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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

For calendar year 2009.

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

	For Cai	endar year 2009, or tax year beginning	, 2009	, and ending	<u> </u>			
	G Che	eck all that apply 🔲 Initial return 🔛 Initia	al Return of a former pu	ublic charity	☐ Fin	al return		
		Amended return	Address o	:hange 🔲 Name	change			
	Use t	he Name of foundation		A Employer identification number				
	IRS lat	Del THE GEMINI FOUNDATION			43-1821667			
	Otherw prin		delivered to street address)	Room/suite B	Telephone number (see the	instructions)		
	or typ				(314) 275-75	63		
		cific City or town	State	ZIP code C	If exemption application is	pending, check here		
	Instruct	SAINT LOUIS		63141 D	1 Foreign organizations, che	ck here		
	H Ç	heck type of organization X Section 501	(c)(3) exempt private for	oundation	2 Foreign organizations mee	ting the 85% test, check		
		Section 4947(a)(1) nonexempt charitable tru			here and attach computation	اسما		
		form to Death Handress (a) lone 1C)	ounting method 🗶 Ca	ash Accrual	If private foundation status under section 507(b)(1)(A)			
	(1		Other (specify)	F		•		
ı	<u>► \$</u>		column (d) must be on	cash basis)	under section 507(b)(1)(B)), check here		
	Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
		Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable		
		sarily equal the amounts in column (a)				purposes (cash basis only)		
		(see the instructions))				(**************************************		
		1 Contributions, gifts, grants, etc, received (att sch)	105,000.	· · · · · · · · · · · · · · · · · · ·	-			
		2 Ck if the foundn is not req to att Sch B 3 Interest on savings and temporary						
		3 Interest on savings and temporary cash investments						
		4 Dividends and interest from securities		······································				
		5a Gross rents						
		b Net rental income or (loss)						
	R	6a Net gain/(loss) from sale of assets not on line 10						
	E	b Gross sales price for all assets on line 6a						
	Ė	7 Capital gain net income (from Part IV, line 2)			-			
	N U	8 Net short-term capital gain			RECO			
	Ĕ	9 Income modifications 10 a Gross sales less			VEN VEN			
		returns and allowances		104	Au.	17		
		b Less Cost of goods sold			AUG 3 0 2010	k./		
		c Gross profit/(loss) (att sch)		 	2010 /	8/		
		11 Other income (attach schedule)			GDEN. UT			
		`		_	POEN IT É			
		12 Total. Add lines 1 through 11	105,000.		701			
•		13 Compensation of officers, directors, trustees, etc						
		14 Other employee salaries and wages						
		15 Pension plans, employee benefits						
	A D	16 a Legal fees (attach schedule)						
	M	b Accounting fees (attach sch)				ļ		
	ON	c Other prof fees (attach sch)						
	P Ś	17 Interest			<u> </u>			
	RR	18 Taxes (attach schedule)(see instr.) 19 Depreciation (attach				· · · · ·		
2010	A A	sch) and depletion L-19 Stmt	5,816.					
7	Ň	20 Occupancy						
	G E	21 Travel, conferences, and meetings						
\sim	A E	22 Printing and publications						
ہم	D P	23 Other expenses (attach schedule)	4.4	•				
SEP	N S	MISCELLANEOUS OFFICE	11.	0	. 11.	0.		
\bigcirc	Ĕ	24 Total operating and administrative expenses. Add lines 13 through 23	5,827.	o	. 11.	0.		
Ш	3	25 Contributions, gifts, grants paid	99,000.		***	99,000.		
SCANNED		26 Total expenses and disbursements.						
Z.		Add lines 24 and 25	104,827.	0	. 11.	99,000.		
Ķ		27 Subtract line 26 from line 12:	-					
ပ္က		a Excess of revenue over expenses and disbursements	173.					
U &		b Net investment income (if negative, enter -0-)		0		 		
		C Adjusted net income (if negative, enter 0-)			0.	 		
	DAA C	or Privacy Act and Panenyork Poduction Act	Notice continuing	41		Form 000 DF (0000		

