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Department of the Treasury

### **Return of Private Foundation**

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

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

OMB No 1545-0052 2009

				or able to able a dopy of this	<del></del>		
		dar year 2009, or tax year beginning			, and ending		
G (	Check	all that apply: Initial return			rmer public charity	Final return	
	_	Amended re	turn	Address chang	ge	Name change	
Use	the I	RS Name of foundation				A Employer identification	number
	abel.						
Oth	erwis				<del></del>	47-0816444	
_	print			livered to street address)	Room/suite	B Telephone number	
	r type Spec	" LATT THEFTOOM DIT	REET			(402) 505-	6002
	ructio	one   City of town, state, and ZIP code				C If exemption application is po	
		RALSTON, NE 68.	127			D 1. Foreign organizations	, check here
H (	_			empt private foundation		2 Foreign organizations me check here and attach co	mputation
		ction 4947(a)(1) nonexempt charitable	trust L	Other taxable private founda	ation	E If private foundation stat	tus was terminated
I Fa	air ma	rket value of all assets at end of year	J Account		Accrual	under section 507(b)(1)	(A), check here
		Part II, col (c), line 16)		her (specify)		F If the foundation is in a 6	60-month termination
	\$		(Part I, colu	mn (d) must be on cash t	basis)	under section 507(b)(1)	(B), check here
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and necessarily equal the amounts in column (a)	l (d) may not )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., receiv	red	3,480,000.		N/A	
	2	Check If the foundation is not required to					
	3	Interest on savings and temporary cash investments		3,360.	3,360.		STATEMENT 1
	4	Dividends and interest from securities		28.	28.		STATEMENT 2
	5a	Gross rents					
	Ь	Net rental income or (loss)		* '			
•	6a	Net gain or (loss) from sale of assets not on li	ne 10	<1.	>		
Revenue	b	Gross sales price for all assets on line 8a		· · · · · · · · · · · · · · · · · · ·		1 RE	CEIVED
ě.	7	Capital gain net income (from Part IV, line 2)			0.		TIVED
æ	8	Net short-term capital gain				S Aug	, Jul
	9	income modifications				AUG	3 0 2010
	10a	Gross sales less returns and allowances					3
	Ι.	Less Cost of goods sold				LOGD	EN IT
	C	Gross profit or (loss)					
	11	Other income					
	12	Total Add lines 1 through 11		3,483,387.	3,388.		
	13	Compensation of officers, directors, trustees,	etc	0.	0.		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
ses	16a	Legal fees ST	MT 3	360.	0.		360.
Je L	b	Accounting fees STI	MT 4	2,491.	0.		0.
Expens	C	Other professional fees STI	MT 5	20.	20.		0.
<u>≗</u> .⊆		Interest					
← ∠U∫U Administrative	18		MT 6	9,470.	9,470.		0.
nis.	19	Depreciation and depletion					
ZΞ	20	Occupancy					
- ₹	21	Travel, conferences, and meetings					
a G	22	Printing and publications					
	23	•	MT 7	214.	214.		0.
at i	24	Total operating and administrative					
Operating	.	expenses. Add lines 13 through 23		12,555.	9,704.		360.
J	25	Contributions, gifts, grants paid		4,980,000.			4,980,000.
	26	Total expenses and disbursements.					
	<u> </u>	Add lines 24 and 25		4,992,555.	9,704.		4,980,360.
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbur		<1,509,168.			
		Net investment income (if negative, enter			0.	<u> </u>	
0225		Adjusted net income (if negative enter -			L	N/A	
9235 02-0	2-10	LHA For Privacy Act and Paperwo	rk Reduction	Act Notice, see the instruc	tions.		Form <b>990-PF</b> (2009)

