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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service (77) he foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

	_	venue Service (77) Note: The Touridation may	DO UDIO II			oqui omonio.	
For	calen	dar year 2009, or tax year beginning			, and ending		
G	heck	all that apply: Initial return			ormer public charity	Final return	
_		Amended return		Address chan	ge	Name change	
ilse	the I	Name of foundation				A Employer identification	number
	abel						
	erwis	se CHARLES & PAULINE	HAMI:	LTON FOUNDA	TION	43-1825155	
	print	Number and street (or P O box number if mail is	s not delive	ered to street address)	Room/suite	B Telephone number	
	r type	HELD DOUGH IMILE DIK	EET			(573) 985-	3411
	Spec	I City of town, State, and ZIP code				C If exemption application is p	ending, check here
Inst	ructio	NDC I	459			D 1 Foreign organizations	c, check here
H	heck	type of organization: X Section 501(c)(3) exem	npt private foundation	···	 Foreign organizations me check here and attach co 	eting the 85% test,
Γ_	_	ction 4947(a)(1) nonexempt charitable trust		ner taxable private founda	ation		
I Fa			counting		Accrual	E If private foundation sta under section 507(b)(1)	
		Part II, col (c), line 16)		r (specify)		F If the foundation is in a	• •
	\$	2,367,561. (Part I	l. columr	n (d) must be on cash l	basis)	under section 507(b)(1)	
		Analysis of Revenue and Expenses		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u> </u>		(The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a))	y not	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		123,401.		N/A	, and stripp
	2	Check fit indutions, grits, grants, etc., received	h R	T23, 401.		41/41	
	3	Interest on savings and temporary					
	4	Dividends and interest from securities	-	68,368.	68,368.		STATEMENT 1
	'		-	00,300.	00,300.		DIAIBMENT I
		Gross rents	-				
	b	Net rental income or (loss)	-	<55,266.			
e	١.	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 262,51	ہ ⊢	<33,400.	<u>></u>		
le)	_b	assets on line 6a 202, 31	<u>•</u> • ⊢				
Revenue	7	Capital gain net income (from Part IV, line 2)	-		0.		
	8	Net short-term capital gain	<u> </u>				
	9	Income modifications Gross sales less returns	}				
	10a	and allowances					
		Less Cost of goods sold					
	C	Gross profit or (loss)	-				
	11	Other income		406 500	60 060		
	12	Total. Add lines 1 through 11		136,503.	68,368.		
	13	Compensation of officers, directors, trustees, etc	ļ. <u>.</u>	17,302.	8,652.		0.
	14	Other employee salaries and wages				1 REPER	
w	ı	Pension plans, employee benefits				A	
ses	ı	Legal fees	_			S FEE	
ē	b		2 _	2,340.	1,170//.		79/ 0.
Expen		Other professional fees STMT	3 _	18,856.	18,85%.	20	
<u>×</u>	17	Interest				UGDEA	\ /có/
7 2010, Operating and Administrative	18	Taxes				- SEALLY	Je
nisi	19	Depreciation and depletion	_				
Ē	20	Occupancy	<u> </u>				
¥	21	Travel, conferences, and meetings					
뎙	22	Printing and publications					
ှစ်	23	Other expenses					
a∰	24	Total operating and administrative					
ばな		expenses. Add lines 13 through 23		38,498.	28,678.		0.
ي	25	Contributions, gifts, grants paid	Γ	40,500.			40,500.
≕		Total expenses and disbursements.				-	
		Add lines 24 and 25		78,998.	28,678.	_	40,500.
<u>a</u>	27	Subtract line 26 from line 12;					
		Excess of revenue over expenses and disbursements	,	57,505.		,	
	ı	Net investment income (if negative, enter -0-)			39,690.		
	c	Adjusted net income (if negative, enter -0-)				N/A	
0235	01	LHA For Privacy Act and Paperwork Red	uction Ac	t Notice, see the instruct	tions	·	Form 990-PF (2009)