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Part	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year	End o	f year
art	<u>"</u>	Datalice Sileets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	11.	6,000.	6,000.
	2	Savings and tempora	ary cash investments	0.	0.	0.
	3	Accounts receivable	▶ 0.			
		Less allowance for o	doubtful accounts 0.	o.	0.	0.
	4	Pledges receivable	▶ 0.			
	İ	Less allowance for o	doubtful accounts • 0.	0.	0.	0.
	5	Grants receivable		0.	0.	0.
	6	Receivables due from offic	cers, directors, trustees, and other			
		disqualified persons (attac	ch schedule) (see the instructions)	0.	0.	0.
	7	Other notes and loans rec	eivable (attach sch)			<u></u>
S		Less allowance for o	doubtful accounts 🛌	0.	0.	0.
Š	8	Inventories for sale of	or use	0.	0.	0.
A S E T	9	Prepaid expenses ar	nd deferred charges	0.	0.	0.
Ś	10:	Investments – US	and state government	_		_
		obligations (attach se		0.	0.	0.
	1	b Investments — corporate	,	0.	0.	0.
	•	c Investments — corporate	bonds (attach schedule)	0.	0.	0.
	11	Investments – land, equipment basis	buildings, and			
		, ,				-
		Less accumulated depreci (attach schedule)	▶ 0.	0.	0.	0.
	12	Investments - morto		0.	0.	0.
	13	Investments - other	(attach schedule)	0.	0.	0.
	14	Land, buildings, and	equipment basis 224,267.			
		Less accumulated depreci (attach schedule)			212,053.	212,185.
		Other assets (descri				
			o, see page 1, item l)	217,880.	218,053.	218,185.
Ļ	17	Accounts payable ar	nd accrued expenses			
Å	18	Grants payable				
В	19	Deferred revenue				
L	20	Loans from officers, direct	tors, trustees, & other disqualified persons			
<u>ĩ</u>	21	Mortgages and other note:	s payable (attach schedule)			
T	22	Other liabilities (desc	cribe •)			
Ë	22	Total liabilities (odd	lines 17 through 22)			1
	23	Total liabilities (add	llow SFAS 117, check here			"
			24 through 26 and lines 30 and 31.	-		
N F E U	24	Unrestricted				,
T N	25	Temporarily restricte				
, D	26	Permanently restrict				
A B S L T		Foundations that do and complete lines 2	not follow SFAS 117, check here <u>× x</u> 27 through 31.			,
ΕĻ	27	Capital stock, trust of	orincipal, or current funds			
5 N	28		or land, building, and equipment fund	217,869.	218,053.	
O E	29	Retained earnings, accumi	ulated income, endowment, or other funds	11.		
ŘŠ	30	Total net assets or f	und balances (see the instructions)	217,880.	218,053.	
	31		net assets/fund balances			
David		(see the instructions	<i></i>	217,880.	218,053.	
Part	111	Analysis of Chan	ges in Net Assets or Fund Balanc	ces		
1	Tota	I net assets or fund ba	lances at beginning of year - Part II, colur	mn (a), line 30 (must agr		017 000
•			d on prior year's return)		1	217,880.
		er amount from Part I,			2	173.
		increases not included in li	ne z (nemize)		<u>3</u>	210 052
4 5		lines 1, 2, and 3 tases not included in line 2 ((Itamiza)		5	218,053.
-				_ Part II. solume (b) Im		210 052
	iota	THEL ASSELS OF TURB DE	alances at end of year (line 4 minus line 5)	— rarcii, column (b), lin	e ou	218,053.

1 a	(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e g , rese; or common stock, 200 shares ML	al estate,	(b) How acc P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
				D — Dolla			
b							
<u>c</u>			· · · · · · · · · · · · · · · · · · ·			-	- <u>-</u>
d				-			
e							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a							
b							
c							
d							
<u> </u>							
		ng gain in column (h) and owned by				(I) Gains (Colu	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			ain minus column (k an -0-) or Losses (fr	
a							
<u>b</u>							
<u>c</u>				i			
<u>d</u>							
<u>е</u>							
	Capital gain net income or (net	_	enter in Part I, line 7 er -0- in Part I, line 7	-	2		
3	Net short-term capital gain or (loss) as defined in sections 1222(5) a	ind (6)				
	ın Part I, line 8	8, column (c) (see the instructions)		-	3		
Par	t V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investm	<u>ent Inco</u>	me		
Was I	tion 4940(d)(2) applies, leave the the foundation liable for the sect s,' the foundation does not qual	·					
1		fy under section 4940(e) Do not con	plete this part	·		Yes	☐ No
<u> </u>			plete this part	·	·s		□ No
<u> </u>		fy under section 4940(e) Do not con	plete this part	any entrie		Yes (d) Distribution umn (b) divided	n ratio
<u>-</u>	Enter the appropriate amount in (a) Base period years Calendar year (or tax year	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in)	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount ii (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004	fy under section 4940(e) Do not come each column for each year, see the	instructions before making (c) Net value of	any entrie		(d) Distribution	n ratio
	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for th	fy under section 4940(e) Do not come each column for each year, see the (b) Adjusted qualifying distributions e 5-year base period – divide the tot	nplete this part Instructions before making (c) Net value of noncharitable-use as:	any entrie	(coli	(d) Distribution	n ratio
2	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	fy under section 4940(e) Do not come each column for each year, see the (b) Adjusted qualifying distributions e 5-year base period — divide the tot has been in existence if less than 5	Instructions before making (c) Net value of noncharitable-use as:	any entrie	2	(d) Distribution	n ratio
2	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	fy under section 4940(e) Do not come each column for each year, see the (b) Adjusted qualifying distributions e 5-year base period – divide the tot	Instructions before making (c) Net value of noncharitable-use as:	any entrie	(coli	(d) Distribution	n ratio
2 3	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation	fy under section 4940(e) Do not come each column for each year, see the (b) Adjusted qualifying distributions e 5-year base period — divide the tot has been in existence if less than 5	Instructions before making (c) Net value of noncharitable-use as:	any entrie	2	(d) Distribution	n ratio
2 3	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation.	e 5-year base period — divide the tot has been in existence if less than 5	Instructions before making (c) Net value of noncharitable-use as:	any entrie	2 3	(d) Distribution	n ratio
2 3 4 5 6	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharic Multiply line 4 by line 3	e 5-year base period — divide the tot has been in existence if less than 5	Instructions before making (c) Net value of noncharitable-use as:	any entrie	2 3 4	(d) Distribution	n ratio
2 3 4 5 6	Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the number of years the foundation Enter the net value of noncharic Multiply line 4 by line 3 Enter 1% of net investment income	rify under section 4940(e) Do not come each column for each year, see the (b) Adjusted qualifying distributions e 5-year base period — divide the tot has been in existence if less than 5 table-use assets for 2009 from Part 2 ome (1% of Part I, line 27b)	Instructions before making (c) Net value of noncharitable-use as:	any entrie	2 3 4 5	(d) Distribution	n ratio

