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Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

For	caler	ndar year 2009, or tax year begin	ning	-	, and er	ding		
G	Check	all that apply:	return	Initial return of a fo	•	harity	Final retu	rn
			ded return	Address chan	ge		Name change	
	the	IRS Name of foundation					A Employer identification	on number
	label 1erwi	se TIKVAH CHARIT	ואר אואבי	יכיי			39-677700	5
Oti	print					Room/suite	B Telephone number	-
	r typ	MOTO COUNTY	TRUNK Y				920-261-4	469
	Spe	I GIV OF IOWN, STATE, AND ZIP	code				C If exemption application is	pending, check here
		<u> WATERTOWN, WI</u>					D 1. Foreign organizatio	ns, check here
H_(_			kempt private foundation			Foreign organizations r check here and attach	computation
		ction 4947(a)(1) nonexempt char		Other taxable private founda	$\neg \neg \neg \neg$		E If private foundation s	
		arket value of all assets at end of y		ng method: X Cash ther (specify)	L Accru	ıal	under section 507(b)(
-	•\$	Part II, col (c), line 16) R7 3.0		mn (d) must be on cash L	basis)		F If the foundation is in under section 507(b)(a 60-month termination
		Analysis of Revenue and Expe (The total of amounts in columns (b),	nses	(a) Revenue and	(b) Net inv	estment/	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in colu	umn (a))	expenses per books	inco	me	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc.,		25,300.			N/A	
_ Ca	2	Check Interest on savings and temporary	quired to attach Sch B					
	3	cash investments Dividends and interest from secu	irition					
	4 52	Gross rents	iriues					
- 61	1 .	Net rental income or (loss)						
	l .	Net gain or (loss) from sale of assets n	ot on line 10		-			
∑	b	Gross sales price for all assets on line 6a						RECEIVED
e ve	7	Capital gain net income (from Part IV, I	ine 2)			0.		\$0
	8	Net short-term capital gain					9	MAY 2 4 2010 S
Z	9	Income modifications Gross sales less returns						S S
SCANNERSONA	10a	and allowances						OGDEN, UT
٣	1	Gross profit or (loss)						TOPSION OF
W	11	Other income						
	12	Total Add lines 1 through 11		25,300.		0.		
	13	Compensation of officers, directors, tr	ustees, etc	0.		0.		0.
	14	Other employee salaries and wag	ges					
v	15	Pension plans, employee benefit	S					
nses	I I	Legal fees	amum 1	500				
x	b	Accounting fees Other professional fees	STMT 1	500.		0.		0.
ē Ē	17	Interest			<u> </u>	<u>.</u>		
ativ	18	Taxes						<u> </u>
nistr	19	Depreciation and depletion						
Operating and Administrative Expe	20	Occupancy						
1 Ac	21	Travel, conferences, and meeting	gs					
and	22	Printing and publications						
ing	23	Other expenses	STMT 2	50.		0.		0.
erat	24	Total operating and administrat		EEA		0.		^
Ö	25	expenses. Add lines 13 through Contributions, gifts, grants paid	۷۵	550. 12,028.		<u> </u>		12,028.
	26	Total expenses and disburseme	ents.	12,020.				12,020.
	_	Add lines 24 and 25		12,578.		0.		12,028.
	27	Subtract line 26 from line 12:						
	a	Excess of revenue over expenses and	disbursements	12,722.				
	l	Net investment income (if negative				0.		
9235		Adjusted net income (if negative,			<u> </u>		N/A	5 000 05
9235 02-0	2-10	LHA For Privacy Act and Pap	erwork Heduction	Act Notice, see the instruct	tions.			Form 990-PF (2009)
								614