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
гац	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	17,020.	223,139.	223,139.
2	Savings and temporary cash investments	1,182,978.	32,986.	32,986.
3	Accounts receivable ►			
	Less; allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
5				
6	Receivables due from officers, directors, trustees, and other			
ľ	disqualified persons			
,	· · · ·			
_   ′	Other notes and loans receivable			
	Less: allowance for doubtful accounts			_
Assets	Inventories for sale or use			<del></del>
9	, , , , , , , , , , , , , , , , , , ,			
100	Investments - U.S. and state government obligations			<del></del>
	h Investments - corporate stock			
1	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis	1		
	Less accumulated depreciation			
12	Investments - mortgage loans			. <u>.</u>
13	Investments - other STMT 8	565,295.	0.	0.
14	Land, buildings, and equipment; basis ►			
	Less accumulated depreciation			
15	Other assets (describe ►			
16	Total assets (to be completed by all filers)	1,765,293.	256,125.	256,125.
	Accounts payable and accrued expenses		_	
18	Grants payable			
ဖွာ 19	· · ·			
월   20	Loans from officers, directors, trustees, and other disqualified persons			
20 21 21 22 21 22 21 22 21 22 22 22 22 22	<b>_</b>			
≝   <sub>22</sub>	Other liabilities (describe )			
23	Total liabilities (add lines 17 through 22)	0.	0.	
- 25	Foundations that follow SFAS 117, check here	- 0.		
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	-			
2 24	Unrestricted			
<u>a</u> 25	· · · · · · · · · · · · · · · · · · ·			
නි   26 ප	h			
Fund Balano 25 26	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.			
Assets or 28 29 29		0.	0.	
စ္ဟ  28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
₹  29	Retained earnings, accumulated income, endowment, or other funds	1,765,293.	256,125.	
ğ 30	Total net assets or fund balances	1,765,293.	256,125.	
31	Total liabilities and net assets/fund balances	1,765,293.	256,125.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
		<u> </u>		
	al net assets or fund balances at beginning of year - Part II, column (a), line	30		1 848 666
	ist agree with end-of-year figure reported on prior year's return)		1	1,765,293.
	er amount from Part I, line 27a		2	<1,509,168.
	er increases not included in line 2 (itemize)		3	0.
	I lines 1, 2, and 3		4	256,125.
5 Dec	reases not included in line 2 (itemize)	<u> </u>		0.
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	256,125.
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4,980,360.

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See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(	e), or 4	<u> 1948 </u>	- see i	<u>nstru</u>	ction	<u>15)</u>
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)	1					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	þ	1_				0.
	of Part I, line 27b	1					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	J		ļ			
	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				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/Payments:		⊢ <u> </u>				
_	2009 estimated tax payments and 2008 overpayment credited to 2009						
	Exempt foreign organizations - tax withheld at source 6b		1	1			
		_	┪	}			
	Tax paid with application for extension of time to file (Form 8868)  6c		-				
	Backup withholding erroneously withhold 6d 6d		- }	1			^
_	Total credits and payments. Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		_9_	-			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		_10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	nded 🚩	11				
	art VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or	intervene	e in			Yes	No
	any political campaign?				1a_		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for def	nition)?			1b_		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	publishe	ed or				l
	distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?				1c _		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		-		1		
	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 incorp	oration.	Or				
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,			3		x
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	<b>/</b> A		-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-1	.,	4D 5		x
J	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:				}		
J	By language in the governing instrument, or						
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with</li> </ul>	h the ctat	سوا ۵				
		ii iiie siai	C IAW		•	v	
7	remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	<del> </del>
'	Did the foundation have at least \$5,000 in assets at any time during the year?				<del></del>		
_	If "Yes," complete Part II, col. (c), and Part XV						
88	Enter the states to which the foundation reports or with which it is registered (see instructions)				1		
	NE			<del></del>			
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designation)	te)					
	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)(3)	5) for cal	endar				
	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 address	ises S	<u>rmt</u>		10	X	<u> </u>
				Fo	rm <b>99</b> 0	-PF	(2009)

