		3	
4	Short-term capital loss carryover. Enter the Carryover Worksheet	•	-	•		4	()
5	Net short-term gain or (loss). Combine line	es 1a through 4	ın column (f).	Enter here and on li	ne 13,		
Day	column (3) on the back				<u> ▶</u>	5	
Par	·			ie reai	(e) Cost or other	basis	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(see page 4 of instructions	the	the entire year Subtract (e) from (d)
6a							
			-				
		-					
	_	ļ					
		one Cabadala D	4 h Ob		. •	a b	-83,207.
D	Enter the long-term gain or (loss), if any, fr						-63,207.
7	Long-term capital gain or (loss) from Form	is 2439, 4684, (6252, 6781, aı	nd 8824		7	
8	Net long-term gain or (loss) from partners	hips, S corporat	ons, and other	estates or trusts		8	
9	Capital gain distributions					9_	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter the	amount, if any	, from line 14 o	of the 2008 Capital Lo	oss		
	Carryover Worksheet					11	()
12	Net long-term gain or (loss). Combine line	s 6a through 11	ın column (f)	Enter here and on l	ine 14a,		02 007
	column (3) on the back			<u> </u>			-83,207.
ror I	Paperwork Reduction Act Notice, see the Instru	icuons for Form 1	V4 1.		Sc	neaul	e D (Form 1041) 2009

Sche	dule D (Form 1041) 2009						Page 2
	t III Summary of Parts I and II			neficiaries'	(2) Est		(3) Total
	. Caution: Read the instructions before completing this p	oart.	(see	page 5)	or tru	st's	(0) 10101
13	Net short-term gain or (loss)	13_					
14	Net long-term gain or (loss):						_02 207
а	Total for year	14a					-83,207.
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	14b					
	• • • • • • • • • • • • • • • • • • • •						-83,207.
15	• • • • • • • • • • • • • • • • • • • •	15					
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV.						
Pai	t IV Capital Loss Limitation						
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P						
а	The loss on line 15, column (3) or b \$3,000 if the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page					16	(3,000)
Note Carry	e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page over Worksheet on page 7 of the instructions to figure your capital loss carryover	? 1, lın	e 22 (or F	Form 990-T, Ii	ne 34), is a	loss, c	omplete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rate						
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu) are nai	ne oran an	nount is an	tered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more		_	no, or an an	ilount is on	itorou	in rait or rait in and
	tion: Skip this part and complete the worksheet on page 8 of the instruc						
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or						
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.						
	n 990-T trusts. Complete this part only if both lines 14a and 15 are						
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this par	rt and	complet	te the work	sheet on p	age 8	of the instructions if
eitne	er line 14b, col. (2) or line 14c, col. (2) is more than zero.					,	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4) .	. 17				
18	Enter the smaller of line 14a or 15 in column (2)						
	but not less than zero						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified						
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21		_				
22	Subtract line 21 from line 20. If zero or less, enter -0-		22				
23	Subtract line 22 from line 17 If zero or less, enter -0		23				
24	Enter the smaller of the amount on line 17 or \$2,300		24				
25	Is the amount on line 23 equal to or more than the amount on line 24						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.						
	No. Enter the amount from line 23						
26	Subtract line 25 from line 24		26			1 1	
27	Are the amounts on lines 22 and 26 the same?						
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27			-	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
29	Subtract line 28 from line 27		. 29				
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate	Sch	edule fo	r Estates ar	nd Trusts		
	(see the Schedule Ginstructions in the instructions for Form 1041)					31	
32	Add lines 30 and 31					32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate						
	(see the Schedule Ginstructions in the instructions for Form 1041)					33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h	nere a	nd on F	orm 1041,	Schedule		
	G line 1a (or Form 990-T line 36)					1 24	

Schedule D (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side HAL & JEAN GLASSEN MEMORIAL FOUNDATION