33635-21

P	Part IV Capital Gains	and Lo	osses for	Tax on Inv	estmen	t Income		_				
	(a) List and des 2-story brick w			erty sold (e.g., i stock, 200 shs. l			(b) P D	How ac - Purcl - Dona	quired nase ition	c) Date a (mo., da		(d) Date sold (mo., day, yr.)
	VARIOUS SECURI	TY S	ALES -	WACHOV	IA SE	CURITIES						
	3259-2480								P 7	/ARI	ous_	VARIOUS
	VARIOUS SECURI	TY S	ALES -	WACHOV	IA SE	CURITIES			_ -			TIADTOTIC
	3307-5963		 						P 7	/ARI	บบร	VARIOUS
<u>e</u>	(e) Gross sales price	(f)	Depreciation a	I .		st or other basis expense of sale					ın or (loss (f) mınus	
a												
b C						240,29	0.					<31,707.:
d	53,933.	ļ				77,49	2.					<23,559·
е		DO GOID ID	oolumn (b) a	nd owned by the	n foundation	on 12/21/60				Coupe (Co	-l (b)	
	Complete only for assets show				-						ol. (h) gain ot less tha	
	(i) F.M.V. as of 12/31/69		(j) Adjusted b as of 12/31/			col. (j), if any					from col. (
a b	-	-										<31,707.
C)											<u> </u>
d					.				·			<23,559.
<u>e</u>)	<u> </u>					_	I				
2	Capital gain net income or (net c	apıtal loss	s) {	aın, also enter ır oss), enter -0- ı	n Part I, line n Part I, line	7 7	}	2				<55,266.
3	Net short-term capital gain or (lo			ns 1222(5) and	(6):		٦					
	If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8		(C).				•	3			N/A	
P	Part V Qualification (Jnder S	Section 49	940(e) for F	Reduced	Tax on Net	lnv	estm	ent Inco	me	21/ 22	<u> </u>
Wa	section 4940(d)(2) applies, leave as the foundation liable for the serves," the foundation does not quite the appropriate amount in	ction 4942 alify under	2 tax on the dis	(e). Do not com	plete this pa	art.						Yes X No
	(a) Base period years			(b) qualifying distri		Net value of no	(c)	ritable-	use assets	Τ,	Distrit	(d) oution ratio rided by col. (c))
	Calendar year (or tax year beginn 2008	ing in)	7 tajaotoa		,888.	1101 14110 01 110			9,387		coi. (b) air	.011842
	2007				,615.		1		0,124			.021572
	2006				,193.				0 .		·	.000000
	2005				,516.	·			0 .			.000000
	2004			27	,497.				0 .			.000000
2	Total of line 1, column (d)									2		.033414
	Average distribution ratio for the	5-year ba	ase period - div	vide the total on	line 2 by 5,	or by the number	of ye	ars				
	the foundation has been in exist	-	•			·				3		.006683
4	Enter the net value of noncharita	ble-use as	ssets for 2009	from Part X, lin	e 5					4		2,001,618.
5	Multiply line 4 by line 3									5		13,377.
6	Enter 1% of net investment inco	me (1% o	f Part I, line 27	7b)						6		397.
7	Add lines 5 and 6									7		13,774.
8	Enter qualifying distributions fro	m Part XII	I, line 4							8		40,500.
	If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, c	heck the box I	n Part VI, line 1	b, and comp	olete that part usin	g a 1	% tax г	ate.			

	990-PF (2009) CHARLES & PAULINE HAMILTON FOUNDATION 4 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494		825155 see instri		Page 4 ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		3	97.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3		3	97.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		3	97.
	Credits/Payments:				
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,288.				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868) 6c				
	Backup withholding erroneously withheld 6d 6	_			
		7		1,4	88.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			.01
		10		8	91.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 891. Refunded ► rt VII-A Statements Regarding Activities	11	<u> </u>		0.
				Yes	No
14	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b	<u> </u>	X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	15	 	1
	distributed by the foundation in connection with the activities.	<i>.</i>			
	Did the foundation file Form 1120-POL for this year?		1c	1	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		10		
٠	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.				1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation]
Ŭ	managers. > \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/.	A 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:				1
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	w			
	remain in the governing instrument?		6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	<u> </u>
	If "Yes," complete Part II, col (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	ar			1,,
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	-	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	DiE	<u> A</u>