Form	990-PF (2009) THE GEMINI FOUNDATION 4	3-1821667		F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee the instruct	ions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here	-		~	_
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)		N/	A	
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			
	check here ► ☐ 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, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			
6	Credits/Payments				
a	2009 estimated tax pmts and 2008 overpayment credited to 2009 . 6a	0.			
t	Exempt foreign organizations — tax withheld at source 6b	0.			
c	: Tax paid with application for extension of time to file (Form 8868) 6c	0.			
c	Backup withholding erroneously withheld 6d	0.			
7	Total credits and payments Add lines 6a through 6d	7 -	-		Ο.
8	Enter any penalty for underpayment of estimated tax. Check here	8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10			0.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax	▶ 11			
Par	t VII-A Statements Regarding Activities	· · · · · · · · · · · · · · · · · · ·			
1 2	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		х
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 p or distributed by the foundation in connection with the activities	oublished			
	: Did the foundation file Form 1120-POL for this year?		1 c		Х
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation (2) On foundation managers 5 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposes		-		
•	foundation managers	7 011			
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				
2					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	es	3	'	x
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		х
t	o If 'Yes,' has it filed a tax return on Form 990-T for this year?		4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		х
	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 with the state law remain in the governing instrument?	conflict	6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	<u> </u>
	Enter the states to which the foundation reports or with which it is registered (see the instructions)	>			
•	MO - Missouri				
'	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8ь		x
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete the complete in the complete	or 4942(j)(5) ete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their			v	
	and addresses		10	_X_	

Form **990-PF** (2009)

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Par	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	,	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	application?	13	х	
14		ne no. ► (314)	275	-756	 3
	Located at ► 307 CABIN GROVE LANE ST LOUIS MO ZIP + 4				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here				
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		,		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
t	o If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction	ons)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ ∐			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		 1c	1.0	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)				
á	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years ▶ 20, 20, 20				
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(crelating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(crelating to incorrect valuation of assets) to the year's undistributed income?	(a)(2) a)(2) to			
	all years listed, answer 'No' and attach statement — see the instructions) b If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	noro	<u>2b</u>		
•	► 20, 20, 20	iei e			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
ł	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	d	3b		-
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		x
RΔΔ		F	orm 99	n.PF	

Form 990-PF (2009) THE GEMINI FOUNDA			43-182	21667	Page 6
Part VII-B Statements Regarding Activit		i 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur	•				i
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	Yes X	No	1
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	c election (see section a tion drive?	4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	∐ Yes X	No	!
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	anization described ctions)	Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or r animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to qual a current notice regardi	ualify under the exception ng disaster assistance	ons	5b	_:
Organizations relying on a current notice regar	ding disaster assistance	check here	▶ 🗆		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsing the 'Yes,' attach the statement required by Regulation 1.	ibility for the grant?		Yes	No	
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indir	ectly, to pay premiums	Yes X	No .	
b Did the foundation, during the year, pay premit	ums, directly or indirectl	y, on a personal benefit		6b	х
If 'Yes' to 6b, file Form 8870			. — —	.	
7a At any time during the tax year, was the found					
Part VIII Information About Officers, D				7b	
and Contractors	irectors, rrustees,	rounuation manaç	jers, riigiliy raiu L	.iiipioyees,	
1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instru	ıctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
MARY ANN VAN LOKEREN			•		·····
C\O 307 CABIN GROVE LANE	TRUSTEE				
ST LOUIS MO 63141	1.00	0.	0.		0.
KRISTI KREY					
C\O 307 CABIN GROVE LANE	TRUSTEE				
ST LOUIS MO 63141	1.00	0.	0.		0.
					
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions). If none, ente	er 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
NONE					
0					
0					
0					
0					
Total number of other employees paid over \$50,000	·		>		None
BAA		07/06/09		Form 990 -	

	43-182166	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services — (see 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 X-A- Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1		
2		
3		
4		
PartilX-B Summary of Program-Related Investments (see instructions)		
		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	<u>:</u>	Amount
2		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3	•	
BAA	Fo	rm 990-PF (2009)

