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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 rer

OMB No 1545-0052 2009

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_			year 2009,	or ta		<u>ear b</u> tial re		ng	- 1 1	nitial return									\neg	Final ret	<u>-</u> -	
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		wise, int	Number and	stre	et (or	PO	box num	iber if	mail is not d	elivered to stree	et address))	Room/s	uite	B	Telep	hone n	iumber (s	ee pa	age 10 of the in	istructions)	
	or type. 222 SOUTH NINTH STREET								2000					,,	10	. 271	0.05	^				
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1	s	ection 4	947(a)(1) no	nexe	mpt	charit				er taxable p					F	If pri	vate 1	foundati	on st	tatus was ten	minated	
ı			t value of all				<u> j_ A</u>	_	_	ethod 🔼 C	ash	Acc	rual		-)(A), check h		•
			m Part II, co					_] Ot	her (spec	olfy)					F	If the	e four	ndation i	ıs ın	a 60-month t	erminatio	n
_	16)	▶ \$	2,1	46,	073	3.	(Pa	art I,	column (c	i) must be o	n cash b	asıs)				unde	er sec	tion 507((b)(1)	(B), check h	ere . 🕨	<u> </u>
F	art		sis of Reve						(a) Rev	venue and	(b) M	let inve	stment		(c)	Adjus	hats	net		(d) Disb	urseme aritable	
		may n	f amounts in c ot necessarily	equi	al the	e amo	unts in ´		èxpe	nses per	(5, 1)	incom			(-, /	inco					poses	C .
_		colum	n (a) (see pag	je 11	of th	e insti	ructions))	b	ooks	<u> </u>			1						(cash b		ıly)
	1	Contribut	ions, gifts, grants,	etc , r	eceive	d (attacl	h scheduli required	e) .		98,770	 			ļ					_			
	2	Check					requirea		<u> </u>		 			-					+			
	3		on savings and	-	-			F		87,070			7 000	-					∔	7.00		
	4	Divider	ids and intere	est fro	om s	ecuriti	es	}		87,070	1	8	7,089	1					-	ATCH		
	5 a	Gross r	ents					$\cdot \cdot \mid$						-					+			
	b	Net ren	al income or (lo	ss) _						-547,022	<u> </u>								+-		=	
ne n			or (loss) from ales price for all							547,022	1			 					+			
Revenue			n line 6a				86,5	88.			-											
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_	8		ort-term capit								 						_		+			
	9 10 a		modification		• •		• • •	}			 			-					+			
		and allo	wances · · ·	٠٠٢							 			┼					╬			
			st of goods sold								 			+			_		╅			
			profit or (loss)							<u> </u>	 			 					+-			
			ncome (attac							361,182	 	8	7,089	+					+			
_			Add lines 1 th							0	1		7,000	╁					╁	···		
	13	•	sation of office			-	•	• • }			1		RE	7	715	7⊏	n		+			
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ű ø			nting fees (att								+	163		+				8	+			
Administrative Expenses		•	professional fo				•				+		OG		14	11	<u>~~~</u>	7) 0-2- 1	+-			
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and	21		conferences,							,	1			+					+			
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Operating	24		perating and				•			597				1								
ဝီ			es 13 through							276,149				+					+		276	,149
			utions, gifts,							276,746				+					+			,149
_			enses and disbur		_	<u>dd lıne</u>	s 24 and	1 25		210,140	+			+					+			,
			ct line 26 fror					ļ		637,928	}			1								
			revenue over ex							031,320	1	ρ	7,089	+					+			
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For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $9E1410\ 2\ 000$