923541

Form **990-PF** (2009)

orm 990-PF (2009) CHARLES & PAULINE HAMILT Part VII-B: Statements Regarding Activities for Which I			43-18251	55 Page 6
 (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check in expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax so If yes, did the foundation receive any proceeds or have any net income attribute. 	or to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or educational purposes, or for educational purposes, or for educations described indictions)? Here is a because it maintated in the form the tax because it maintated in the form of the form of the form of the transaction?	ectly,	es No es X No es X No N/A	5b X 7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1	
List all officers, directors, trustees, foundation managers and their	compensation.			
(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 account, other allowances
JEFF PORTER	TRUSTEE			
1040C SOUTH STURGEON				
MONTGOMERY CITY, MO 63361	1.00	5,768.	0.	0.
JOHN W. BRISCOE	TRUSTEE			
423 SOUTH MAIN STREET	4 00	5 5 5 5		
NEW LONDON, MO 63459	1.00	5,767.	0.	0.
	TRUSTEE			
100 NORTH 6TH STREET	1 00	F 767		
HANNIBAL, MO 63401	1.00	5,767.	0.	0.
			-	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evacaca
(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 account, other allowances
NONE				
	-			
	1			
	1			
				-
	1			
Total number of other employees paid over \$50,000		J	<u> </u>	0
			Form	990-PF (2009)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
•	Average monthly fair market value of securities	1a	2,006,880.
b	Average of monthly cash balances	1b	25,219.
c	Fair market value of all other assets	1c	23/2230
ď	Total (add lines 1a, b, and c)	1d	2,032,099.
-	Reduction claimed for blockage or other factors reported on lines 1a and		
Ŭ	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,032,099.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	30,481.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,001,618.
6	Minimum investment return. Enter 5% of line 5	6	100,081.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certai	
1	Minimum investment return from Part X, line 6	1	100,081.
2a			
	Income tax for 2009. (This does not include the tax from Part VI.)	İ	
C	Add lines 2a and 2b	2c	397.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	99,684.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	99,684.
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	99,684.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	40,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<u> </u>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	40,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	397 .
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	40,103.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies	for the section

33635-21

4940(e) reduction of tax in those years.

Part XIII Un	distributed	Income	(see instructions)
--------------	-------------	--------	--------------------

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				99,684.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			10,178.	
b Total for prior years:				
• · · · · · · · · · · · · · · · · · · ·		0.		
3 Excess distributions carryover, if any, to 2009:			•	
a From 2004				
b From 2005				
c From 2006				
d From 2007			+	•
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from	<u> </u>			
Part XII, line 4: ►\$ 40,500.				
a Applied to 2008, but not more than line 2a			10,178.	
b Applied to undistributed income of prior			10/1/00	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u> </u>		
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				30,322.
e Remaining amount distributed out of corpus	0.			30,322.
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the 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	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				•
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.		•	0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				69,36 <u>2</u> .
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				•
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:			•	
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				· · · · · · · · · · · · · · · · · · ·
	_			Form 990-PF (2009)

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43-1825155

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year SEE STATEMENT 5 40,500. ➤ 3a Total b Approved for future payment NONE 0. Total 923611 07-07-09

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
<i>g.</i>	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities			14	68,368.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property			<u>- </u>		
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	<55,266.⊳	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory		_			
Other revenue:					
a					
b					
C					
d					
e					
Subtotal. Add columns (b), (d), and (e)		(0.	13,102.	
Total. Add line 12, columns (b), (d), and (e)				13	13,10
ee worksheet in line 13 instructions to verify calculations.)					

ne No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	·

923621 07-07-09

_	m 990-F art X\	/II Information R	JES & PAULINE HA					-18251 Ioncharit		Pa	ge 13
		Exempt Organ						 -	- 12.6		
1	Did th	ie organization directly or ind	irectly engage in any of the follow	ing with any other organiza	ation d	lescribed in sect	ion 501(c) of	_	\ Y (es	No
	the Co	ode (other than section 501(c	c)(3) organizations) or in section 5	527, relating to political org	ganızat	ions?					
а	Trans	fers from the reporting found	lation to a noncharitable exempt o	rganization of:						İ	
	(1) 0	Cash							la(1)		X
	(2) (Other assets						[1	la(2)		X
h		transactions:						<u> </u>		\neg	
Ī		Sales of assets to a noncharita	able evempt organization					١,	Ib(1)	- 1	x
			· -					<u> </u>		\dashv	X
			oncharitable exempt organization						lb(2)	\dashv	
		Rental of facilities, equipment,						_	lb(3)	-	<u>X</u>
		Reimbursement arrangements	8						lb(4)	_	<u>X</u>
	(5) L	oans or loan guarantees						<u> 1</u>	lb(5)		X
	(6) P	Performance of services or mi	embership or fundraising solicitat	ons				<u>[1</u>	Ib(6)		<u>X</u>
C	Sharii	ng of facilities, equipment, ma	ailing lists, other assets, or paid ei	mployees					1c		<u>X</u>
d	If the	answer to any of the above is	"Yes," complete the following sch	edule. Column (b) should	alway	s show the fair r	narket value of th	e goods, oth	er assets	 3 ,	
			foundation. If the foundation recei	• • •						•	
			other assets, or services received				•				
(a)	Line no	(b) Amount involved	(c) Name of noncharitab			(d) Description	n of transfers, transac	ctions, and sha	ring arrand	emer	nts
			N/A	· •							
											