Pair X Minimum Investment Return (All domestic foundations must complete this see instructions.)	s part. Foreign fou	ındatıons,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpose a Average monthly fair market value of securities	es 1 a	0.
b Average of monthly cash balances	1b	500.
c Fair market value of all other assets (see instructions)	1c	0.
d Total (add lines 1a, b, and c)	1 d	500.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	10	300.
(attach detailed explanation)		
,	2	
2 Acquisition indebtedness applicable to line 1 assets	3	F00
3 Subtract line 2 from line 1d	3	500.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	8.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	492.
6 Minimum investment return. Enter 5% of line 5	6	25.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ► ☐ and do not comple		ndations
1 Minimum investment return from Part X, line 6	1 1	25.
2a Tax on investment income for 2009 from Part VI, line 5	0.	
b Income tax for 2009. (This does not include the tax from Part VI.)	0.	
,		•
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3 4	25.
4 Recoveries of amounts treated as qualifying distributions	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0.
5 Add lines 3 and 4	5	25.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	25.
Part·XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	99,000.
b Program-related investments — total from Part IX-B	1 b	·
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpose	es 2	0.
3 Amounts set aside for specific charitable projects that satisfy the	18.74	
a Suitability test (prior IRS approval required)	3a	0.
b Cash distribution test (attach the required schedule)	3Ь	0.
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, lin	 	99,000.
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 instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	99,000.
, , , ,		
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 found	lation

BAA Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7		 		25.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			1.	
b Total for prior years 20, 20, 20				<u> </u>
3 Excess distributions carryover, if any, to 2009				
a From 2004 0. b From 2005 0.				
b From 2005 0. c From 2006 0.				
d From 2007 234,289.				
e From 2008 70,000.				
f Total of lines 3a through e	304,289.			
4 Qualifying distributions for 2009 from Part	331,1337			
XII, line 4 ► \$ 99,000.				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)	,			
c Treated as distributions out of corpus				
(Election required – see instructions) d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	99,000.			
5 Excess distributions carryover applied to 2009	3370001			
(If an amount appears in column (d), the		<u> </u>		
same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	403,289.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable		_		
amount – see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a Taxable amount — see instructions			1.	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2010				25.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)				4
8 Excess distributions carryover from 2004 not				
applied on line 5 or line 7 (see instructions)	0.	<u> </u>		
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	403,289.			
10 Analysis of line 9				
a Excess from 2005 0.				
b Excess from 2006 0 .				
c Excess from 2007 234,289.				
d Excess from 2008 70,000.				
e Excess from 2009 99,000.		L		

orm 990-PF (2009) THE GEMINI FOUND.		tions and Dort	VII A guartian C	43-182166		
Part XIV Private Operating Foundation 1 a If the foundation has received a ruling or de					N/A	
is effective for 2009, enter the date of the r	uling	inat it is a private of	perating foundation,	and the ruling		
b Check box to indicate whether the foundation	on is a private oper	ating foundation de	scribed in section	4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net Income from Part I or the minimum (a) 2009 (b) 2009 (c) 2007 (d) 2006						
investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total	
each year listed b 85% of line 2a			1			
c Qualifying distributions from Part XII,						
line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon.						
a 'Assets' alternative test — enter						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test - enter						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section						
512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Part XV Supplementary Information	(Complete this	part only if the	organization ha	nd \$5,000 or moi	re in	
assets at any time during th Information Regarding Foundation Manag		istructions.)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
a List any managers of the foundation who have	ave contributed mo	re than 2% of the to	otal contributions rec	eived by the foundat	ion before the	
close of any tax year (but only if they have	contributed more t	han \$5,000) (See s	section 507(d)(2))			
MARY ANN VAN LOKEREN						
b List any managers of the foundation who o	wn 10% or more of	the stock of a corp	oration (or an equal)	y large portion of the	e ownership of	
a partnership or other entity) of which the f	oundation has a 10	% or greater interes	st	,		
N/A						
2 Information Regarding Contribution, Gran	t, Gift, Loan, Schol	arship, etc, Prograr	ms:		<u> </u>	
Check here X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected char	itable organizations			
a The name, address, and telephone number	of the person to w	hom applications st	hould be addressed			
ANNA POLIZZI-KELLER	·					
307 CABIN GROVE LANE						
SAINT LOUIS	MO 6314	<u>-</u>	14) 275-7563			
b The form in which applications should be s NO REQUIRED FORM	ubmitted and inforr	nation and material	s they should include			
c Any submission deadlines						
NONE						
d Any restrictions or limitations on awards, s	uch as by geograph	hical areas, charitat	ole fields, kinds of in	stitutions, or other fa	ctors	
NONE						
						

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient						
a Paid during the year CROSS VILLAGE RUG WORKS P O BOX 197 CROSS VILLAGE MI 4972	NONE	501(C) 3	UNRESTRICTED CHARITABLE	99,000.				
Total		•	► 3a	99,000.				
b Approved for future payment Total			▶ 31					

BAA

Form 990-PF (2009)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelate	ed business income	Exclude	d by section 512, 513, or 514		
1	Program service	revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a							
t							
C					ļ		
c				· · · · · · · · · · · · · · · · · · ·			···
e					ļ		
f							
ç	Fees and contrac	ets from government agencies					
2	Membership dues	s and assessments		·			·
3	Interest on savings an	d temporary cash investments					
4	Dividends and inf	terest from securities					
5	Net rental income	e or (loss) from real estate					
a	Debt-financed pro	operty					
t	Not debt-financed	d property					
6	Net rental income or ((loss) from personal property					
7	Other investment				 		
8	• •	iles of assets other than inventory					
9	· · · · · · · · · · · · · · · · · · ·	ss) from special events					
10	Gross profit or (lo	oss) from sales of inventory			ļ		
11	Other revenue						
ā				· · · · · · · · · · · · · · · · · · ·	ļ		·
t							
C							
C							
e							
		lumns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·			
		2, columns (b), (d), and (e)				13	
(See	worksheet in the i	instructions for line 13 to verify cal	culations)				
Par	·	tionship of Activities to the		<u> </u>			
Lin	e No. Explain be accomplish	elow how each activity for which inc hment of the foundation's exempt p	come is repo ourposes (oth	rted in column (e) of Pa her than by providing fu	art XVI-A nds for s	contributed importantly such purposes) (See the	to the instructions)
						· · · · · · · · · · · · · · · · · · ·	
				 			
