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## **Return of Organization Exempt From Income Tax**

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

OMB No 1545 0047

SCANNED JUL 1 2 2010

Inter	nal Reven	ue Service	<u> </u>	► The organizati	on may have to use	a copy of	this return to s	atisfy state repor	ting requirer	nents.	Оре	n to Public	c insp	pection
	For the	2009 calendar y	year, o	r tax year begin	ning		, 20	009, and endi	ng					
В	Check if a	pplicable		С						D Emplo	yer Identii	ication fumb	<b>Der</b>	
	Addr	ess change   Plea	ase use S label	TEMPLE JU	DAH TRUST					42-	-61486	512		
	-	ŭ   0/	r print r type.	PO BOX 18						E Telepi	hone numb	er		
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	H-1	·	tions.									7	00	600
		nded return		ind address of princip					1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		receipts \$		7	680.
	App!	por.ug	a group reti	iates?	Yes	X No								
				As C Above						' attach a lis		ructions)	Yes	∐ No
<u></u>			X 501	(c) (3 ) <del>&lt;</del>	(insert no.)	4	947(a)(1) or	527			-	•		
J	Webs	ite: ► N/A						•	H(c) Group	exemption	number 🟲	·		
K	Form o	f organization	Corpora	ition X Trust	Association	Other >		L Year of Form	ation 197	0 M	State of le	gal domicile	IA	
Pa	rt l	Summary	,		• • •									,
	1 B			anization's miss	sion or most sic	nıfıcant	activities:	THE TRUS	ST PROV	/IDES	FINAN	CIAL SI	UPP	ORT
•		OR TEMPLE			•									
ĕ		30		<del></del>										
Ē	_													
Š	2 C	heck this box	~~~	if the organization	on discontinued	ts ope	rations or di	sposed of mo	re than 25	5% of its	 assets			
Ŏ				bers of the gove							3			5
Ø		-	-	t voting membei				ine 1b)			4			0
₽	5 T	otal number of	employ	yees (Part V, lin	ie 2a)			•			5			0
Activities & Governance	6 T	otal number of	volunte	eers (estimate if	necessary)						6			0
Ă	7a T	otal gross unrel	lated b	usiness revenue	e from Part VIII	, colum	n (C), line 12	2			7a			0.
	bΝ	let unrelated bus	siness	taxable income	from Form 990	)-T, line	34				7b			0.
										Prior Year	r	Curre	nt Ye	ar
_	8 C	ontributions and	d grant	ts (Part VIII, line	e 1h)						501.			618.
ᆰ	1			ue (Part VIII, lin										
Revenue	ľ	•		rt VIII, column (		and 7d)				131,	699.	1	134,	454.
æ				II, column (A), I			and 11e)							
	ı			nes 8 through 11				. line 12)		138,	200.	1	42,	072.
				unts paid (Part				· · · · · · · · · · · · · · · · · · ·						
	l			•			<del></del>							
	15 S	Benefits paid to or for members (Part IX, column (A), line 4)  Salaries, other compensation, employee the fits (Fair (X) column (A), lines 5-10)  a Professional fundraising fees (Part IX, column (A), line TTE)											21	499.
6	15 5												<u>,</u>	<del>1</del> 22.
Expenses							<b>छ</b> ।	•				_		<del></del> -
Š	b⊺	otal fundraising	expen	ises (Pa <b>rk</b> ∯x, co	HAM (Q), Ime	279(i*	이							
ш	<b>17</b> 0	ther expenses (	(Part I)	X, column (A), i	ines 11a-11d, 1	1f-24f)	21	•		33,	770.		78,	233.
	18 T	otal expenses. /	Add Iin	ies 13-17 (must	equal Part IX,	column	(A) line 25)			33,	770.		99,	732.
	<b>19</b> R	evenue less ext	penses	s. Subtract line	18-1 mevi2		1			104,	430.		42,	340.
<b>8</b> 8							<del></del>		Regi	nning of		End o	of Va	
are one	<b>20</b> T	otal assets (Par	rt Y lun	ne 16\						2,827,				594.
Ass		otal liabilities (P		•						2,021,	0.00.1	J, 2	.23,	$\frac{334.}{0.}$
Net Assets or Fund Balancos													122	
		•		nces. Subtract	line 21 from line	e 20			<u> </u>	2,827,	089.]	3,2	223,	<u>594.</u>
Pa	rt II	Signature												
		Under penalties of true, correct and e	perjury,	declare that I have	examined this return	n, includin cer) is bas	g accompanying	schedules and sation of which pre	tatements, a	nd to the bes	stofmykn	owledge and	belief,	ıt ıs
		GUAR	JANA	DAIN ELL	103160.	·		•		-/	12/0	~ .		
Sig	jn		lo C	<del>- 7</del>						<u> </u>	2/2	010		
He	re	Signature of of Dennis		ne		-			D	ate /	•			
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Pre		signature Richard Buchheim									N/	'A		
	rer's	Firm's name (or FOX & BUCHHEIM, PC												
Us		yours if self	<del></del>  .	EIN N/A										
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may	tne iR	o aiscuss this re	eturn w	vith the preparei	r snown above	(see in	structions)					X Yes		Livo