							_	· · · · · · · · · · · · · · · · · · ·			
		-									
							•				
	•			•							
								<u> </u>			
				· · · · · · · · · · · · · · · · · · ·							
_											
				 					-		
2a			ctly affiliated with, or related to, on		anızatı	ons described		 1		77	1
			er than section 501(c)(3)) or in sec	CTION 52/					Yes	X] NO
D	II Yes	s," complete the following sch (a) Name of or		(b) Type of organization	n 1		(c) Description of	f relationship			
		N/A	ganization	(b) Type of organization	<u>"" </u>		(c) Description of	Treationship			
		N/A				-					
					_			 -			
				-				 			
							-				
\Box			have examined this return, including acc				f my knowledge and	belief, it is true	, correct,		
	and con	nplete Declaration of preparer (oth	er than taxpayer or liddiciary) is based o		arer has	any knowledge	` ` _	≠.			
	L _	AMM	W. Druse	De 2-2-1	10	\	urce	400			
ere	Sı	gnature of officer or trustee	70-7-7-	Date		Title U					
핕		Preparer's	01/11		Date	Ch	eck if	Preparer's	dentifying	num	ber
Sign Here	Paid Preparer's Use Only	signature Joseph	U. Vallocht		01/	/30/10 en	nployed 🕨 🗌]			
	Paid reparer's Use Only	Firm's name (or yours WADE					EIN ▶	·			
	Pre Us		30X 796								
\perp		address, and ZIP code HANN	NIBAL, MO 63401	-0796			Phone no.	<u>(573)2</u>	<u> 21-</u>	<u>599</u>	98

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization CHARLES & PAULINE HAMILTON FOUNDATION 43-1825155 Organization type (check one): Filers of: Section: Form 990 or 990-EZ __ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

CHARLES & PAULINE HAMILTON FOUNDATION

43-1825155

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	F PAULINE HAMILTON 423 SOUTH MAIN STREET NEW LONDON, MO 63459	\$ <u>123,401.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	· (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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a nortcash contribution.)
(a) No.	(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.)

FORM 990-PF DIVIDEND	S AND INTE	REST FROM	SECUI	RITIES	STATEMENT	1
SOURCE	GROS	s amount		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
WACHOVIA SECURITIES - 3259-24		4,599.		0.	4,5	
WACHOVIA SECURITIES - 3259-96 WACHOVIA SECURITIES - 3307-59		17. 63,752.		0. 0.	: 63,7!	17. 52.
TOTAL TO FM 990-PF, PART I, I		68,368.		0.	68,3	
70DW 000 DF	ACCOUNT	TNG BBBG			CMA MEMENIM	2
FORM _990-PF	ACCOUN	ING FEES			STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS		EST- COME	(C) ADJUSTED NET INCOM		
WADE STABLES PC	2,340	. 1	,170.			0.
					 	
TO FORM 990-PF, PG 1, LN 16B	2,340	. 1	,170.			0.
-	2,340 OTHER PROFI				STATEMENT	
FORM 990-PF C		SSIONAL F (B) NET INV	EES EST-	(C) ADJUSTED NET INCOM	(D) CHARITA	3 BLE
FORM 990-PF C	THER PROFI (A) EXPENSES	SSIONAL F (B) NET INV	EES EST-	ADJUSTED	(D) CHARITA	3 BLE
FORM 990-PF C	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EES EST- COME	ADJUSTED	(D) CHARITA	3 BLE ES
FORM 990-PF C DESCRIPTION INVESTMENT FEES - WACHOVIA	(A) EXPENSES PER BOOKS 18,856	(B) NET INV MENT IN	EES EST- COME	ADJUSTED	(D) CHARITA	3 BLE ES
FORM 990-PF DESCRIPTION INVESTMENT FEES - WACHOVIA TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	(A) EXPENSES PER BOOKS 18,856	(B) NET INV MENT IN . 18	EES EST- COME ,856.	ADJUSTED	(D) CHARITA	3 BLE 0. 0.
FORM 990-PF C DESCRIPTION INVESTMENT FEES - WACHOVIA TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 18,856 OTHER IN	(B) NET INV MENT IN 18 18 VESTMENTS	EES EST- COME ,856.	ADJUSTED NET INCOM	(D) CHARITA IE PURPOSI STATEMENT FAIR MARKE	3 BLE ES 0. 0. 1