							
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				···			·

TEEA0502 07/06/09

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

_	 	Excilipt organi	24110113								
	descri	e organization directly obed in section 501(c) obed to political organizati	f the Code (oth	gage in any of the follow ner than section 501(c)(3	ving with a 3) organiza	ny othe itions) (er organization or in section 52	7,		Yes	No
				noncharitable exempt of	organizatio	n of					
	(1) C			·	_				1 a (1)	`	X
	(2) 0	ther assets							1a (2)		X
	b Other	transactions.									
	(1) S	ales of assets to a nonc	haritable exer	npt organization					16(1)		х
(2) Purchases of assets from a noncharitable exempt organization									1b (2)		X
		ental of facilities, equip		, -					1b (3)		x
	(4) R	eimbursement arrangen	nents						1 b (4)		X
	(5) Lo	oans or loan guarantees	5						1 b (5)		x
	(6) P	erformance of services	or membership	o or fundraising solicitati	ons				1b (6)		X
	c Sharii	ng of facilities, equipme	nt, mailing list	s, other assets, or paid	employees	,			1c		
	the ac	ods, other assets, or se	ervices aiven b	omplete the following so by the reporting foundation ow in column (d) the val	on If the fo	oundati	on received les	s than fair mark	et value in	of	
_(6) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organiz	ation	(d)	Description of tran	sfers, transactions,	and sharing arran	gement	S
_											<u>·</u>
_								.			
_											
_											
_											
_	· · · · · · · · · · · · · · · · · · ·										
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_											
_	 					-					
					+		*****				
_					+		, -,				
				ted with, or related to, oner than section 501(c)(3				tions	Yes	x	No
_	b If 'Yes	s,' complete the following	ng schedule				·				
_		(a) Name of organization	on	(b) Type of orga	nization		(0) Description of	relationship		
_											
_											
_									-		
_				<u> </u>							
	Under pena complete (Declaration of preparer (other ti	have examined the	is return, including accompanyir uciary) is based on all informati	ng schedules a on of which pr	reparer h	as any knowledge		, (e, correc	ct, and
S	^	manto	reven				3-24-10	<u>► 7100</u>	don	<u> </u>	
G	Signa	ature of officer or trustee		 		Date		Title			
HERE	Paid Pre-	Preparer's signature	2			Date	94/0	Check if self-employed	Preparer's Identify (See Signature in	ing num the inst	ber rs)
Ë	parer's		INANCIAL	!				EIN ►			
	Use Only	yours if self along 307	CABIN GRO	VE LANE							
_		address and	r LOUIS		MC	63	141	Phone no ► (314) 275	<u>-75</u> 6	3
В	AA								Form 99	0-PF ((2009)

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2009

Name of the organization		Employer identification number
THE GEMINI FOUNDATION		43-1821667
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tre 527 political organization	eated as a private foundation
Form 990-PF	 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated 501(c)(3) taxable private foundation 	d as a private foundation
Check if your organization is covered by Note: Only a section 501(c)(7), (8), or (1)	the General Rule or a Special Rule . 0) organization can check boxes for both the General Ru	le and a Special Rule. See instructions
General Rule — X For an organization filing Form 990, contributor (Complete Parts I and II	990-EZ, or 990-PF that received, during the year, \$5,000)	or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and receive	filing Form 990 or 990-EZ, that met the 33-1/3% support red from any one contributor, during the year, a contributine 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	test of the regulations under sections on of the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) or aggregate contributions of more than prevention of cruelty to children or all	organization filing Form 990 or 990-EZ, that received from \$1,000 for use <i>exclusively</i> for religious, charitable, scientimals. Complete Parts I, II, and III	n any one contributor, during the year, httfic, literary, or educational purposes, or the
this box is checked, enter here the to	organization filing Form 990 or 990-EZ, that received from eligious, charitable, etc, purposes, but these contribution otal contributions that were received during the year for a parts unless the General Rule applies to this organizatio	s did not aggregate to more than \$1,000 lf n <i>exclusively</i> religious, charitable, etc,
religious, charitable, etc, contribution	ns of \$5,000 or more during the year.	► \$
990-PF) but it must answer 'No' on Part	ered by the General Rule and/or the Special Rules does n IV, line 2 of their Form 990, or check the box on line H of the filing requirements of Schedule B (Form 990, 990-EZ,	f its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork R for Form 990, 990EZ, or 990-PF.	eduction Act Notice, see the Instructions S	chedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of org	anization	Empl	oyer identification number
THE GI	EMINI FOUNDATION	43-	1821667
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MARY ANN VAN LOKEREN C\O 307 CABIN GROVE LANE	\$105,000	(Complete Part II if there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