ATCH 3



Б	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End of yea	<u> </u>
L	a L	amounts only (See instructions)	(a) Book Value) Fair Market Value
	1,	Cash - non-interest-bearing	734.	421.	421.
	2	Savings and temporary cash investments	-26,587.	83,320.	83,320.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
	•	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			· · · · · · · · · · · · · · · · · · ·
	0	· · · · · · · · · · · · · · · · · · ·			
	_	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ğ		Investments - U S and state government obligations (attach schedule)		0.051.051	
	b	Investments - corporate stock (attach schedule) ATCH 5 .	3,080,900.	2,354,951.	2,062,332.
	11 C	Investments - corporate bonds (attach schedule)			
		(attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule) Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)		1	
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	3,055,047.	2,438,692.	2,146,073.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	-		
ā	21	Mortgages and other notes payable (attach schedule)			
:=	22	Other liabilities (describe			
		Office Habilities (describe P			
	23	Total liabilities (add lines 17 through 22)		İ	
*		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
če	24	Unrestricted	<u> </u>		
lan	25	Temporarily restricted			
Ba	26	Permanently restricted			
2	25 26 27	Foundations that do not follow SFAS 117,			
Ξ.		check here and complete lines 27 through 31. ▶ 🗓			
0	27	Capital stock, trust principal, or current funds			
ş	28 29 30	Paid-in or capital surplus, or land, bldg , and equipment fund			
SSe	29	Retained earnings, accumulated income, endowment, or other funds	3,055,047.	2,438,692.	
۲	30	Total net assets or fund balances (see page 17 of the			
ĕ	•		3,055,047.	2,438,692.	
	31	Instructions) Total liabilities and net assets/fund balances (see page 17			
	٠.	() - P-9-	3,055,047.	2,438,692.	
	art II	of the instructions)		2,30,002.	
				ograp with	
		I net assets or fund balances at beginning of year - Part II,			3,055,047.
		of-year-figure-reported on prior year's return)			-637,928.
2	∟nte	r amount from Part I, line 27a er increases not included in line 2 (itemize) ► ATTACHI		2	
3	Othe	er increases not included in line 2 (itemize) - ATTACHI	MENT 6	3	21,573.
4	Add	lines 1, 2, and 3			2,438,692.
		reases not included in line 2 (itemize) ▶		5	
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	2,438,692.
					- 000 DE (0000)

Part IV Capital Gains	and Losses for Tax on Inv	estment Income			
	d describe the kind(s) of property sold ((b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE			D-DOMAIION		
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
a					
b					
С					
d					
e					
Complete only for assets s	howing 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		(k), but not less t Losses (from co	han -0-) or
a					
b					
С					
d					
е					
2 Capital gain net income or	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	-	547,022.	
	n or (loss) as defined in sections 12				
If gain, also enter in Part I,	line 8, column (c) (see pages 13	and 17 of the instructions)			
If (loss), enter -0- in Part I,	line 8	<u> </u>	3		
Part V Qualification Ur	nder Section 4940(e) for Redu	uced Tax on Net Investment Inc	ome		
	·	outable amount of any year in the b	ase perio	d? 🗀	Yes X No
		, see page 18 of the instructions be	oforo mak	ing any entries	
1 Enter the appropriate ame	· · · · · · · · · · · · · · · · · · ·	·	поге так	ing any entries (d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
2008	524,750.	2,704,355.		(col (b) divided by	0.194039
2007	234,552.	3,436,608.	-		0.068251
2006	159,047.	3,002,283.			0.052975
2005	10,330.	734,410.			0.014066
2004	11,476.	268,026.			0.042817
2 Total of line 1, column (d)			2		0.372148
	for the 5-year base period - divide	the total on line 2 by 5 or by the	-		
	dation has been in existence if less		3		0.074430
4 Enter the net value of non	charitable-use assets for 2009 fro		4	1,	792,936.
5 Multiply line 4 by line 3.		5 133,448.			
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		871.
7 Add lines 5 and 6			7	<u></u>	134,319.
8 Enter qualifying distribution If line 8 is equal to or gre	ns from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	276,149. crate See the
Part VI instructions on pag	e 18				990-PF (2009)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne ins	truction	ons)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here						
	Qate 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		8	371.			
	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 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			371. 0.			
4							
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			371.			
6	Credits/Payments						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
þ	Exempt foreign organizations-tax withheld at source 6b 0.						
С	Tax paid with application for extension of time to file (Form 8868) 6c 871.						
d	Backup withholding erroneously withheld		c	7 1			
7	Total credits and payments Add lines 6a through 6d			371.			
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						
11 Par	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11 t VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
14	participate or intervene in any political campaign?	1 a		X			
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	- 1 4					
-	of the instructions for definition)?	1 b		Х			
	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		Х			
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶\$(2) On foundation managers ▶\$						
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			
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b	Х	Х			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_					
	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		х				
_	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? If "Yes," complete Part II, col (c), and Part XV	_7					
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \blacktriangleright MN,						
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	х				
9	Is the foundation claiming status as a private operating foundation within the meaning of section_4942(j)(3) or	91)					
_	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			

Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Employ	/ees,
3 Five highest-paid independent contractors for professional services (see page 23	of the instructions), If none,	enter "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		NONE
		· · · · · · · · · · · · · · · · · · ·
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the number	
of organizations and other beneficianes served, conferences convened, research papers produced, etc		Expenses
1 THE FOUNDATION DID NOT HAVE ANY DIRECT ACTIVE CONDUCT	r of	
CHARITABLE ACTIVITIES. THE FOUNDATION DONATES FUNDS	TO	
OTHER CHARITABLE ORGANIZATIONS.		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 23 of the ins	structions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a		Amount
1 NONE		
`		
2 NONE		
All other program-related investments. See page 24 of the instructions		
3 NONE		
Total. Add lines 1 through 3		
Team read model medging to the team read		·——

Pa	Part X Minimum Investment Return (All domestic foundations must complete this part, see page 24 of the instructions.)	Foreign foundat	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	<u> 1a </u>	1,818,171.
b	b Average of monthly cash balances	1b	2,069.
C	c Fair market value of all other assets (see page 24 of the instructions)	<u> 1c </u>	0.
d	d Total (add lines 1a, b, and c)	1d	1,820,240.
е	e Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,820,240.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 2	5	
	of the instructions)	4	27,304.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line	4 5	1,792,936.
6	Minimum investment return. Enter 5% of line 5	6	89,647.
Pa	Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5)	5) private operating	
	foundations and certain foreign organizations check here and do not complet	e this part)	
1	Minimum investment return from Part X, line 6	1	89,647.
2 a	a Tax on investment income for 2009 from Part VI, line 5	871.	
b	b Income tax for 2009 (This does not include the tax from Part VI) 2b	}	
C	Add lines 2a and 2b	2c	871.
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	3	88,776.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	88,776.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	88,776.
Ps	Part XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	276,149.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	0.
b	b Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		276,149.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	871.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	275,278.
	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	ating whether the fo	oundation

Forn	orm 990-PF (2009) 41-1788155 Page 9							
Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)					
		(a)	(b)	(c)	(d)			
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009			
••	line 7		· -		88,776.			
2	Undistributed income, if any, as of the end of 2009							
_	· · · · · · · · · · · · · · · · · · ·							
	Enter amount for 2008 only				 			
					 			
3	Excess distributions carryover, if any, to 2009							
	From 2004							
	From 2005							
С	110111 2000							
d	From 2007							
		500 407						
f	Total of lines 3a through e	528,407.		· <u> </u>				
4	Qualifying distributions for 2009 from Part XII,							
	line 4 ▶ \$ 276,149.							
а	Applied to 2008, but not more than line 2a			·				
b	Applied to undistributed income of prior years (Election	1						
	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				88,776.			
	Remaining amount distributed out of corpus	187,373.						
5	Excess distributions carryover applied to 2009							
	(If an amount appears in column (d), the same							
6	amount must be shown in column (a)) Enter the net total of each column as							
٠	indicated below:							
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	715,780.						
	· · · · · · · · · · · · · · · · · · ·							
D	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							
	· · · · · · · · · · · · · · · · · · ·							
a	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions							
е	Undistributed income for 2008 Subtract line							
	4a from line 2a Taxable amount - see page							
	27 of the instructions				<u> </u>			
f	Undistributed income for 2009 Subtract lines							
	4d and 5 from line 1. This amount must be							
7	distributed in 2010. Amounts treated as distributions out of corpus		·	·				
•	to satisfy requirements imposed by section							
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the							
8	instructions)				*****			
·	applied on line 5 or line 7 (see page 27 of the							
	instructions)							
9	Excess distributions carryover to 2010.	715 700						
	Subtract lines 7 and 8 from line 6a	715,780.			 			
10	Analysis of line 9							
а	Excess from 2005			<u>.</u>				
- b -	Excess from 2006 69, 193.							
С	Excess from 2007 66, 558.							
d	Excess from 2008 392, 656.							
e	Excess from 2009 187, 373.				<u> </u>			