Employer identification number 38-3012223

Part II Long-Term Capital Gains and	(b) Date		(d) Sales price	(e) Cost or other basis	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	acquired (mo , day, yr)	(c) Date sold (mo , day, ут)	(see page 4 of the instructions)	(see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
SALES OF US GOVERNMENT OBLIGATIONS	VARIOUS-LT	VARIOUS-09	50,000.	52,449.	-2,44
SALES OF US FEDERAL AGENCY					
OBLIGATIONS	VARIOUS-LT	VARIOUS-09	150,000.	147,703.	2,29
SALES OF CMO'S	VARIOUS-LT	VARIOUS-09	972.	1,198.	-226
SALES OF CORPORATE BONDS	VARIOUS-LT	VARIOUS-09	151,603.	153,750.	-2,14
SALES OF COMMON STOCK	VARIOUS-LT	VARIOUS-09	98,335.	158,279.	-59,94
SALES OF ADR	VARIOUS-LT	VARIOUS-09	22,959.	33,228.	-10,269
SALES OF OPEN ENDED MUTUAL					
FUNDS	VARIOUS-LT	VARIOUS-09	80,271.	74,153.	6,118
SALES OF CLOSED END MUTUAL FUNDS	VARIOUS-LT	VARIOUS-09	14,118.	30 , 705.	-16,58
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INVESTMENTS	
CASH	
TEMPORARY (
NO	
INTEREST	
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PART I	
990PF,	
FORM	

ADJUSTED NET INCOME	52,783.	52,783.
NET INCOME	52,783.	52,783.
REVENUE AND EXPENSES IN PER BOOKS	52,783.	52,783.
		TOTAL
DESCRIPTION	INTEREST INCOME	

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
DIVIDEND INCOME	66,946.	66,946.	66,946.
TOTAL	66,946.	66,946.	66,946.

HQ00GH 507R

ATTACHMENT

- OTHER INCOME PART I FORM 990PF, DESCRIPTION CLASS ACTION LITIGATION NET INCOME

148. EXPENSES PER BOOKS REVENUE AND

INVESTMENT INCOME NET

148.

148.

ADJUSTED NET INCOME

148.

TOTALS

148.

148.

PAGE 18

HQOOGH 507R

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ATTACHMENT	

FEES	
ACCOUNTING	
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PART	
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990PF	
FORM	

CHARITABLE PURPOSES	1,966.	1,966.
ADJUSTED NET INCOME		• 0
NET INVESTMENT INCOME	491.	491.
REVENUE AND EXPENSES PER BOOKS	2,457.	2,457.
DESCRIPTION	TAX PREPARATION & CONSULTATION	TOTALS

PAGE 20

FEES	
PROFESSIONAL	
- OTHER	
- Н	
PART	
990PF,	
FORM	

CHARITABLE <u>PURPOSES</u>	5,378.	53,887.
NET INVESTMENT INCOME	1,344.	8,4/1.
REVENUE AND EXPENSES PER BOOKS	6,722.	42,337.
DESCRIPTION	TRUST FEES INVESTMENT ADVISORY FEE-MARBLE	TOTALS

2

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ATTACHMENT 6

- TAXES PART I FORM 990PF,

PER BOOKS EXPENSES REVENUE AND

INVESTMENT NET

CHARITABLE PURPOSES

FEDERAL INCOME TAX

DESCRIPTION

1,123.

0

0

TOTALS

ATTACHMENT

9

129800

PAGE 22

129800

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ATTACHMENT

- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

EXPENSES PER BOOKS

228.

182.

DESCRIPTION & CORPORATE EXP.

TOTALS

228.

ATTACHMENT 7

217,831.

353, 166.

US OBLIGATIONS TOTAL

US GOV'T & STATE GOV'T OBLIG

353,166.

BEGINNING BOOK VALUE

217,831.

- U.S. AND STATE OBLIGATIONS

PART II

FORM 990PE,

DESCRIPTION

129800

ENDING <u>EMV</u>	217,			
ENDING BOOK VALUE	202,566.			

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ATTACHMENT 9	ENDING ENDING BOOK VALUE EMV	2,600,393.	2,600,393.
STOCK	BEGINNING BOOK VALUE	23,247,719.	23,247,719.
FORM 990PF, PART II - CORPORATE STO	DESCRIPTION	CORPORATE STOCK INVESTMENTS	TOTALS

PAGE 24

- CORPORATE BONDS

FORM 990PF, PART II

ENDING FMV	620,966.			
ENDING BOOK VALUE	600,019.			
BEGINNING BOOK VALUE	702,519.			
DESCRIPTION	CORPORATE BOND INVESTMENTS TOTALS			

- OTHER ASSETS

FORM 990PF, PART II

129800

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ATTACHMENT 11

BEGINNING BOOK VALUE

ENDING BOOK VALUE

ENDING

FOREIGN GOV'T & MUTUAL FUNDS

DESCRIPTION

TOTALS

25,000. 25,000.