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P	rt VII-A Statements Regarding Activities (continued)	<del></del>			
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		х
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 application?		13_	X	
	Website address ► N/A				
14	The books are in care of ► GEORGE F. HADDIX	phone no. ► <u>402-</u> 5	505- <u>6</u>	002	
	Located at ► 7411MADISON_STREET, OMAHA, NE	ZIP+4 ▶€			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				$\cdot$
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	ed			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
18	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)		1		
	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	1		
	(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			
١	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				l
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not co	orrected			
	before the first day of the tax year beginning in 2009?		10		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)):		1		
	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 >				
ı	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating	to incorrect	ŀ		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No	o" and attach			
	statement - see instructions.)	N/A	2b_		
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
	<b>&gt;</b> ,,,,,	_		1	
3	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			
ı	of "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified	d persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 494	3(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 S	Schedule C,	-		
	Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charit	able purpose that			

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

Part VII-B   Statements Regarding Activities for Which I			<u>47-08164</u>	44	Page <b>6</b>
	Oilli 4720 Iviay De i	nequired (contin	uea)		
5a During the year did the foundation pay or incur any amount to:	n 4045(a)\?		s X No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,					
any voter registration drive?	in to carry on, unecting or intuit		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No		1
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?	ii described iii section	v	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or		3 22 110		
the prevention of cruelty to children or animals?	or caucational purposes, or		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described		38 (22) 110		
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii riogalationo	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•		<b>▶</b>		+-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ained		1	
expenditure responsibility for the grant?		N/A 🗀 Ye	s No		
If "Yes," attach the statement required by Regulations section 53 494					
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promisino on	☐ Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870.					† <del></del>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No		
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attribut			· · · -	7b	$\top$
Port VIII Information About Officers, Directors, Trust		anagers, Highly			-
Paid Employees, and Contractors	·				
1 List all officers, directors, trustees, foundation managers and their	compensation.				
( ) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense nt, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allow	ances
GEORGE F. HADDIX	TRUSTEE AND (	CHAIRMAN			
7411 MADISON STREET					
OMAHA, NE 68127	1.00	0.	0.		0.
SALLY A. HADDIX	TRUSTEE				
7411 MADISON STREET					
OMAHA, NE 68127	1.00	0.	0.		<u>0.</u>
	]				
	_				
	1	I INSCRIPTION IN			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	, enter "NONE."	(d) Contributions to	(a) F	vnanca
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	accour	xpense nt, other
NOVE	devoted to position		compensation	allow	vances
NONE	-				
<del>-</del>		-		_	
·	1				
					-
<del></del>	1				
	1				
			1		
	4				
Total number of other employees paid over \$50,000	<del></del>			<u> </u>	0
1 Oct. Homos of other displayons paid over woodoo	<del> </del>		Form	990-PF	
					· · · · · · · /

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

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	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	141,772.
b	Average of monthly cash balances	1b	454,250.
C	Fair market value of all other assets	10	<u> </u>
d	Total (add lines 1a, b, and c)	1d	596,022.
_	Reduction claimed for blockage or other factors reported on lines 1a and	-10	330,022.
Ĭ	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	596,022.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,940.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	587,082.
6	Minimum investment return Enter 5% of line 5	6	29,354.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		25,5511
	foreign organizations check here  and do not complete this part.)	00710117	
1	Minimum investment return from Part X, line 6	1	29,354.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	29,354.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	29,354.
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	29,354.
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	4,980,360.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,980,360.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,980,360.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies for	

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### 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				_29,354.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			0.	
b	Total for prior years:				
			0.		
	Excess distributions carryover, if any, to 2009:				
_	From 2004				
	From 2005				
_	From 2006 7,058,905.				
_	From 2007 304, 775.				
_	From 2008 493,276.	F 056 056			
	Total of lines 3a through e	7,856,956.			
4	Qualifying distributions for 2009 from				
	Part XII, line 4: ►\$ 4,980,360.			•	
	Applied to 2008, but not more than line 2a			0.	
0	Applied to undistributed income of prior		0		
_	years (Election required - see instructions)	'	0.		<u> </u>
C	Treated as distributions out of corpus	0.			
	(Election required - see instructions)  I Applied to 2009 distributable amount				29,354.
	Remaining amount distributed out of corpus	4,951,006.			23,334.
_	Excess distributions carryover applied to 2009	0.			0.
Ü	(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	12,807,962.			
	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	<del></del>			0.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
_	section 170(b)(1)(F) or 4942(g)(3)	0.			
8	Excess distributions carryover from 2004	^			
	not applied on line 5 or line 7	0.			
3	Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a	12,807,962.			
ın	Analysis of line 9:	14,001,302.	· <u> </u>	<u> </u>	-
	Excess from 2005				
	Excess from 2006 7,058,905.				
	Excess from 2007 304,775.				
	Excess from 2008 493, 276.				
	Excess from 2009 4,951,006.				