D.	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	t year	
Г	ai (column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value
	1	Cash - non-interest-bearing	74,626.	87,348.	87	,348.
ĺ	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
- 1	6	Receivables due from officers, directors, trustees, and other				•
		disqualified persons				
	7	Other notes and loans receivable				_
	-	Less: allowance for doubtful accounts ▶				
s	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges			<u>-</u>	
As	10a	Investments - U.S. and state government obligations		· · · -		
		Investments - corporate stock				
		Investments - corporate bonds			· - ·- · - · · · · · · · · · · · · · · ·	
		Investments - land, buildings, and equipment basis				
- 1	''					
	12	Less accumulated depreciation Investments - mortgage loans				
			• • •			
	13	Investments - other				
	14	Land, buildings, and equipment: basis				
	4-	Less accumulated depreciation				
	15	Other assets (describe ►)				
	40	7 . 1	74 626	07 240	0.7	240
\dashv	16	Total assets (to be completed by all filers)	74,626.	87,348.	8 /	<u>,348.</u>
		Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
≣		Loans from officers, directors, trustees, and other disqualified persons				
<u>e</u>		Mortgages and other notes payable				
_	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
_ທ		and complete lines 24 through 26 and lines 30 and 31.				
≃ ।		Unrestricted				
ᆵ	25	Temporarily restricted				
<u> </u>	26	Permanently restricted				
Š		Foundations that do not follow SFAS 117, check here				
[]		and complete lines 27 through 31.				
<u></u>	27	Capital stock, trust principal, or current funds	0.	0.		
Š	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
ĕ	29	Retained earnings, accumulated income, endowment, or other funds	74,626.	87,348.		
<u>ē</u>	30	Total net assets or fund balances	74,626.	87,348.		
ᆜ	31_	Total liabilities and net assets/fund balances	74,626.	87,348.		
P:	art	Analysis of Changes in Net Assets or Fund Ba	alances			
				 		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30			
		t agree with end-of-year figure reported on prior year's return)		1	74	626.
2 E	nter	amount from Part I, line 27a		2	12	722.
3 (Other	increases not included in line 2 (itemize)	<u>-</u>	3		0.
4 /	Add I	ines 1, 2, and 3		4	87	348.
5 [Decre	eases not included in line 2 (itemize)	<u> </u>	5		0.
6 1	otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	87	348.
•	1	The state of the s	1711,000		Form 000-P	

Part IV	Capital Gains	and Lo	sses for Tax on In	vestment	Income							
			nd(s) of property sold (e.g. or common stock, 200 shs		_	(b) I	low a Purd Don	cquired chase ation		acquired lay, yr.)	(d) Date s (mo., day,	
1a												
b	NO:	NE			. <u> </u>							
<u> </u>												
<u>d</u>						<u> </u>						
<u>e</u>	<u> </u>										ļ	
(e) (Gross sales price	(f) [epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus		
<u>a</u>			···································									
<u>b</u>												
<u>c</u>												
<u>d</u>						-						
Comple	ota only for accate chowin	ia asin'in a	column (h) and owned by	he foundation	on 12/31/60	-			1 Cours (C	\al_ (b) asia		
Оотпріс	ite only for assets showin									Col. (h) gain not less thai		
(i) F.N	M.V. as of 12/31/69	(,	j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any				Losses	(from col. (h))	
a											<u></u>	
<u>b</u>												
<u>C</u>					<u> </u>							
d				×								
е								1				
2 Capital g	ain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2					
3 Net shor	t-term capital gain or (los	s) as defir	ned in sections 1222(5) an	d (6):								
lf gaın, a	ilso enter in Part I, line 8,			` ,)						
If (loss),	enter -0- in Part I, line 8		1: 40.40(-) (D . (·	Щ	3					
			ection 4940(e) for					Tent inc	ome			
(For optional	al use by domestic private	foundation	ns subject to the section 4	1940(a) tax on	net investment in	come	!.)					
If section 49	940(d)(2) applies, leave th	ns nart hla	ınk									
		·										_
			tax on the distributable am			lods					Yes 🖸	∑ No
			section 4940(e). Do not co								-	
1 Cillei tii	(a)	each colui	nn for each year; see instru	ictions before	making any entire						(d)	
Colondor	Base periód years	20.10)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchan		use assets	İ	Distrib	oùtion ratio rided by col. (c	
Calcilual	year (or tax year beginnii 2008	ng iii)		5,719.				9,872		(60% (6) (1)		<u>4674</u>
	2007			$\frac{3,719.}{1,560.}$				5,872				4975
	2006			8,961.				8,896			1.00	
	2005			7,675.				4,556	:		1.68	
	2004			2,239.				2,760				1232
	2001	·		<u> </u>					1			
2 Total of	line 1, column (d)								2		4.062	2780
	• •	5-vear bas	e period - divide the total c	on line 2 by 5.	or by the number	of ve	ars					
-	dation has been in existei	-	· ·	• /	·	•			3		.81	<u> 2556</u>
4 Cotos the	and value of paneharitab		ets for 2009 from Part X, I	line E							70 '	772.
4 CHIEFUIE	e net value of noncharitad	ne-use ass	ets for 2009 from Part X, i	illie 5					4			1 1 2 •
5 Multiply	line 4 by line 3								5	<u> </u>	64,8	<u>319.</u>
6 Enter 1%	6 of net investment incom	ne (1% of !	Part I, line 27b)						6			0.
7 Add line:	s 5 and 6								7		64,8	<u>319.</u>
8 Enter au	alifying distributions fron	n Part Yli	line 4						8			028.
If line 8 i	is equal to or greater than	-	eck the box in Part VI, line	1b, and comp	lete that part usin	ga 1º	% tax	rate.	<u> </u>	<u>.</u>		<u> </u>
See the l	Part VI instructions.											