FORM 990-PF

STATEMENT

PAID	PAID DURING THE YEAR			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
AMERICAN DIABETES ASSN P O BOX 1833 MERRIFIELD, VA 22116	NONE GENERAL USE	PUBLIC CHARITY		
AMERICAN LIVER FOUNDATION 1118 HAMPTON AVE. KANSAS CITY, MO 64139	NONE GENERAL USE	PUBLIC CHARITY		
AMERICAN LUNG ASSN 1118 HAMPTON AVE. ST LOUIS, MO 63139	NONE GENERAL USE	PUBLIC CHARITY		
BENEDICTINE SISTERS 31970 STATE HWY P CLYDE, MO 64432	NONE GENERAL USE	RELIGIOUS	•	
CARDINAL GLENNON HOSPITAL 1465 SOUTH GRAND AVE ST LOUIS, MO 63104	NONE GENERAL USE	PUBLIC CHARITY		
CONCEPTION SEMINARY COLLEGE P O BOX 501 CONCEPTION, MO 64433	NONE GENERAL USE	RELIGIOUS		
CROOKED CREEK CEMETERY 326 W CALDWELL PARIS, MO 65275		RELIGIOUS	1,500.	
DIOCESE OF JEFFERSON CITY P O BOX 417 JEFFERSON CITY, MO 65102	NONE GENERAL USE	RELIGIOUS		

GRANTS AND CONTRIBUTIONS

· CHARLES & PAULINE HAMILTON FOUN	DATION	4:	3-1825155
HOLY ROSARY ALTAR SOCIETY 405 S MAIN MONROE CITY, MO 63456	NONE GENERAL USE	RELIGIOUS	1,500.
HOLY ROSARY CHURCH 405 S MAIN MONROE CITY, MO 63456	NONE GENERAL USE	RELIGIOUS	2,750.
KNIGHTS OF COLUMBUS @ MONROE CITY LAWN MONROE CITY, MO 63456	NONE GENERAL USE	RELIGIOUS	
LAKENAN COMMUNITY CENTER 7622 HWY PP SHELBINA, MO 63468		COMMUNITY ORGAN.	3,500.
LEUKEMIA & LYMPHOMA SOCIETY P O BOX 9031 PITTSFIELD, MA 01202		PUBLIC CHARITY	
MONROE CITY KNIGHTS OF COLUMBUS 300 E SUMMER STREET MONROE CITY, MO 63456		PUBLIC CHARITY	1,500.
OATS, INC. 710 RIDGE ST SHELBINA, MO 63468	NONE GENERAL USE	COMMUNITY ORGAN.	1,000.
OLD CLINTON CATHOLIC CEMETERY 209 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	RELIGIOUS	1,500.
SHELBINA K OF C #2241 307 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	RELIGIOUS	2,750.
SHELBINA SENIOR CITIZENS 112 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	PUBLIC CHARITY	4,000.

• •				
CHARLES	æ	PAIILINE	HAMTLTON	FOUNDATION

43-1825155

CHARLES & PAULINE HAMILTON FOUR	NDATION		43-1825155
SHELBY COUNTY SENIOR CITIZENS 112 E CHESTNUT SHELBINA, MO 63468		COMMUNITY ORGAN.	
SHILOH CHRISTIAN CHILDRENS RANCH P O BOX 606 SHELBINA, MO 63468		RELIGIOUS	1,500.
SISTERS OF MERCY 611 S BALLAS ROAD ST LOUIS, MO 63141	NONE GENERAL USE	RELIGIOUS	1,000.
ST MARY'S ALTAR SOCIETY 307 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	RELIGIOUS	2,750.
ST MARY'S CEMETERY ASSN 209 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	RELIGIOUS	3,300.
ST MARY'S PARISH 307 E CHESTNUT SHELBINA, MO 63468	NONE GENERAL USE	RELIGIOUS	5,200.
ST STEPHENS'S CEMETERY 27519 MONROE ROAD 533 MONROE CITY, MO 63456	NONE GENERAL USE	RELIGIOUS	4,000.
ST STEPHENS'S CHURCH 27519 MONROE ROAD 533 MONROE CITY, MO 63456	NONE GENERAL USE	RELIGIOUS	2,750.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A		40,500.