Form 990-PF (2009) THE GF	H & SAH FOU	NDATION	/// A		3 <b>16444</b> Page 1
Part XIV Private Operating I				N/A	
1 a If the foundation has received a ruling		· · · · ·			
foundation, and the ruling is effective f	•	•	▶ └		
<b>b</b> Check box to indicate whether the four		ating foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			<del></del>		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		<del> </del>		·	
alternative test relied upon:				ł	
a "Assets" alternative test - enter:					
(1) Value of all assets					<del> </del>
(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				<u> </u>	
c "Support" alternative test - enter:					
<ol><li>Total support other than gross</li></ol>					
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			1		
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 Info	ormation (Comp	lete this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during			in the roundation	пас фо,осо от п	ore in assets
1 Information Regarding Foundati	_				
a List any managers of the foundation w year (but only if they have contributed			ntributions received by the	toundation before the clo	se of any tax
	more man 40,000). (Oc	5 Section 507 (u)(z).)			
SEE STATEMENT 10	<del></del>				
b List any managers of the foundation w	ho own 10% or more of	the stock of a corporation	n (or an equally large porti	on of the ownership of a p	partnership or
other entity) of which the foundation h	as a 10% or greater inte	rest.			
NONE					
2 Information Regarding Contribu					
Check here 🕨 🔛 if the foundation	only makes contribution	is to preselected charitabl	e organizations and does i	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc	. (see instructions) to in	dividuals or organizations	under other conditions, c	omplete items 2a, b, c, an	d d.
a The name, address, and telephone nur	nber of the person to wi	nom applications should b	e addressed:		
GEORGE F. HADDIX, 40	02-505-6002	}			
7411 MADISON STREET					
b The form in which applications should			should include		
WRITTEN APPLICATION	or out miles and miles	nation and materials troy	onousa molado,		
c Any submission deadlines:					
NONE					
	de queb ao bu accesa-	unal areae aboritable 6-1-1	o kindo of inatitudada -	other featers:	
d Any restrictions or limitations on award NONE	us, such as by geograpr	ncai areas, charitadie fielo	s, kinds of institutions, or	other factors:	
HOME					

3 Grants and Contributions Paid During the		Downont		
Recipient	If recipient is an individual,		D	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year OMAHA NORTH HIGH SCHOOL FOUNDATION 4410 NORTH 36TH STREET OMAHA, NE 68178	NONE	EDUCATIONA INSTITUTIO	EDUCATIONAL	4,980,000.
Total			<b>.</b>	4,980,000.
b Approved for future payment			31	4,380,000.
NONE				
Total			▶ 3	b 0.