rm 990-PF (2009)			41-3	1788155	Page 1
art XIV Private Operati	ing Foundations	(see page 27 of the	instructions and P	art VII-A, question 9)	NOT APPLICAB
If the foundation has rec					
foundation, and the ruling is					
Check box to indicate wheth	er the foundation is a	private operating found	ation described in section	on 4942()(3) or 4942(j)(5
Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
I or the minimum investment return from Part X for each					
year listed					
85% of line 2a				<u> </u>	
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 test- enter 2/3 of minimum invest- ment 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 secunities loans (section 512(a)(5)),					
or royalties)		-			
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.					
Supplementary at any time du	Information (Cring the vear - se	omplete this part e page 28 of the in	only if the found structions.)	dation had \$5,000	or more in asse
Information Regarding F			· · · · · · · · · · · · · · · · · · ·	-	
List any managers of the before the close of any ta	foundation who h	ave contributed more			
WILLIAM SPEL	L, HARRY SPEI	LL			
List any managers of the ownership of a partnersh					large portion of the
NONE					
Information Regarding C	Contribution, Grant	, Gift, Loan, Schola <mark>r</mark> sh	ip, etc., Programs:		-
Check here ▶ if the unsolicited requests for organizations under other	funds If the foun	dation makes gifts, g	rants, etc (see pag		
The name, address, and ATTACHMEN	•	of the person to whom	n applications should	be addressed	
The form in which applica		omitted and information	on and materials the	y should include	
ATTACHMEN	T 10				
Any submission deadlines					
NONE		·			·
Any restrictions or limit	ations on awards.	such as by geogra	iphical areas, charit	able fields, kinds of	institutions, or other

NONE

Form 990-PF (2009)			41-1788155	Page 11
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Duri	ng the Year or Appi	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
		-		
ATTACHMENT 11				
]			
	<u></u>	L		276,149.
		· · · · · ·	<u></u> 3a. I	2/0,149.
b Approved for future payment				
Total	<u> </u>	·		

Enter gross	s amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e) Related or exempt
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
•	n service revenue					the instructions)
a b						
				-		· · · · · · · · · · · · · · · · · · ·
- <u> </u>						
f						
g Fee	s and contracts from government agencies					
2 Membe	rship dues and assessments					
	on savings and temporary cash investments					
Dividen	ds and interest from securities					102,910
	tal income or (loss) from real estate					
	ot-financed property					
	debt-financed property					
	al income or (loss) from personal property					<u></u> .
	nvestment income		-			-547,022
	(loss) from sales of assets other than inventory					- 547,022
	ome or (loss) from special events					
_	profit or (loss) from sales of inventory					
_	evenue a					
						
e						·
	Il Add columns (b), (d), and (e)					-444,112
	add line 12, columns (b), (d), and (e)		•		13	-444,112
	heet in line 13 instructions on page 28 t					
Line No. ▼	Explain below how each activithe accomplishment of the for page 29 of the instructions) NOT APPLICABLE					
						<u> </u>
						·
	<u></u>					
				· -		·
						
						
						·
				_		
-		-				
	 			_	· · ·	
<u>:</u>						

orm=	990-PF	(2009)					1 1/00133			Pa	ge 13
Pai	t XVII	Information Exempt Orga		Transfers To and	Transacti	ons a	nd Relationships	With	Nonch	narit	able
1	Did th	he organization directly	or indirectly	engage in any of the n section 501(c)(3) orga	following vanizations) o	with an	y other organization of ection 527, relating to	lescribed political		Yes	No
įа	organı Transi	zations? fers from the reporting fo	oundation to a n	oncharitable exempt organ	zation of						
	(1) Ca	ash							1a(1)		<u>X</u>
									1a(2)		<u>X</u>
b		transactions	aritable evenut	organization					15(1)		Х
				organization							X
				ets					1 1		Х
											X
	(5) Lo	oans or loan guarantees							1b(5)		X
				fundraising solicitations .							<u> </u>
		-	-	other assets, or paid employ							
d				"Yes," complete the fol vices given by the rep							
		• .	•	gement, show in colum	-						
	Value	in any transaction of	onaing arran	igament, onow in colum	(4)	10.00	or the goode, earler a	, ,	00.1.00		
(a) l	ine no	(b) Amount involved	(c) Name of	noncharitable exempt organiz	ation	(d) Descr	iption of transfers, transaction	ns, and sha	nng anar	ngemer	nts
_		N/A		 	1	1/A					
	_										
											