Form	1 990 (2009) TEMPLE JUDAH TRUST	42-61	L4861	.2		Page 2
Par	rt III Statement of Program Service Accomplishments				_	
1	<b>yy</b>					
,	THE TRUST PROVIDES FINANCIAL SUPPORT FOR TEMPLE JUDAH					
2	Did the organization undertake any significant program services during the year which were not listed on the	prior				
	Form 990 or 990-EZ?			Yes	X	No
_	If 'Yes,' describe these new services on Schedule O.				(T)	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	5?		Yes	X	No
4	If 'Yes,' describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by	expenses.	Section	5016	1(3)	
·	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and all expenses, and revenue, if any, for each program service reported.	ocations to	others	, the t	otal	
	expenses, and revenue, it any, for each program service reported.					
_	00.720		^			
48	a (Code) (Expenses \$ 99,732. including grants of \$) (F TRUST FUNDS ARE USED FOR THE SUPPORT OF TEMPLE JUDAH	Revenue	٠			)
		<b>-</b> -				
		- <b></b>				
		- <b></b> -				
41	b (Code: (Code: ) (Expenses \$ including grants of \$ ) (F	Revenue	\$			)
				- <b></b>		
			- <del>-</del>			
	,		<u></u>			
40	(Code: Code: (Code: (Co	Revenue	\$			)
				- <b>-</b> -		
				<del>-</del>		
		<b>-</b> -				
			- <b></b> -			
				<del>-</del>		
40	d Other program services. (Describe in Schedule O.)					
	(Expenses \$ including grants of \$ ) (Revenue \$				)	
4€	e Total program service expenses ► 99,732.					

Form 990 (2009) TEMPLE JUDAH TRUST
Part IV Checklist of Required Schedules

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

Form	990 (2009) TEMPLE JUDAH 1RUS1 42-614861		<u> </u>	'age 4
Par	t IV ' Checklist of Required Schedules (continued)			,
`			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
ď	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I.	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete	27		
28	Schedule L, Part III  Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV	27		Х
	Instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
		268		
r	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule $M$	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		х
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х

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Form 990 (2009)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance		<u>'</u> ,	aye .
· Outstanding to the control of the		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	0		
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b	0		ĺ
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a	0		_
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	_ 3a		х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	_3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b If 'Yes,' enter the name of the foreign country. ►			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_ 5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were no deductible?	6b		_
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	. L		
provided to the payor?	7a		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided? .	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	-	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business			
holdings at any time during the year?	8		_
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?.	9a		
b Did the organization make any distribution to a donor, donor advisor, or related person?	9Ь		
10 Section 501(c)(7) organizations. Enter.			ı
a Initiation fees and capital contributions included on Part VIII, line 12 . 10a		į	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11 Section 501(c)(12) organizations. Enter:		1	
a Gross income from other members or shareholders.	_	-	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

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**b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) TEMPLE JUDAH TRUST Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. **Governing Body and Management** Yes No 1a Enter the number of voting members of the governing body 1 a **b** Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents X 4 since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? 5 X X Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X 7a X 7b **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X a The governing body? 8a 8Ь  $\overline{\mathbf{x}}$ b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a X b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b X 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 See Schedule O 11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a **b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official X 15b **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable X entity during the year? 16a b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt 16b status with respect to such arrangements? Section C. Disclosures List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website

statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► GUARANTY BANK & TRUST COMPANY 302 3RD AVENUE SE CEDAR RAPIDS IA 52403 319-286-6200

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees, and former such persons.

Check this box if the organization did no	t compens	sate ar	ту с	urrei	nt o	fficer,	dıre	ctor, or trustee		
(A)	(B)	(B) (c)						(D)	(E)	(F)
Name and Title	Average		tion (		all t	hat app		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
HAROLD BECKER				-						
Director	0							0.	0.	0.
ROBERT SILBER										
Director	0							0.	0.	0.
DAN SARASIN										
Director	0							0.	0.	0.
WILLIAM GASWAY										
Director	0							0.	0.	0.
HARRIET GASWAY	_							_	_	
Director	0							0.	0.	<u> </u>
GUARANTY BANK & TRUST COMP			3,7					01 400		•
Trustee	0		X					21,499.	0.	0.