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_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see i	nstrı	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b	1	ļ			0.
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	1			0.
3	Add lines 1 and 2	3	_			0.
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-	5	<u> </u>			0.
6	Credits/Payments:			-		
а	2009 estimated tax payments and 2008 overpayment credited to 2009					
	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		<u> </u>	Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or				
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
_	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
2	managers. • \$ 0 .			١ .		.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.			2		X
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	-				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	1		3		х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b	-	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-1	,	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	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	WI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	_X_	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10_		X

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Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		\mathbf{X}_{-}
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A				
14	· · · · · · · · · · · · · · · · · · ·	no.▶ <u>920-26</u>	1-4	469	
	Located at ► N8499 COUNTY TRUNK Y, WATERTOWN, WI	ZIP+4 ▶53			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				\Box
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	15		<i>/ .</i>	
-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		ĺ	Yes	No
12	During the year did the foundation (either directly or indirectly):			.03	
- 14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	TES NU			
	a disqualified person?	Yes X No			
	· · ·	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes LX No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	□., [₹].,			
	for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"				
	If the foundation agreed to make a grant to or to employ the official for a period after	–			
	termination of government service, if terminating within 90 days.)	Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	•-			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶□			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ed			
	before the first day of the tax year beginning in 2009?		10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation)	ation			
	defined in section 4942(j)(3) or 4942(j)(5)):			. 1	
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) began to be a second of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) began to be a second of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) began to be a second of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) began to be a second of tax year 2009.	ginning			
	before 2009?	Yes X No			
	If "Yes," list the years >				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to inc	orrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and	attach			
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	Yes X No			
ь	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified personal forms.				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)				
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sched	•			
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	,	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pu	urpose that			

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		·	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	/ -		
section 53.4945 or in a current notice regarding disaster assistance (see instru	· ·		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			<u> </u>		
expenditure responsibility for the grant?		1/A	s L No		
If "Yes," attach the statement required by Regulations section 53 494					į
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		i
a personal benefit contract?	one and boards and and	Y(S LAL NO	er	v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonai denetit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870	halter transaction?		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If yes, did the foundation receive any proceeds or have any net income attribut		۲۰ لسما		7b	
- Information About Officers Discotors Touch		nagers Highly		70	
Part VIII Paid Employees, and Contractors	ees, i oundation me	inagers, riigin	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.		•		
-	(b) Title, and average	(c) Compensation	(d) Contributions to	(е	Expense ount, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acc	ount, other lowances
BRUCE J. LOEB	TRUSTEE				
N8499 COUNTY TRUNK Y					
WATERTOWN, WI 53094	0.00	0.	0.		0.
		<u> </u>		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	T .	\ Evnesse
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc) Expense ount, other
	devoted to position	(0, 1111, 1111)	compensation	al	lowances
NONE					
				<u> </u>	
				1	
				┼	
		 		├	
		-		├-	
Total number of other ampleyees and over \$50,000	<u> </u>	J	<u> </u>	l	0
Total number of other employees paid over \$50,000					