				······································				-			
							· -				
											
					-			· ·			
2 a			-	ated with, or related to,		e tax-ex	empt organizations des	cribed in		s X	71 N
h		n 501(c) of the Gode (oth s," complete the following		501(c)(3)) or in section 52	·····	• • • •		• • • •	Ye	s	No
	II TES	(a) Name of organization		(b) Type of orga	nization	i	(c) Descriptio	n of relation	ship		
			·								
								.			
					 	1					
	Under	nenalties of nerrory I decl	are that I have ex	amined this return, including	accompanyin	a schedu	ules and statements, and to	the best	of my kn	owled	ge and
	belief,	it is true, correct, and com	plete Declaration	of preparer (other than taxpa	ayer or flouciar	y) is bas	ed on all information of wh	ich prepare	er has an	y know	vledge
	.		Co	en .	8	15/1	0 NYLSia	lent			
2	Sı	gnature of officer or trustee			D	ate	Title				
Sign Here		-			Date		Check if	Preparer's number (S	identify	ing ture or	1
g	er's aly	Preparer's				_		page 30 of			
Ś	Paid Preparer's Use Only	signature			<u> </u>		EIN N			<u>_</u>	
	Prep Use	Firm's name (or yours if self-employed), address) —				EIN ▶				
		and ZIP code	, -				Phone no				

Phone no

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury

Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization Employer identification number SPELL FAMILY FOUNDATION C/O WILLIAM SPELL 41-1788155 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and П For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ,

or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of Part I Name of organization SPELL FAMILY FOUNDATION C/O WILLIAM SPELL Employer identification number 41-1788155 Part I Contributors (see instructions) (d) (a) (c) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 1 WILLIAM SPELL Person Pavroll 98,770. 4706 WHITE OAKS ROAD Noncash (Complete Part II if there is EDINA, MN 55424 a noncash contribution) (a) (c) (d) (b) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (d) (a) (b) (c) Type of contribution No. Name, address, and ZIP + 4 **Aggregate contributions** Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) __ _ (a) (b) (c) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. Person **Payroll**

(Complete Part II if there is a noncash contribution)

Noncash

Page of of Part II

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization SPELL FAMILY FOUNDATION C/O WILLIAM SPELL

Employer identification number 41-1788155

		_		
Part II	Noncash	Property	(see	instructions)
			,	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MICROCHIP STOCK 3400 SHARES		
		\$\$	12/31/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received

SPELL FAMILY FOUNDATION C/O WILLIAM SPELL 41-178
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

· Kınd of I				ription		P or	Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	P	acquired Gain or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı başıs	\coprod	(loss)	
19,802.		DREMAN CLA	YMORE				VAR -164,692.	06/11/2009
49,734.		BANK OF AM 161,060.	ERICA				VAR -111,326.	08/06/2009
42,604.		TEXTRON 63,183.					VAR -20,579.	08/06/2009
39,618.		COHEN & ST	EERS				VAR -146,447.	08/10/2009
14,678.		ALPINE GLOS	BAL PREMIER				VAR -35,322.	08/24/2009
120,152.		BLACKROCK 188,808.	ENHANCED				VAR -68,656.	12/03/2009
TOTAL GAIN(L	oss)						-547,022.	
								

41-1788155

T FROM SECURITIES
REST FROM
INTERES
: AND
DIVIDENDS
- I
PART
990PF,
FORM

	NET INVESTMENT INCOME	87,070.	87,089.
KOM SECUKIIIES	REVENUE AND EXPENSES PER BOOKS	87,070.	87,070.
FORM SOCKE, FARI I - DIVIDENDS AND INIERES! FROM SECURIILES	DESCRIPTION	DIVIDEND INCOME INTEREST FROM PASS-THROUGH ENTITIES	TOTAL

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

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

Employer identification number

2009

• 5	SPELL FAMILY FOUNDATION C/O W	ILLIAM SPE	LL		41-17881	55	
Note	: Form 5227 filers need to complete only Pai						
Par	t I Short-Term Capital Gains and Los	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							
					<u> </u>		
			<u></u> ,		<u> </u>		
b	Enter the short-term gain or (loss), if any, fr	rom Schedule D	-1, line 1b			1b	
2	Short-term capital gain or (loss) from Form	ıs 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	hips, S corpora	tions, and other	r 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 lir	ne 13,	5	
Par	column (3) on the back	s - Assets Held	More Than O	ne Year			<u> </u>
L CI	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (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)
6a					<u> </u>		
						•	
				-	· - · · ·		
b	Enter the long-term gain or (loss), if any, fro	om Schedule D-	1, line 6b			6 b	-547,022.
7	Long-term capital gain or (loss) from Form	s 2439, 4684, (6252, 6781, ar	nd 8824		7	
8	Net long-term gain or (loss) from partnersh	iips, S corporati	ions, 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 Carryover Worksheet				<i>.</i> [11	(
12	Net long-term gain or (loss). Combine lines column (3) on the back	6 6a through 11	ın column (f)	Enter here and on in	ne 14a,	12	-547,022.