Part VII   Section A. Officers, Directors, Trus (A)	(B)	) (c)						(D)	(E)	(F)
Name and Title		Position (check all that a					pply)		Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
						<u> </u>				
							Ļ	01 400		ļ
1 b Total							<u> </u>	21,499.	0.	0
2 Total number of individuals (including but not limited from the organization ► 0	to tnos	e lisi	tea	abov	/e) \ 	wno	rece	eived more than \$	100,000 in reporta	ble compensation
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste I <i>dividual</i>	e, k	ey e	empl	oye	e, o	r hig	nest compensate	d employee	3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	ortable an \$150	com 0,000	pen )? <i>Ii</i>	satio	on a	nd o	othe <i>lete</i>	r compensation fr	om uch	
<ul><li>individual</li><li>5 Did any person listed on line 1a receive or accrue co</li></ul>	mnensa	ation	froi	m. ar	างน	nrel	ated	f organization for	services	4 X
rendered to the organization? If 'Yes,' complete Sch Section B. Independent Contractors	edule J	for s	such	n pei	son					5 X
Complete this table for your five highest compensate compensation from the organization.	ed indep	ende	ent	cont	ract	ors	that	received more th	an \$100,000 of	
(A) Name and business addres:	s							(B Description of		(C) Compensation
2 Total number of independent contractors (including t \$100,000 in compensation from the organization ▶		mite	ed to	tho	se l	ıste	d ab	ove) who receive	d more than	

ra ·	rt VIII] Statement of Revenue	(A)	(B)	(C)	(D)
		Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
5.0	1a Federated campaigns 1a		70101140		312, 313, 31311
ANT	b Membership dues 1b				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	c Fundraising events 1c				
	d Related organizations 1 d			ŕ	
S,E	e Government grants (contributions) 1 e				
S S	€ All other contributions rifts grants and		•		
틜뚩	f All other contributions, gifts, grants, and similar amounts not included above 1f 7, 618.				
ĔĞ	g Noncash contribns included in lns 1a-1f; \$		,		
8≥	h Total. Add lines 1a-1f	7,618.		_	
Ş	Business Code		-		
Ę.	2a				
2	b				
Š	c				
SE	d				
RAM	e	<del></del>			
20	f All other program service revenue				
	Investment income (including dividends, interest and other similar amounts)	147,980.	147,980.		
	4 Income from investment of tax-exempt bond proceeds	147,500.	147,500.		
	5 Royalties				
	(i) Real (ii) Personal				
	6a Gross Rents				
	b Less. rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) . ▶				
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory 553, 082.		_		
	<b>b</b> Less: cost or other basis				
	and sales expenses 566,608.				
	c Gain or (loss) -13, 526.				
	d Net gain or (loss)	-13,526.			-13,526.
NUE	8a Gross income from fundraising events (not including \$				
E	of contributions reported on line 1c).				
OTHER REVEN	See Part IV, line 18 a			· =	
Ŧ	<b>b</b> Less. direct expenses.				
_	c Net income or (loss) from fundraising events		·	<del></del>	
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less. direct expenses. b		<del></del>	···	
	c Net income or (loss) from gaming activities	<del></del>			
	10a Gross sales of inventory, less returns and allowances a				
	<b>b</b> Less. cost of goods sold <b>b</b>				
	c Net income or (loss) from sales of inventory				<del></del>
ļ	Miscellaneous Revenue Business Code				
	11a				
	b				
	d All other revenue				
	e Total. Add lines 11a-11d				<del></del>
	12 Total revenue. See instructions	142,072.	147,980.	0.	-13,526.
	Jan 19191 GO HISH GOID IS		, , , , , , , , ,		10,020.