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statinumber of organizations and other beneficiaries served, conferences convened, research papers pro-	istical information such as the oduced, etc.	Expenses
1N/A	· · · · · · · · · · · · · · · · · · ·	
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of N/A	n lines 1 and 2.	Amount
11/11		
2		
All other program-related investments. See instructions.		

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	instructions.)
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	0.
b	Average of monthly cash balances	1b	80,987.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	80,987.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	80,987.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,215.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	79,772.
6	Minimum investment return Enter 5% of line 5	6	3,989.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	3,989.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,989.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,989.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,989.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	12,028.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,028.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	12,028.
	Note: The amount on line 6 will be used in Port V column (b) in cubesquent years when coloulating whether the foundation	aughtian for the	contino

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				3,989.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 2, 101.				
b From 2005 7,447.				
c From 2006 8,516.				
d From 2007 10,261.				
e From 2008 3,225.	24			
f Total of lines 3a through e	31,550.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 12,028.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		:
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			2 000
d Applied to 2009 distributable amount	0 020			3,989.
e Remaining amount distributed out of corpus	8,039.			0.
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	39,589.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	2 101			
not applied on line 5 or line 7	2,101.			
9 Excess distributions carryover to 2010	27 400			
Subtract lines 7 and 8 from line 6a	37,488.			
10 Analysis of line 9: a Excess from 2005 7,447.				
a Excess from 2005 7, 447. b Excess from 2006 8, 516.				
c Excess from 2007 10, 261.				
d Excess from 2008 3, 225.				
e Excess from 2009 8, 039.				
0,033.			<u> </u>	Form 990-PF (2009)

a If the foundation has received a ruling or determination foundation, and the ruling is effective for 2009, entered by the Check box to indicate whether the foundation is a private and a comparison of the adjusted net income from Part I or the minimum investment return from Part X for each year listed by 85% of line 2a comparison of the comparison of	the date of the rate operating rear	ruling	▶	N/A 4942(j)(3) or 49 (d) 2006	42(j)(5) (e) Total
b Check box to indicate whether the foundation is a prival and a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities	rate operating rear	foundation described	Prior 3 years		
a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities	rear		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities		(b) 2008		(d) 2006	(e) Total
investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities	009	(b) 2008	(c) 2007	(d) 2006	(e) Total
each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities					
b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities				1	
c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities		*	Į.	 	
d Amounts included in line 2c not used directly for active conduct of exempt activities					
used directly for active conduct of exempt activities	I		<u> </u>		·
exempt activities					
· · · · · · · · · · · · · · · · · · ·					
e 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: a "Assets" alternative test - enter;					
(1) Value of all assets		- -			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "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)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					•
an exempt organization					
(4) Gross investment income			· · · · ·		-
Part XV Supplementary Information (if the foundation	n had \$5,000 or mo	re in assets
at any time during the year-s Information Regarding Foundation Managers		structions.)			
a List any managers of the foundation who have contributed more than \$5,0			tributions received by the	e foundation before the clos	se of any tax
RUCE J. LOEB					
b List any managers of the foundation who own 10% or		stock of a corporation	(or an equally large port	ion of the ownership of a pa	artnership or
other entity) of which the foundation has a 10% or gr	eater interest.				
ONE					
Information Regarding Contribution, Grant, C	ift, Loan, S	cholarship, etc., F	rograms:		
Check here if the foundation only makes couthe foundation makes gifts, grants, etc. (see instruction)					
a The name, address, and telephone number of the per-			e addressed:		
8499 COUNTRY TRUNK Y, WAT	ERTOWN	, WI 5309	4		
b The form in which applications should be submitted a	ind informatio	n and materials they	should include:		
PPLICATIONS SHOULD SPECIF c Any submission deadlines:		•		ARITABLE ORG	ANIZATIO