102,720.

75,847.

75,847.

102,720.

38-3012223

ATTACHMENT 12

FORM	990PF,	PART	III	_	OTHER	INCREASES	ΙN	NET	WORTH	OR	FUND	BALANCES

DESCRIPTION AMOUNT ROUNDING ADJUSTMENT 1. TOTAL

38-3012223

ATTACHMENT 13

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

DESCRIPTION

NET INCREASE IN SET ASIDES

57,500.

AMOUNT

TOTAL

57,500.

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

HQOOGH 507R

COMPENSATION	23,100.	10,000.	7,500.	7,500.	48,100.
·					
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	SECRETARY	TREASURER	DIRECTOR	GRAND TOTALS
NAME AND ADDRESS	NEIL A. MCLEAN 3603 BREEZY POINT DRIVE	TOM HUGGLER P.O. BOX 250	GLEN MILLER, D.V.M. 3603 BREEZY POINT DRIVE OKEMOS, MI 48864-5923	C. ALLAN STEWART 7805 E. HERBISON RD.	

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

RESTRICTED ONLY BY ARTICLES OF INCORPORATION & BYLAWS--COPIES SUPPLIED ON REQUEST.

NOI
FOUNDAT
MEMORIAL
GLASSEN
JEAN
w
HAL

38-3012223

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

ATTACHMENT 16

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

120,000

TOTAL CONTRIBUTIONS PAID

PAGE 31 ATTACHMENT 16

129800

V 09-6 4

HQO0GH 507R 6/17/2010

FORM 990PE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

CENTRAL CORE PROJECT - ADDITIONAL ALLOCATION

40,000

SECOND THRU FIFTH YEAR OF FUNDING FOR MICHIGAN

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

NRA FOUNDATION LANSING, MI

NONE

N/A

YOUTH HUNTER EDUCATION CHALLENGE PROGRAM AT

\$10,000 PER YEAR

AMOUNT

ATTACHMENT 17

200

SHOOTERS EDUCATION PROGRAM

NONE

REDFORD CHARPER - MICH JAYCEES

N/A

NONE

POTTER PARK ZOO-CITY OF LANSING, MI

N/A

NONE

FLINT & MUSKEGON - BOY SCOUTS OF AMERICA

N/A

6,500 50,000 PROJECT 095M127 & 05M130 100,000 COMMITTMENT TO 4 PMTS @ \$25,000 FOR THE TEDDY ROOSEVELT ENDOWMENT AT MSU

NONE

GLASSEN FELLOWSHIP IN CONSERVATION LEADERSHIP

N/A

NONE

MICHIGAN STATE UNIVERSITY

N/A

FUNDING FOR THREE SCHOLARSHIPS - MSU COLLEGE OF VETERINARY MEDICINE

2,000

PAGE 32 ATTACHMENT 17

129800

6/17/2010 HQ00GH 507R

38-3012223

FORM 990PE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

5,000 4,000 5,000 3,500 4,857 2,000 ATTACHMENT 17 (CONT'D) AMOUNT FISHING & OUTDOOR EDUCATION PROGRAM - 2010/2011 10 MODULE CONSERVATION PROGRAM - YEAR 1 10 MODULE CONSERVATION PROGRAM - YEAR 2 SHOOTING SPORTS EDUCATION PROGRAM PURPOSE OF GRANT OR CONTRIBUTION YOUTH FIREARMS TRAINING PROJECT 2009-10 SCHOOL YEAR PROGRAM RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT NONE NONE NONE NONE NONE NONE N/A N/A N/A N/A N/A RECIPIENT NAME AND ADDRESS CHIEF OKEMOS COUNCIL - BSA MICHIGAN STATE UNIVERSITY WILDFLOWER ASSOICATION MAPLE VALLEY SCHOOLS MUCC YOUTH CAMP MUCC YOUTH CAMP

FORM 990PE, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

COMMITTMENT AT \$50,000, TWO INSTALLMENTS PAID TO BOONE & CROCKETT CLUB CHAIR - FIVE YEAR PURPOSE OF GRANT OR CONTRIBUTION **DECEMBER 31, 2009** 2ND CARGO TRAILER RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT NONE NONE N/A N/A MICHIGAN YOUTH HUNTER EDUC CHALLENGE RECIPIENT NAME AND ADDRESS MICHIGAN STATE UNIVERSITY