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

Page 1

of_ **1**

of Part I

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545 0172

2009

Attachment Sequence No 67

43-1821667

Name(s) shown on return

THE GEMINI FOUNDATION

Identifying number

_									
For	m 990-PF page 1								
Par		pense Certain In In y listed property,	Property Under Sec complete Part V before	tion 179 you complete Pa	rt I				
1	Maximum amount See the		1	\$250,000.					
2	Total cost of section 179 p		2						
3	Threshold cost of section 1		3	\$800,000.					
4	Reduction in limitation Su	btract line 3 from l	ine 2 If zero or less, ent	er -0-				4	
5	Dollar limitation for tax yea separately, see instruction	ar Subtract line 4 t s	from line 1 If zero or les	s, enter -0- If m	narried fil	ing		5	
6	(a)	Description of property		(b) Cost (business	use only)	(c) E	ected cos	t	
				1					
				<u> </u>					
	Listed property Enter the				7				4
8	Total elected cost of section), lines 6 and 7				8	
9	Tentative deduction Enter			-0				9	
10	Carryover of disallowed de		-		ا مصالحم ا	- (aaa .aat	>	10	-
11	Business income limitation Section 179 expense dedu		•	•		(see msi	(5)	11	
	Carryover of disallowed de				▶ 13		-	12	
	: Do not use Part II or Part				- 1 13				
Par			ce and Other Depre		مان مان هم			/C	
		. "	•					(See	instructions)
14	Special depreciation allow tax year (see instructions)		property (other than liste	d property) place	ed in ser	vice during	the	14	
15	Property subject to section 168(f)(1) election								
16_	Other depreciation (includi	ng ACRS)						16	
Pai	t III MACRS Depre	ciation (Do not in	nclude listed property) (See instructions)	ı				
			Section	n A					
17									
17	MACRS deductions for ass	sets placed in servi	ice in tax years beginnin	g before 2009				17	5,816.
	If you are electing to group	any assets place			or more		- □	17	5,816.
	If you are electing to group asset accounts, check here	o any assets placed	d in service during the ta	x year into one		- 1			
	If you are electing to group asset accounts, check here	o any assets placed		x year into one		ral Depred		Syste	
18	If you are electing to group asset accounts, check here. Section E	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
18	If you are electing to group asset accounts, check here. Section E (a) Classification of property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
18 	If you are electing to group asset accounts, check here Section E (a) Classification of property a 3-year property 5-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
18 	If you are electing to group asset accounts, check here section E (a) Classification of property a 3-year property 5-year property 7-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
18 19a	If you are electing to group asset accounts, check here section E (a) Classification of property a 3-year property 5-year property 7-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
19 i	If you are electing to group asset accounts, check here section E (a) Classification of property a 3-year property 5-year property 7-year property 110-year property 15-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	x year into one o	the Gene	ral Depred	ciation (f)	Syste	m (g) Depreciation
19a	If you are electing to group asset accounts, check here section E (a) Classification of property a 3-year property 5-year property d 10-year property a 15-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	Tax Year Using t (d) Recovery period	the Gene	ral Depred	(f) Method	Syste	m (g) Depreciation
19;	If you are electing to group asset accounts, check here section E (a) Classification of property 5-year property 7-year property 10-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	Tax Year Using to (d) Recovery period	the Gene (e Convei	ral Deprec	(f) Method	Syste	m (g) Depreciation
19;	If you are electing to group asset accounts, check here section E (a) Classification of property 5-year property 10-year property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	Tax Year Using (d) Recovery period 25 yrs 27.5 yrs	the Gene (e Convei	ral Depred	S/L	Syste	m (g) Depreciation
193 193 193 193 193 193 193 193 193 193	If you are electing to group asset accounts, check here section E (a) Classification of property a 3-year property 5-year property d 10-year property e 15-year property 120-year property g 25-year property n Residential rental property	any assets placed B — Assets Placed (b) Month and year placed	in Service During 2009 (C) Basis for depreciation (business/investment use	25 yrs 27.5 yrs	the Gene (e Convei	ral Depred	S/L S/L S/L	Syste	m (g) Depreciation
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Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete *only* 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