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3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual.		-	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
SEE ATTACHED SCHEDULE				
Total	-t	·	▶ 3a	12,028.
b Approved for future payment				
NONE				
			;	
Total	<u> </u>		▶ 3b	0.
rotat			▶ 3b (_ U.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		ionolon modilio
a	_				
b					
<u> </u>		<u></u>	-		
d					
e	_			-	
	_				
g Fees and contracts from government agencies	-		_		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
<u> </u>					
C					
C					
cd		0.		0.	0.
c d e Subtotal. Add columns (b), (d), and (e)		0.			0.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.			
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	3.)			13	0.
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
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c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which in	s.) ss to the Acco	omplishment of Ex		13 ot Purposes	

Form 990-		AH CHARITABLE TI			<u>6777005</u>		ge 13
Part X			and Transactions	and Relationships With No	ncharitable	•	
4 Did+	Exempt Organ					Yes	No
		olectly engage in any of the following: (3) organizations) or in section 5		ion described in section 501(c) of		162	140
		lation to a noncharitable exempt o		Inzations?			
(1)	· -	dation to a noncharitable exempt of	ryanization of.		10/11		х
	Other assets				1a(1)		X
	r transactions:				1a(2)	-	
	Sales of assets to a noncharita	ahla evemnt organization			1b(1)		X
		oncharitable exempt organization			1b(2)		X
	Rental of facilities, equipment,	, •			1b(3)		X
	Reimbursement arrangements				1b(4)		X X X X
	Loans or loan guarantees				1b(5)		X
	_	embership or fundraising solicitati	ions		1b(6)		X
		ailing lists, other assets, or paid er			10		X
			· · ·	lways show the fair market value of the g		ets.	
				ue in any transaction or sharing arrange		,	
		other assets, or services received					
(a) Line no	(b) Amount involved .	(c) Name of noncharitab		(d) Description of transfers, transactio	ns, and sharing an	rangeme	nts
		N/A					
							-
					-		
					•		
			<u>=</u> :				
ın se	ction 501(c) of the Code (othe	ctly affiliated with, or related to, on er than section 501(c)(3)) or in sec		nizations described	Yes	X] No
U II YE	s," complete the following sch (a) Name of org		(b) Type of organization	(c) Description of re	lationshin		
	N/A	gumzuton	(b) Type of organization	(0) 20301131101101101	ationomp		
	N/A		 	 			
			 	 			
			 	 			
				 	-		
Under	penalties of perjury, I declere that I i	have examined this return, including acc	ompanying schedules and stater	ments, and to the best of my knowledge and be	lef, it is true, corre	ct,	
	and complete Declaration of preparer (other tran taxpayer or fiduciary) is based on all information of which preparer has any knowledge						
	15-17-70 \ Trustre						
2 S	ignature of officer or trustee		Date	Title			
¥	Preparer's	1 N III 1		Date Check if	Preparer's identify	/ing num	ber
Sign Here	signature	CK A. WIRTH		05/11/10 self- employed ► X			
~ ロミス							

Form **990-PF** (2009)

(262)522-8227

EIN 🕨

Phone no.

ıf self-employed). address, and ZIP code

Firm's name (or yours

CHORTEK & GOTTSCHALK, LLP

23217 W. STONERIDGE DR. WAUKESHA, WI 53188

FORM 990-PF	ACCOUNTING FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	500.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	500.	0.		0.	
=					
FORM 990-PF	OTHER E	XPENSES	S	FATEMENT 2	
FORM 990-PF DESCRIPTION	OTHER E. (A) EXPENSES PER BOOKS	XPENSES (B) NET INVEST- MENT INCOME	(C)	(D) CHARITABLE	
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	