8,500

AMOUNT

ATTACHMENT 17 (CONT'D)

150,000

384,857

TOTAL CONTRIBUTIONS APPROVED

PAGE 34 ATTACHMENT 17

129800

V 09-6 4

HQOOGH 507R 6/17/2010

FORM 990-PF, PART XVI-A - ANALYSIS OF PROGRAM SERVICE REVENUE

RELATED OR EXEMPT FUNCTION INCOME ATTACHMENT 18 AMOUNT EXCLUSION CODE 18 148. AMOUNT BUSINESS CLASS ACTION LITIGATION PROCEEDS

TOTALS

DESCRIPTION

148.

PAGE 35

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No 1545-1709

Internal Revenue S	Service	► File a separate application for each return.	1 .	
 If you are f 	iling for a	Automatic 3-Month Extension, complete only Part I and check this box		X
• If you are f Do not comple	filing for ai te Part II u	Additional (Not Automatic) 3-Month Extension, complete only Part II (on parties you have already been granted an automatic 3-month extension on a pre-	ge 2 of this form eviously filed For) m 8868
Part I Auto	matic 3-	Month Extension of Time. Only submit original (no copies needed).	_	
A corporation Part I only		o file Form 990-T and requesting an automatic 6-month extension - check this	box and complet	e ▶ □
All other corp		including 1120-C filers), partnerships, REMICs, and trusts must use Form 7	'004 to reques	t an extension of
Electronic Filing one of the re electronically returns, or a content of the conte	ng <i>(e-file)</i> . turns not if (1) you composite	Generally, you can electronically file Form 8868 if you want a 3-month auged below (6 months for a corporation required to file Form 990-T). Howeven want the additional (not automatic) 3-month extension or (2) you file Forms or consolidated From 990-T. Instead, you must submit the fully completed and the electronic filing of this form, visit www.irs.gov/efile and click on e-file for the state of the state	ver, you canno s 990-BL, 6069 nd signed page 2	t file Form 8868 , or 8870, group 2 (Part II) of Form
Type or	Name of	Exempt Organization	Employer iden	tification number
print	HA:	L & JEAN GLASSEN MEMORIAL FOUNDATION	38-3012	2223
•	Number.	street, and room or suite no. If a P.O. box, see instructions	<u></u>	
File by the due date for		13 BREEZY POINT DRIVE GS10 NASHWAY DRIVE E.		
filing your				
return See instructions		n or post office, state, and ZIP code. For a foreign address, see instructions		
	بهرك	MOS, MI 48864-5923 WEST Bloomfield MI 483	22	
Check type o	of return t	be filed (file a separate application for each return)		
Form 990	0	Form 990-T (corporation)	orm 4720	
Form 990)-BL	Form 990-T (sec 401(a) or 408(a) trust) Fo	orm 5227	
Form 990)-F7		orm 6069	
X Form 990			orm 8870	
10111 990	/- F1	FOIII 1041-A	лн 667U	
If the organ If this is for for the whole one and Ell I reques until	nization don a Group, che Ns of all n arganizatio calendar	pes not have an office or place of business in the United States, check this box. Return, enter the organization's four digit Group Exemption Number (GEN) eck this box. If it is for part of the group, check this box. If it is for part of the group is fo		tension of time
	lax year	beginning, and ending	' <u>_</u>	
2 If this tax	year is fo	or less than 12 months, check reason: Initial return Final return	Change in a	ccounting period
3a If this an	pplication	is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax	less anv	
		dits. See instructions.		a \$ 6,000.
		s for Form 990-PF or 990-T, enter any refundable credits and estimated tax	navments	
•	-	prior year overpayment allowed as a credit	' '	s 8,000.
		tract line 3b from line 3a. Include your payment with this form, or, if require		b \$ 8,000.
		or, if required, by using EFTPS (Electronic Federal Tax Payment Syst	em). See	_
instructio		_ ··· · · · · · · · · · · · · · · · · ·		<u>c \$ 0</u> .
Caution. If you	ı are goin	to make an electronic fund withdrawal with this Form 8868, see Form 8453-E	EO and Form 88	79-EO
for payment in	structions	·		
		perwork Reduction Act Notice, see Instructions.	r	0060 (Day 4,0000)
. J IIVacy A	ot allu ra	por mora modulon not motioe, see manucions.	⊢orn	n 8868 (Rev 4-2009)