	columns	(a) through (c)	of Section A,	all of Sec	tion B, a	and Sec	tion C if	арр	licable			, , ,				
	Sectio	n A — Deprecia	tion and Othe	er Informa	tion (Ca	ution: 5	See the l				_			mobiles		
24 8	a Do you have eviden	ce to support the bu	isiness/investme	nt use claim	ed?		Yes	\perp	No 2	4b If 'Y	es,' is the	evidence	written?		Yes	No
Ту	(a) rpe of property (list vehicles first)	(b) Date placed in service	(C) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) or deprecta ess/investri ise only)	ation nent	Red	(f) covery eriod	Met	g) hod/ ention	Depre	(h) eciation luction	Ele secti	(i) ected on 179 cost
25	Special depreci	ation allowance	for qualified fied business	listed propuse (see	perty pla	ced in s	service c	luring	g the t	ax yea	r and	25				
26	Property used r															
											ļ					
													_		 	
27	Property used 5		qualified bus	iness use	,	L			L		J					
						ļ			<u> </u>		ļ			_	4	
20	Add amounts in	column (h) lin	os 25 through	27 Ento	, hara an	d on he	o 21 n	200 1	<u></u>		_L	28			-	
	Add amounts in	• • •	-				ie 21, pa	aye i	ı			20		29	+	
	Add amounts in	COIGHTT (1); TITLE	ZO LINCI NO	Section			on Use	of \	/ehicle	es						
	plete this section		•	proprietor	, partner	, or othe	er 'more	thar	1 5% c	wner,		•	-	•		cles
to yo	our employees, fi	rst answer the o	questions in S	Section C t	o see if	you me	et an ex	cepti	on to	comple	ting the	s sectioi	n for the	ose vehi	cles	
30	Total business/during the year commuting mile	(do not include		1 '	a) icle 1		b) icle 2	ļ ,	(c) Vehicle	e 3	(d Vehic	·	Vehi	e) cle 5	(1 Vehi	
31	Total commuting m	•	he year	<u> </u>				<u> </u>								
32						•										
33	33 Total miles driven during the year Add lines 30 through 32															
				Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty	e available for p hours?	ersonal use													<u></u>
35	Was the vehicle than 5% owner	e used primarily or related pers	by a more													
36	ls another vehic personal use?															
Λ nc	wer these question		C – Question		-					_					l mara t	hon
	owners or related			ан ехсері	ion to co	inhiemi	y Secur	,,,,	ioi vei	iicies i	iseu by	епрюу	ees wii	areno	i more t	lall
37	Do you maintain by your employ		y statement t	hat prohib	its all pe	ersonal	use of v	ehicl	es, ind	luding	commu	iting,			Yes	No
38	Do you maintaii employees? Se	n a written police the instruction	y statement t	hat prohib	its perso	nal use e officei	of vehi	cles, tors.	excep	t com	nuting, ore own	by your				
39	Do you treat all			•	•			· - ,								
40	Do you provide vehicles, and re	more than five	vehicles to you	our employ 1?	ees, obt	aın ınfo	rmation	from	ı your	emplo	yees ab	out the	use of t	he		
41	Do you meet the Note: If your ar											es				
Pa	rt VI Amorti		`````													
		(a) cription of costs		Date ar	(b) nortization egins		(c) Amortizat amount			Cod sect	ie	Amor	(e) tization iod or entage		(f) mortizatio or this yea	
42	Amortization of	costs that begi	ns during you	ır 2009 tax	year (se	ee instri	uctions)							L		
						_1										
43		f costs that beg	-		-	oro ło e	200-4						43			
44	LOTAL AGG amo	ounts in column	(I) See the	<u>irisir</u> uction	is for Wile	ere to te	-boir				_		44	L		

Form 990-PF, Line 19 **Allocated Depreciation**

Description	Date Acquire	Cost or Basis	Prior Yr Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
BUILDING	06/01/07	224267	6398	SL	39.00	5816		

Total

(Rev June 2008)

Department of the Treasury Internal Revenue Service

Taxpayer name(s) and address

Power of Attorney and Declaration of Representative

► Type or print. ► See the separate instructions.

Social security number(s)

Partille Power of Attorney Caution: Form 2848 will not be honored for any purpose other than representation before the IRS

Taxpayer information. Taxpayer(s) must sign and date this form on page 2, line 9

_	ONIB NO	1545	·0150
	For IRS	Use	Only

	Received by
	Name
1	Telephone

Function

Employer identification number

Date

THE GEMINI FOUNDATION			_			
			43-1821667			
C\O 307 CABIN GROVE LANE			Plan number (if applicable)			
		Daytime telephone number	1			
SAINT LOUIS, MO 63141		(314) 275-7563	<u> </u>			
hereby appoint(s) the following representative(s) as 2 Representative(s) must sign and date this form	2 . ,	CAF No	19295			
Name and address		4005 - 10205 k				
ANNA POLIZZI-KELLER		- 1	(314) 275-7563			
307 CABIN GROVE LANE			.) _ 275 - 7258			
SAINT LOUIS, MO 63141	. 	Check if new Address	Telephone No Fax No.			
Name and address		CAF No				
		Telephone No _				
		Fax No				
		Check if new. Address	Telephone No Fax No			
Name and address		CAF No				
		Telephone No				
		Fax No				
to represent the taxpayer(s) before the Internal Reve		Check if new Address	Telephone No Fax No			
Type of Tax (Income, Employment, Excise, etc) or Civil Penalty (see the instructions for line 3)		orm Number 941, 720, etc)	Year(s) or Period(s) (see the instructions for line 3)			
INCOME	990 PF		2008, 2009			
			<u> </u>			
4 Specific use not recorded on Centralized Author CAF, check this box. See the instructions for	norization File (CAF). If the or Line 4. Specific Uses No	power of attorney is for a spec t Recorded on CAF	ific use not recorded			
5 Acts authorized. The representatives are author that I (we) can perform with respect to the tax or other documents. The authority does not increpresentative or add additional representative returns or return information to a third party. S	matters described on line 3 dude the power to receive rest. The power to sign certain	3, for example, the authority to effort the checks (see line 6 below) a returns, or the power to execute the control of the	sign any agreements, consents, the power to substitute another			
Exceptions. An unenrolled return preparer can situations See Unenrolled Return Preparer in in section 10 3(d) of Treasury Department Circ taxpayers to the extent provided in section 10.3 most cases, the student practitioner's (levels k another practitioner)	the instructions An enrolle ular No. 230 (Circular 230) 3(e) of Circular 230 See th and I) authority is limited (ed actuary may only represent to the control of the	axpayers to the extent provided diministrator may only represent ons on tax matters partners. In clice under the supervision of			
List any specific additions or deletions to the a						
6 Receipt of refund checks. If you want to autho	rize a representative name	d on line 2 to receive, BUT NO	T TO ENDORSE OR CASH, refund			

checks, initial here

refund check(s)