TIKVAH CHARITABLE TRUST

EIN: 39-6777005 FORM 990-PF PAGE 10 PART XV

CONTRIBUTIONS MADE DURING 2009

	RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP	FDN STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION	AMOU	<u>NT</u>
1	American Cancer Society P.O. Box 22718 Oklahoma City, OK 73123	NONE	Public Charity	Operating Expense	\$ 75	5.00
2	American Heart Association P.O. Box 78851 Phoenix, AZ 85062-8851	NONE	Public Charity	Operating Expense	10	00.00
3	American Steep Apnea Association 6856 Eastern Avenue, NW, Suite 203 Washington, DC 20012	NONE	Public Charity	Operating Expense	75	5.00
4	Fort Memorial Hospital Foundation 611 Sherman Avenue East Fort Atkinson, WI 53538	NONE	Public Charity	Operating Expenses	5	60.00
5	Friends of WHA-TV Inc. P.O. Box 7929 Madison, WI 53707-7929	NONE	Public Charity	Operating Expenses	5	00.00
6	Mayo Foundation P.O. Box 450 Albert Lea, MN 56007-9849	NONE	Non-profit Hospital	Operating Expenses	10	0.00
7	National Arbor Day Foundation 211 N. 12th Street Linclon, NE 68508-1497	NONE	Public Charity	Operating Expenses	64	5.00
8	USA Olympic Committee P.O. Box 7010 Albert Lea, MN 56007-8010	NONE	Public Charity	Operating Expenses	20	0.00
9	Watertown Area Cancer Drive 5432 NW 25th St/ P.O. Box 8908 Topeka, KS 66608	NONE	Public Charity	Operating Expenses	18	8.00
10	Congregation Emanu-El B'ne Jeshurum 2020 W. Brown Deer Road River Hills, WI 53217	NONE	Public Charity ·	Operating Expenses	1,300	.00
	Children's Hospital of Wisconsin Mail Station 3050 P.O. Box 1997 Milwaukee, WI 53201	NONE	Public Charity	Operating Expense	100.	.00
	Daughters of WM J Boylan Scholarship 10018 Gatewood Dr. Brecksville, OH 44141	NONE	Public Charity	Operating Expense	250.	.00
	Counseling Center of Watertown 415 South 8th Street Watertown, WI 53094	NONE	Public Charity	Operating Expenses	100	.00
	Zoological Society 10005 W. Bluemound Road Milwaukee, WI 53226	NONE	Public Charity	Operating Expenses	40.	.00

. 1 :	5 Alzheimer's Disease Research 22512 Gateway Center Drive P.O. Box 1950 Clarksburg, MD 20871-1950	NONE	Public Charity	Operating Expense	75.00
16	Avalon Therapeutic Equestrian Center N 9368 Green Valley Road Watertown, WI 53094	NONE	Public Charity	Operating Expense	50.00
17	7 Consumer Reports Donor Service P.O. Box 1945 Marion, OH 43306-8045	NONE	Public Charity	Operating Expense	72.00
18	3 Milwaukee Public Museum 800 West Wells Street Milwaukee, WI 53233-1478	NONE	Public Charity	Operating Expense	150.00
19	NA'A MAT 5900 N. Port Washington Rd, Suite 110 Milwaukee, WI 53217	NONE	Public Charity	Operating Expense	410.00
20	Rock River Rescue N946 Cty M Watertown, WI 53098	NONE	Public Charity	Operating Expense	175.00
21	Africare House 440 R Street NW Washington, DC 20001	NONE	Public Charity	Operating Expense	500.00
22	Tomorrow's Hope 147 W. Rockwell Jefferson, WI 53549	NONE	Public Charity	Operating Expense	500.00
23	Vetems of Foreign Wars P.O. Box 8958 Topeka, KS 6608-8958	NONE	Public Charity	Operating Expense	15.00
24	Sports Gift, Inc. 32545 B Golden Lantern #478 Dana Point, CA 92629	NONE	Public Charity	Operating Expense	500.00
25	Milwaukee Jewish Federation 1360 N. Prospect Avenue Milwaukee, WI 53202-3094	NONE	Public Charity	Operating Expense	500.00
27	Channel 10/36 Friends - MPTV (MPTV Friends, Inc.) 700 W. State Street Milwaukee, WI 53201-1997	NONE	Public Charity	Operating Expense	50.00
28	Special Olympics Wisconsin 5900 Monona Drive, Ste 301 Madison, WI 53716	NONE	Public Charity	Operating Expense	200.00
	Habitat for Humanity P.O. Box 471 Beaver Dam, WI 53916	NONE	Public Charity	Operating Expense	50.00
	Watertown Humane Society 1515 S. Ninth Street Watertown, WI 53094	NONE	Public Chanty	Operating Expense	250.00
	Educational Foundation of Watertwon 111 Dodge Street Watertown, WI 53094	NONE	Public Charity	Operating Expense	500.00
	Rainbow Hospice Care 147 W. Rockwell Ave Jefferson, WI 53549	NONE	Public Charity	Operating Expense	500.00