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

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded b	y section 512, 513, or 514	
-	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	Code		code		
a	- <del>                                    </del>		<del>   -</del>		
b		<del></del>	<del>                                     </del>		
<u> </u>		<del></del> -	<del>                                     </del>	·	<del></del>
d			<del>                                     </del>		
e	- <del>  -</del>		<del>  -</del>		
g Fees and contracts from government agencies			<del>                                     </del>	<del></del>	
<del>-</del>		<del></del>	+		
2 Membership dues and assessments			+ +		
3 Interest on savings and temporary cash			14	3 360	
Investments	-		14	3,360.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:			+ +-		
a Debt-financed property			<del>                                     </del>		
b Not debt-financed property			-		
6 Net rental income or (loss) from personal					
property		<del></del>	<del> </del>		
7 Other investment income		<del></del>	+ +		
8 Gain or (loss) from sales of assets other			1.0	,	
than inventory		<del></del> -	18	<1.>	·
9 Net income or (loss) from special events			<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory			<del>                                     </del>		
11 Other revenue:					
a	_	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		
b			<del>                                     </del>		<del></del>
C	1 1		<del>                                     </del>		<del></del>
d	_	<del> </del>	<del>                                     </del>	<del></del>	<del></del>
e	_ <del>                                    </del>			2 207	
12 Subtotal. Add columns (b), (d), and (e)		0.	•	3,387.	
13 Total. Add line 12, columns (b), (d), and (e)				13	3,38/.
(See worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities		molishment of F	yemnt P	urnoses	
Line No. Explain below how each activity for which in	<u> </u>			<u> </u>	alichment of
the foundation's exempt purposes (other th			A COMMIDULE	importantly to the accomp	Maintent Of
	<del></del>	, , , , , , , , , , , , , , , , , , , ,			
		<del></del> -			
					<del></del>
<del></del>					
	-				
		<del></del> -		<del></del> -	
					<del></del>
	<del></del>				
	<del></del>				
	<del>-</del>	<del></del>		<del></del>	<u> </u>
	-				

Form 990-	PF (2009) THE G	FH & SAH FOU	JNDATION	47-08	816444 Page 13				
Part X	VII Information R	egarding Transfers		d Relationships With Nonc					
	Exempt Organ	nizations							
			following with any other organization		Yes No				
the C	ode (other than section 501(c	c)(3) organizations) or in se	ction 527, relating to political organiza	ations?					
a Trans	sfers from the reporting found	lation to a noncharitable ex	empt organization of:						
(1)	(1) Cash   1a(1)								
(2)	(2) Other assets								
<b>b</b> Other	r transactions:								
(1)	Sales of assets to a noncharita	able exempt organization			1b(1) X				
(2)	Purchases of assets from a no	oncharitable exempt organiz	zation		1b(2) X				
(3)	Rental of facilities, equipment,	, or other assets			1b(3) X				
(4)	Reimbursement arrangements	3			1b(4) X				
(5)	Loans or loan guarantees				1b(5) X				
, ,	Performance of services or me	,			1b(6) X				
	ing of facilities, equipment, ma				1c X				
				lys show the fair market value of the goo					
				in any transaction or sharing arrangeme	ent, show in				
	nn (d) the value of the goods, (b) Amount involved	· · · · · · · · · · · · · · · · · · ·	haritable exempt organization	(4)	<del></del>				
(a) Line no	(b) Amount involved	<del></del>	V/A	(d) Description of transfers, transactions	and sharing arrangements				
<del></del> _	<del></del>	<u> </u>	N/A		<del></del>				
		<del>                                     </del>		<u> </u>					
		<del> </del>							
					<del></del>				
	<del> </del>								
		<del> </del>			<del></del> _				
O- lo the	foundation dispaths as indicate	ath affiliated with as valated	110	han decembed					
	e roundation directly of moties ction 501(c) of the Code (othe	•	I to, one or more tax-exempt organiza	mons described	Yes X No				
	es," complete the following sch		ill Section 527		YesX_No				
	(a) Name of or		(b) Type of organization	(c) Description of relati	ionship				
	N/A				<u>·</u>				
I .	· · · · · · · · · · · · · · · · · · ·		ding accompanying schedules and statemer based on all information of which preparer hi	nts, and to the best of my knowledge and belief as any knowledge	f, it is true, correct,				
[ 2,7 22		11/1/	1 1 (1)						
ء 🕨 👵	various of officer or trucker	Hoan	4 8/15/10	TRUSTEE					
₽ <u> </u>	ignature of officer or trustee		Date /	Title te Check if Pi	reparer's identifying number				
Sign Here	Preparer's signature	. 01	ilan 8	self-	ope a citating number				
Sign Paid Preparer's Use Only	Firm's name of yours SEIN	A, JOHNSON,	SESTAX & QUIST, 1	LP employed ► [_]					
P. P.	Firm's name (or yours 5E 1 N 8807			300 EIN P	<del> </del>				
<u>~</u> =	address, and ZIP code OMAL		-4122	I	02)330-2660				
	<u> </u>			1. 110110 1101 1	Form <b>990-PF</b> (2009)				