	Jule D (Form 1041) 2009				Page 2
Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this	part.	(see page 5)	or trust's	(3) Total
13	Net short-term gain or (loss)	13			
14	Net long-term gain or (loss):				5.45 000
а	Total for year	14a			-547,022.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
C	28% rate gain	14c			
	Total net gain or (loss). Combine lines 13 and 14a ▶				-547,022.
note to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo Int V, and do not complete Part IV If line 15, column (3), is a net loss, complete F	rm 990 Part IV :	-T, Part I, line 4a) If line and the Capital Loss Can	s 14a and 15, colui vower Worksheet	mn (2), are net gains, go
	t IV Capital Loss Limitation	antive	and the deplace 2003 dan	yord vromance,	as necessary
			4f4		
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F				(3,000)
a Note	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, pag	e i lin	ne 22 (or Form 990-T. lu	ne 34), is a loss, co	omplete the Capital Loss
Сату	over Worksheet on page 7 of the instructions to figure your capital loss carryove	r			mplete the Capital 200
Par	t V Tax Computation Using Maximum Capital Gains Rate	S			
	1041 filers. Complete this part only if both lines 14a and 15 in colu			ount is entered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
	tion: Skip this part and complete the worksheet on page 8 of the instru	ctions	ıf		
	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 ar	e gair	s or qualified divide	nds are include	d in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa				
	er line 14b, col (2) or line 14c, col (2) is more than zero		•	. 0	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17		
18	Enter the smaller of line 14a or 15 in column (2)	., .			
	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19				
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	12			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
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 line	ne 22	27		
				il	
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				
	(see the Schedule Ginstructions in the instructions for Form 1041).			31	
	Add 00 104				
32-	Add-lines-30 and-31				
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate				
2 4	(see the Schedule Ginstructions in the instructions for Form 1041).				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 l	ieie a	114 UTI FUIIII 1041, S	cnequie 34	

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side SPELL FAMILY FOUNDATION C/O WILLIAM SPELL

Employer identification number 41-1788155

Part II Long-Term Capital Gains ar		T		(-) 0//-	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
a DREMAN CLAYMORE		06/11/2009	19,802.	184,494.	-164,692
BANK OF AMERICA		08/06/2009	49,734.	161,060.	-111,326
TEXTRON		08/06/2009	42,604.	63,183.	-20,579
COHEN & STEERS		08/10/2009	39,618.	186,065.	-146,447
ALPINE GLOBAL PREMIER		08/24/2009	14,678.	50,000.	-35,322
BLACKROCK ENHANCED		12/03/2009	120,152.	188,808.	-68,656
					· · · · · · · · · · · · · · · · · · ·
			· 		
				:	
	<u></u>				
				2	
6b Total. Combine the amounts in colum					-547,022

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

EXCISE TAX

508.

TOTALS

508.

FORM 990PF, PART I - OTHER EXPENSES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION
BANK FEES
GENERAL AND ADMINISTRATIVE

41. 48.

TOTALS

89.

41-1788155

ATTACHMENT 5

STOCK	
CORPORATE	
١	
١	
- II	

ENDING <u>FMV</u>	51,070. 82,890. 185,920. 57,525. 82,670. 107,960. 44,605. 112,065. 112,065. 102,640. 48,440. 82,150. 127,420. 127,420. 52,560. 66,693. 27,240. 107,040. 107,040.	
ENDING BOOK VALUE	73,065. 105,520. 194,838. 55,780. 72,967. 143,210. 57,690. 129,600. 129,600. 124,350. 50,000. 85,320. 66,305. 70,902. 38,698. 50,465. 70,902. 38,698. 50,000. 50,000. 79,895. 60,000.	
DESCRIPTION	BANK OF AMERICA CONOCO DOW MICROCHIP PACKAGING CORP 3M WELLS WELLS WELSERHAEUSER BLACKROCK COHEN & STEERS COHEN & STEERS DREMAN/CLAYMORE NUVEEN ROYCE VANGUARD EMERGING MARKETS COLGATE PALMOLIVE COLGATE PALMOLIVE KIMBERIY-CLARK OLIN PROCTER & GAMBLE KIMBERIY-CLARK OLIN PROCTER & GAMBLE TOTAL DYNAMIC ALPINE GLOBAL ALPINE GLO	