33	3 SPCA International P O. Box 1230 Washington, D.C. 20013-1230	NONE	Public Charity	Operating Expense	10.00
34	Opportunities Inc. 925 Jefferson Street Fort Atkinson, WI 53538	NONE	Public Charity	Operating Expense	600.00
35	Woodland Hospice 2597 South Merdian Rd. Mt. Pleasant, MI 48858	NONE	Public Charity	Operating Expense	50.00
36	Watertown Fire Department 106 Jones Street Watertown, WI 53094	NONE	Public Charity	Operating Expense	225.00
37	W.U.S.D. (Watertown Unified School District) 111 Dodge St Watertown WI 53094	NONE	Public Chanty	Operating Expense	525.00
38	Watertown Competitive Swimming c/o Wttn High School 825 Endeavor Dr Watertown WI 53098	NONE	Public Charity	Operating Expense	3,000.00
39	Wisconsin Jewish Chronicle 1360 N Prospect Street Milwaukee WI 53202	NONE	Public Chanty	Operating Expense	100.00
40	National Cancer Coalition 333 Fayetteville St Ste 1500 Raleigh NC 27601	NONE	Public Charity	Operating Expense	18.00
41	National Veterans Services Fund PO Box 2465 Darien CT 06820-0465	NONE	Public Charity	Operating Expense	10 00
42	Temple Menorah 9363 N 76th St Milwaukee WI 53223	NONE	Public Charity	Operating Expense	100.00
43	V Foundation for Cancer Research 106 Towerview Ct Cary NC 27513	NONE	Public Charity	Operating Expense	500.00
	Child's Play 123 NW 36th St #210 Seattle WA 98107	NONE	Public Charity	Operating Expense	50.00
				Total Donations	\$12,028.00

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

• If v	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ 🕱			
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)					
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868					
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)				
A con	poration required to file Form 990-T and requesting an automatic 6-month extension check this box and com	plete			
	only	. ▶∟			
to file	ner corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an Income tax returns				
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if (1) you want the additional isolidated Form 990-T. Instead,			
Type	or Name of Exempt Organization	Employer identification number			
print	MINIAH CHADIMADIR MDHOM	39-6777005			
File by I		39-0177003			
due dat	N8499 COUNTY TRINK Y				
return S	566				
Chec	k type of return to be filed (file a separate application for each return).				
	Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 88	27 69			
Tet If ti	BRUCE J. LOEB, TRUSTEE be books are in the care of N8499 COUNTY TRUNK Y - WATERTOWN, WI 53 be books are in the care of N8499 COUNTY TRUNK Y - WATERTOWN, WI 53 be phone No. Paragraphy FAX No. Paragraph	s is for the whole group, check this			
box 🌬	If it is for part of the group, check this box ightharpoonup and attach a list with the names and EINs of all it	nembers the extension will cover			
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti AUGUST 15, 2010 , to file the exempt organization return for the organization named all is for the organization's return for: X calendar year 2009 or , and ending, and ending				
2	If this tax year is for less than 12 months, check reason Initial return Final return	Change in accounting period			
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$ 0.			
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated				
	tax payments made. Include any prior year overpayment allowed as a credit.	3b \$ 0.			
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	į.			
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$ 0.			
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	8879-EO for payment instructions.			

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