Name of representative to receive

and list the name of that representative below

Form 2848 (Rev 6-2008) THE GEMINI FOU

43-1821667

Page 2

7	Notices and comprepresentative list	munications. Original nated on line 2	otices	and other wri	tten communica	itions will be sent to	you and a copy to	the first		
	a If you also wan	t the second representa	tive lis	sted to receive	e a copy of notic	es and communicat	ions, check this b	ox	▶ □	
	b If you do not wa	ant any notices or comm	nunica	tions sent to y	your representa	tive(s), check this bo	ox		▶ 🗍	
8	of attorney on file you do not w ant t	tion of prior power(s) o with the Internal Reven o revoke a prior power	ue Sei of atto	rvice for the s rney, check h	ame tax matter ere	s and years or perio	ds covered by this	arlier power(s) document If	▶ □	_
	YOU MUST ATTA	CH A COPY OF ANY P	OWER	OF ATTORN	EY YOU WANT	TO REMAIN IN EFF	ECT.			_
9	otherwise, see th or trustee on beh	payer(s). If a tax matter e instructions. If signed alf of the taxpayer, I ce D AND DATED, THIS P	by a c rtify tha	orporate offic at I have the a	er, partner, gua authority to exe	irdian, tax matters p cute this form on bel	artner, executor, r	eceiver, admir	ested, histrator,	
	12234	culla-lance				5/24/				
	-4-C-1-8	vix o juga	<u></u>			0101/10	TRUS			_
		Signatur	е			Date		Title (if applicat	ole)	
	MARY ANN	VAN LOKEENR			-,,	~	FOUNDATION			
		Print Name			Pin Number	Print name	e of taxpayer from line	I if other than indivi	idual	
										_
		Signatur	е			Date		Title (if applicat	ole)	
		Print Name			Pin Number					_
<u>Par</u>	tilla Declaration	on of Representativ	/e							_
Cauti (leve	ion: Students with Is k and l), see the	a special order to repre instructions for Part II	esent t	axpayers in q	ualified Low Inc	ome Taxpayer Clinic	cs or the Student	Tax Clinic Prog	ıram	
Jnde	r penalties of perj	ury, I declare that.								
	• I am not curren	tly under suspension or	dısbar	rment from pr	actice before th	e Internal Revenue s	Service;			
	I am aware of r of attorneys, ce	egulations contained in rtified public accountan	Circula	ar 230 (31 CF)	R, Part 10), as	amended, concerning	ng the practice			
	•	to represent the taxpay		-			there, and			
	I am one of the					, ,				
		member in good stand	ina of t	the bar of the	highest court o	f the jurisdiction sho	wn below			
	•	lic Accountant — duly q	-		-	•		wn helow		
		nt — enrolled as an age		•			ic jurisdiction shot	WIT BEIOW.		
		ona fide officer of the ta		•		u. 250				
		iployee — a full-time en		•						
		er — a member of the f			-	ample chouse pare	ant child brother	or cictor)		
		ary — enrolled as an a							northy to	
	practice before	re the Internal Revenue	Servic	e is limited by	y section 10 3(c) of Circular 230)	s under 29 0 3 C	1242 (iiie auli	ionty to	
	10.7(c)(1)(viii	eturn Preparer — the au i) You must have prepa i rer in the instructions	uthority ired th	to practice be e return in qu	efore the Internestion and the i	al Revenue Service eturn must be under	is limited by Circu r examination by t	ular 230, sectio he IRS See U i	ก nenrolled	
	k Student Attor	ney - student who rece	ives p	ermission to p	oractice before	he IRS by virtue of t	their status as a la	aw student und	er section	
		- student who receives	perm	ission to pract	tice before the l	RS by virtue of their	status as a CPA	student under :	section	
	10 7(d) of Cir	cular 230 rement Plan Agent – er	rolled	as a retireme	ent plan agent u	nder the requiremen	nts of Circular 230	(the authority t	to	
	practice befor	re the Internal Revenue	Servic	e is limited by	y section 10 3(e))				
	THIS DECLARAT he Part II instructi	ION OF REPRESENTATIONS	IVE IS	NOT SIGNED	O AND DATED,	THE POWER OF AT	TORNEY WILL BE	E RETURNED.		_
	ignation — Insert ove letter (a - r)	Jurisdiction (state) or identification			Sig	nature		Dat	te	
				/ _/	//					-
	h	MTGGOTIPT		(<i>II)</i>	2			124/1	ø	
	ь	MISSOURI		-1-	>			CK-110		-