Page **10** 

Part IX Statement of Functional Expenses

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

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

Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	21,499.	21,499.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages .				<del></del>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes .				
11	Fees for services (non-employees)				
E	Management				<u> </u>
t	Legal .				
C	: Accounting .				
C	<b>I</b> Lobbying				
€	Prof fundraising svcs. See Part IV, In 17				
f	Investment management fees				
ç	Other .				
12	Advertising and promotion				
13	Office expenses .				
14	Information technology .				
15	Royalties				
16	Occupancy				
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
	Insurance.  Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	DISTRIBUTIONS TO TEMPLE JUDAH	78,233.	78,233.		<u></u>
ь					···
c					
d					
е					
	All other expenses				<del></del>
	Total functional expenses. Add lines 1 through 24f	99,732.	99,732.	0.	0.
	Joint costs. Check here ► If following	33,132.	22,,02.		
_ <del>-</del>	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
BAA					Form 990 (2009)

,		(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing .		1	
2	Savings and temporary cash investments .	108,439.	2	181,105
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net .		4	
5	and highest compensated employees. Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1))	<u> </u>		
	and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
S 7 S 8 T 9	Notes and loans receivable, net .		7	
Ĕ   8	Inventories for sale or use		8	
s ∣ 9	Prepaid expenses and deferred charges		9	
10	a Land, buildings, and equipment, cost or other basis.			
	Complete Part VI of Schedule D			
	b Less. accumulated depreciation. 10b		10c	
11	, , , , , , , , , , , , , , , , , , , ,	2,711,343.	11	3,042,489
12		5,000.	12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	2,307.	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,827,089.	16	3,223,594
17	Accounts payable and accrued expenses		17	
18	Grants payable .		18	
19	Deferred revenue		19	
ե   20	Tax-exempt bond liabilities		20	·
A 21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22 	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
<u>i</u>	of Schedule L .		22	
š   23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D .		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
N E	Organizations that follow SFAS 117, check here ▶ and complete lines			
₹	27 through 29 and lines 33 and 34.			
8   27 8   28	Unrestricted net assets		27	
T	Temporarily restricted net assets		28	
s 29	Permanently restricted net assets		29	
₽	Organizations that do not follow SFAS 117, check here ► X and complete			
5 30	lines 30 through 34.			
30	Capital stock or trust principal, or current funds	2,827,089.	30	3,223,594
31	Paid-in or capital surplus, or land, building, and equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
BA 31 32 33 34	Total net assets or fund balances.	2,827,089.	33	3,223,594
	Total liabilities and net assets/fund balances.	2,827,089.	34	3,223,594

Form 990 (2009) TEMPLE JUDAH TRUST	42-6148612	Pa	ige <b>12</b>
Part XI   Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: X Cash Accrual Other			-
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit,		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i consolidated basis, separate basis, or both.	ssued on a		
Separate basis Consolidated basis Both consolidated and separate basis		]	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single		Х
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit		

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Form 990 (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

**Public Charity Status and Public Support** 

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

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

OMB No 1545 0047 2009

Open to Public Inspection

Employer identification number Name of the organization TEMPLE JUDAH TRUST 42-6148612 Part I | Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). X An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 c |X| Type III — Functionally integrated Type III- Other Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) X below, the governing body of the supported organization? 11 g (i) X a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) X Provide the following information about the supported organizations h (v) Did you notify the organization in col (i) of (i) Name of Supported (ii) EIN (iii) Type of organization (iv) Is the (vii) Amount of Support (vi) Is the organization in col (i) organized in the US? Organization (described on lines 1.9 above or IRC section rganization in col your support? governing document? Yes Yes Yes No No No

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

Schedule A (Form 990 or 990-EZ) 2009

Ο.

Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year (a) 2005 (b) 2006 (d) 2008 (e) 2009 (c) 2007 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. **b 10%-facts-and-circumstances test** — **2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions 18

#### Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2005 Calendar year (or fiscal yr beginning in) ► **(b)** 2006 (d) 2008 (e) 2009 (c) 2007 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1. 2, 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in 12 Part IV.) 13 Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)). 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A	(Form	990 or 9	990-EZ)	2009	TEM	PLE .	JUDAH	TRU	ST					42-6	148614	2	Page	∍ 4
Part IV	<b>Supp</b> Part	lemen	17a o	forma	tion. (	Comp Part I	lete th II. line	is pa	rt to pr Provide	ovide anv o	the ex	planation	ons recal	quired rmation	by Par า. See	t II, line instruc	e 10; tions.	_
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## SCHEDULE O (Form 990)

Name of the organization

## **Supplemental Information to Form 990**

OMB No 1545 0047

2009

Open to Public Inspection

Employer identification number

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

Pepartment of the Treasury Internal Revenue Service

Attach to Form 990.

TEMPLE JUDAH TRUST	42-6148612
Form 990, Part VI, Line 11 - Form 990 Review Process	
No review was or will be conducted.	
	· <b></b>
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	· <b></b>
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Schedule 0 (Form 990) 2009		Page 2
Name of the organization	Employer (dentification number 42-6148612	
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