02-02-10

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

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

OMB	No	1545-0047	7

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

2009

Employer identification number

TI	HE GFH & SAH FOUNDATION	47-0816444
Organization type (check of		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(c) General Rule	)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions
General Rule		
For an organizatio	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II	oney or property) from any one
Special Rules		
509(a)(1) and 170	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.	
aggregate contrib	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.	
contributions for u If this box is chect purpose Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not agone execution that were received during the year for an exclusive omplete any of the parts unless the <b>General Rule</b> applies to this organization because rule, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000 ely religious, chantable, etc ,
but it must answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ing 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)

	4	4	
Page	⊥of	of Part I	

Name of organization

Employer identification number

#### THE GFH & SAH FOUNDATION

47-0816444

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GEORGE HADDIX 7411 MAISON STREET RALSTON, NE 68127	\$ <u>3,480,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
0		\$	Person X Payroll
(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 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)

FORM 990-PF INTEREST ON SAV	INGS A	AND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
FROM K-1: MGAM CASH RESERVES INTEREST INCOME - FNB OMAHA INTEREST INCOME - OTHER						1,1 1,1 1,0	50.
TOTAL TO FORM 990-PF, PART I	, LINI	E 3, CO	LUMN A			3,3	60.
FORM 990-PF DIVIDENT	DS ANI	O INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
DEUTCHE BANK ALEX BROWN			28.		0.		28.
TOTAL TO FM 990-PF, PART I, I	LN 4		28.		0.	28.	
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPI	(A) ENSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
PROFESSIONAL FEES		360.		0.		360.	
TO FM 990-PF, PG 1, LN 16A		360.		0.		360.	
FORM 990-PF	A	CCOUNTI	NG FEES			STATEMENT	4
	,	(A)	(B)		(C)	(D)	D
DESCRIPTION	EXPI	ENSES BOOKS	NET INVI		ADJUSTED NET INCOM		
DESCRIPTION	EXPI	ENSES					

FORM 990-PF (	THER PROFES	SIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MGMT EXPENSE	20.	20.	-,	0.
TO FORM 990-PF, PG 1, LN 16C =	20.	20.		0.
FORM 990-PF	TAX	ES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAX	9,470.	9,470.	7.0	0.
TO FORM 990-PF, PG 1, LN 18 =	9,470.	9,470.		0.
FORM 990-PF				
FORM 990-FF	OTHER E	XPENSES		STATEMENT 7
	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE
DESCRIPTION  FROM K-1 - MGAM CASH	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE PURPOSES
DESCRIPTION  FROM K-1 - MGAM CASH RESERVES LLC	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION  FROM K-1 - MGAM CASH RESERVES LLC  TO FORM 990-PF, PG 1, LN 23	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME  214.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.
DESCRIPTION  FROM K-1 - MGAM CASH RESERVES LLC  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	(A) EXPENSES PER BOOKS  214.  214.  OTHER INV	(B) NET INVEST- MENT INCOME  214.  214.  ESTMENTS	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0.
DESCRIPTION  FROM K-1 - MGAM CASH RESERVES LLC  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	(A) EXPENSES PER BOOKS  214.  214.  OTHER INV	(B) NET INVEST- MENT INCOME  214.  214.  ESTMENTS	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  0.  0.  STATEMENT 8

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	9
NAME OF CONTRIBUTOR	ADDRESS		
GEORGE F. HADDIX	7411 MADISON STREET OMAHA, NE 68127		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	10