DESCRIPTION AMOUNT 21,573. ADJUSTMENT FOR SALE OF CONTRIBUTED STOCK 21,573. TOTAL

FORM 990PF, PART VII-B - SECTION 4942(A)(2) EXPLANATION

N/A

SPELL FAMILY FOUNDATION C/O WILLIAM SPELL

FORM 990PF, PART VIII - LIST OF OFFICERS,	CERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 8
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
HARRY SPELL 5735 LONG BRAKE CIRCLE EDINA, MN 55424	CHMN + CEO	Ö	o	Ċ
ANGELINE SPELL 5735 LONG BRAKE CIRCLE EDINA, MN 55424	SECRETARY			.0
WILLIAM SPELL 4706 WHITE OAKS ROAD EDINA, MN 55424	PRESIDENT	·	.0	
DIANNE SPELL 4706 WHITE OAKS ROAD EDINA, MN 55424	DIRECTOR	.0	.0	
	GRAND TOTALS	0	0	0

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

WILLIAM SPELL 222 SOUTH NINTH STREET, SUITE 2880 MINNEAPOLIS, MN 55402 612-371-9650

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

A LETTER REQUESTING FUNDS SHOULD CONTAIN NATURE OF GIFT AND INFORMATION ON THE ORGANIZATION.

Organization	Address	City	State	diz	Purpose	Class of Activity	Status	2009	2009 Donation
Edina Bible Study Fellowship	19001 Blanco Road	San Antonio	¥	78258	Womens Bible Study	Ministry	501-C-3	w	250.00
Homeward Bound	12805 Hwy 55	Plymouth	NΑ	55441	Healthcare	Healthcare	501-C-3	۰,	350.00
Orthodox Christian Mission Center	P O Box 4319	St Augustine	చ	32085	Mission Ministry	Ministry	501-C-3	⋄	200 00
American Experiment	1024 Plymouth Building	Minneapolis	Z Z	55402	Think Tank	Education	501-C-3	•	750.00
Mayo Foundation	200 First Street SW	Rochester	z Z	52905	Medical Research	Healthcare	501-C-3	⋄	1,000 00
International Orthodox Christian Charities	110 West Road	Baltimore	Δ	21204	Relief group	General Charitable	501-C-3	₩.	1,000 00
University of St Thomas	2115 Summit Ave St Paul	St Paul	Z Z	55105	Nick Dovolis Memorial Scholarship	Education	501-C-3	•^-	1,000 00
Intellectual Takeout	38069 441st Ave Nicollet	Nicollet	Z	56074	Education	Education	501-C-3	\$	1,000.00
Giving WoMN	3915 Golden Valley Rd	Minneapolis	Z Z	55422	Women in Philanthropy	Philanthropy	501-C-3	vs	1,100.00
Orthodox Christian Laity	30 North LaSalle Street	Chicago	=	60602	Orthodox Watchdog Group	Religious	501-C-3	v,	2,000.00
Minnesota Free Market Institute	PO BOX 120449	St Paul	Σ	55112	Taxpayers' Rights	Education	501-C-3	₩.	2,000 00
CCRF- Childrens Cancer Research Fund	4930 West 77th Street	Minneapolis	N N	55435	Childrens Medical Research	Childrens Medical	501-C-3	۰,	00 000'6
Mınnehaha Academy	3100 West River Parkway	Minneapolis	Š	55406	Education	Education	501-C-3	v,	10,000 00
Minneapolis Heart Institute Foundation	920 East 28th Street	Minneapolis	Z Z	55407	Heart Research	Healthcare	501-C-3	۷s	12,500 00
St Katherine Greek Church	7100 Airport Road N	Naples	료	34109	Memorial- J Dovolis	Religious	Tax Exempt Church	•	25,000 00
St Marys Greek Orthodox Church	3450 Irving Ave South	Minneapolis	Z Z	55408	Church	Religious	Tax Exempt Church	45	208,699 00
							TOTAL	\$	276,149.00