NAME OF MANAGER

GEORGE F. HADDIX SALLY A. HADDIX

## Form **88**00 (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

If you a	re filing for an Automatic 3-Month Extension, complete only Part I and check this box			ightharpoons
If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)		
Do not co	mplete Part II unless you have already been granted an automatic 3-month extension on a previously file	ed Fon	m 8868	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
•	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete		, —
Part I only	·			
	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an me tax returns	extens	sion of time	
noted belo not auton you must :	EFiling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension by (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file by/efile and click on e-file for Chanties & Nonprofits.	cally if insolidate	(1) you want t ted Form 990	he additional
Type or	Name of Exempt Organization	Empl	oyer identific	ation number
print	THE GFH & SAH FOUNDATION	4	7-08164	44
File by the due date for filing your	Number, street, and room or suite no. If a P.O box, see instructions 7411 MADISON STREET			
eturn See	City, town or post office, state, and ZIP code For a foreign address, see instructions.		<del></del>	
	RALSTON, NE 68127			
Check typ	e of return to be filed (file a separate application for each return)			
For	n 990 Form 990-T (corporation) Form 47	20		
=	n 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52			
For	n 990-EZ Form 990-T (trust other than above) Form 60	69		
X Form		70		
_	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi If it is for part of the group, check this box > and attach a list with the names and EINs of all			oup, check this ion will cover
ıs fo	puest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a rithe organization's return for.  X calendar year 2009 or , and ending		The extension	
2 If th	is tax year is for less than 12 months, check reason		Change in acc	ounting period
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions	2-	\$	0.
_	is application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	<u> </u>	<u>.</u>
	payments made include any prior year overpayment allowed as a credit.	3b	\$	0.
c Bala	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
dep	osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
See	instructions	3c	\$	0.
Caution. I	f you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-E	O for paymer	nt instructions.
LHA F	or Privacy Act r		Form 84	368 (Rev. 4-2009)
	Department of the Treasury  Certified Article Nu	mbe	r	
	Leaves I Provide Contra			
923831	Orden LIT 84201-0012 7160 3401 4846 663		- 15	
05-26-09	SENDEDS RECO	RD		
	mailed 5-12-10			

Form 8	868 (Rev 4-2009)				Pa	age 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and che	eck this box	·		▶ X	]
Note.	Only complete Part II if you have already been granted an automatic 3-month extension on a previous	ously filed l	Form 8	868.		
• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the one	gınal (no co	pies n	eeded).		
Туре	Name of Exempt Organization	., ,,	Empl	oyer identific	ation num	ıber
print	THE GFH & SAH FOUNDATION		4	7-08164	44	
File by extended	Number, street, and room or suite no. If a P.O. box, see instructions.		For IF	S use only		
filing the return s	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
Chec	k type of return to be filed (File a separate application for each return):  Form 990  Form 990-EZ  Form 990-T (sec. 401(a) or 408(a) trust)  Form 990-BL  Form 990-PF  Form 990-T (trust other than above)  Form 47	_	_	rm 5227 [ rm 6069	Form 8	3870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly file	d Form 8868.	•	
	GEORGE F. HADDIX					
	e books are in the care of $\blacktriangleright$ $7411$ MADISON STREET - OMAHA, NE 681	.27				
Te	ephone No. ► 402-505-6002 FAX No. ►					_
	he organization does not have an office or place of business in the United States, check this box				▶ ∟	╛
• If t	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)					this
box I		EINs of all r	<u>nemb</u>	ers the extens	sion is for.	
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.					
5		d ending	$\overline{}$			<b>—·</b>
6	If this tax year is for less than 12 months, check reason: Initial return Final ret	turn		Change in acc	counting pe	enod
7	State in detail why you need the extension	TNEOD	M A ITI	TON		
	NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.		rIA I	TON		
			—т	<del></del>		
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	y	8a	\$		0.
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimate	ated	Ua	<del>-</del>		
Ų	tax payments made include any prior year overnayment allowed as a credit and any amount paid					

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ F

previously with Form 8868.

Title > CPA

Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit

with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Jate 7 7 7 7 1 200

0.

8b\_

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