

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

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

OMB No 1545-0052 2009

Ford	alen	dar year 2009, or tax yea	r beginning			, and ending			
G C	heck	all that apply:	Initial return	-	Initial return of a fo		Name of the	Final return	ı
		Non	Amended re	eturn	<u>X</u> Address chang	je <u>L</u>	Name change	d==4!#!==+ ·	
	the l	RS Name of foundation					A Employer i	dentification	number
-	abel. erwis	MTCHARL T	ድ ኮልሞ	RTCTA	K BATZA FOUN	DATTON	52-1	853565	
	erwis print				elivered to street address)	Room/suite	B Telephone		
	type	501 FAIRM	A TRUC	VENUE		300	I	769-61	.00
	Spec	ific City or town, state, a							ending, check here
Inst	uctio	TOWSON, MI		86			D 1. Foreign	organizations	s, check here
H C	heck	type of organization:	X Section	n 501(c) <u>(3) e</u> x	cempt private foundation		2. Foreign of check her	rganizations me e and attach co	eeting the 85% test, proputation
		ction 4947(a)(1) nonexem			Other taxable private founda	<u></u>			tus was terminated
		rket value of all assets at	end of year	J Accounti	-	Accrual	under sect	on 507(b)(1))(A), check here
		Part II, col (c), line 16)		01	ther (specify)			60-month termination	
De				(Part I, Colu	mn (d) must be on cash b				(B), check here (d) Disbursements
Pē	rt I	(The total of amounts in colunecessarily equal the amount	ımns (b), (c), an		(a) Revenue and expenses per books	(b) Net investment income	(c) Adju		for charitable purposes (cash basis only)
_	1	Contributions, gifts, gran					N/.	<u> </u>	(oaci, oacid ority)
	2	Check X If the foundation							
	3	Interest on savings and temp							
	4	Dividends and interest fro	om securities	3	24,205.	24,205.			STATEMENT 1
	5a	Gross rents					<u> </u>		
	b	Net rental income or (loss)				-	<u> </u>		
ø.	6a	Net gain or (loss) from sale of			-411,963.		ļ.,	RE(EIVED
Revenue	b	Gross sales price for all assets on line 6a	2,416	<u>,622.</u>					
ě	7	Capital gain net income (from				0.	- 4 C	Alle	2 3 2010
	8	Net short-term capital ga	IN				24	HUU	1 0 m
	9	Income modifications Gross sales less returns	1						<u> </u>
	10a	and allowances					<u> </u>	OGL	EN, UT
		Less Cost of goods sold Gross profit or (loss)			-				
	11	Other income			250.	250.			STATEMENT 2
	12	Total Add lines 1 through	oh 11		-387,508.	24,455.			
	13	Compensation of officers, dir-		s, etc	0.	0.			0.
	14	Other employee salaries	and wages						
	15	Pension plans, employee	e benefits						
ses	16a	Legal fees						•	
gen ben	b	Accounting fees		_					
and Red Talkellive Es	С	Other professional fees	ST	'МТ 3	3,726.	3,726.			0.
	17	Interest	~	n em 4	044	11.0			
3	18	Taxes		MT 4	844.	416.			0.
	19	Depreciation and depletic	on				_		
AD.	20 21	Occupancy Travel, conferences, and	meetinge						
E	22	Printing and publications	_						
. 20 .	23	Other expenses		мт 5	45.	0.		-	45.
Moderating	24	Total operating and adn							
r i		expenses Add lines 13			4,615.	4,142.			45.
S	25	Contributions, gifts, gran	its paid		119,800.				119,800.
		Total expenses and dist	oursements.						
		Add lines 24 and 25		-	124,415.	4,142.	ļ		119,845.
	27	Subtract line 26 from line	e 12:						
	l	Excess of revenue over exper			-511,923.	0.000			
	!	Net investment income				20,313.		2	
9235		Adjusted net income (if r	negative, enter	-0-)	A . N	<u> </u>	N/	Α	Form 990-PF (2009)

=		0-PF(2009) MICHAEL J & PATRICIA K	BATZA FOUNDATION Beginning of year	ON 52-1 End of	L853565 Page 2
P	<u>art</u>	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	8,295.	2,450.	2,450.
	l	Savings and temporary cash investments	6,577.	49,361.	49,361.
	l	Accounts receivable	0,3//-	49,301.	±J,301.
	3	Less: allowance for doubtful accounts	-		
		Pledges receivable			
	7	Less; allowance for doubtful accounts	1		
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
	6			į	
	,	disqualified persons			
	7	Other notes and loans receivable	-		
	_	Less: allowance for doubtful accounts			
Assets	١.	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
-		Investments - U.S. and state government obligations	1 222 604	253,916.	350,432.
	1 -	Investments - corporate stock STMT 6 Investments - corporate bonds STMT 7	1,233,604.	323,415.	345,660.
	l		200,336.	323,413.	343,000.
	11	Investments - land, buildings, and equipment basis	-		
		Less accumulated depreciation			
	l	Investments - mortgage loans		100 242	227 700
	13	Investments - other STMT 8	0.	190,343.	237,709.
	14	Land, buildings, and equipment basis	-		
		Less accumulated depreciation	202 202	F00 606	E04 076
	15	Other assets (describe ► STATEMENT 9)	383,282.	500,686.	504,976.
	16	Total assets (to be completed by all filers)	1,832,094.	1,320,171.	1,490,588.
	17	Accounts payable and accrued expenses	1,032,034.	1,520,1710	1,470,300.
		Grants payable			
	18	Deferred revenue			
Liabilities	19				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable Other liabilities (describe ▶)			
	22	Other nablinies (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here		•	
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
JIC.	25	Temporarily restricted			
3ag		Permanently restricted			
Net Assets or Fund Balances	20	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
ŏ	27	Capital stock, trust principal, or current funds	1,832,094.	1,832,094.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass.	29	Retained earnings, accumulated income, endowment, or other funds	0.	-511,923.	
et/	30	Total net assets or fund balances	1,832,094.	1,320,171.	
Z	30	iotal het assets of fund paramees	1,032,034.	1,520,111.	
	31	Total liabilities and net assets/fund balances	1,832,094.	1,320,171.	
_					
<u> </u>	art	III Alialysis of Changes in Net Assets of Fund E	Dalalices		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	1,832,094.
2	Ente	r amount from Part I, line 27a		2	-511,923.
3	Othe	r increases not included in line 2 (itemize)	 	3	0.
4	Add	lines 1, 2, and 3	··	4	1,320,171.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	1,320,171.
					Form 990-PF (2009)

	rm 990-PF (2009) MICH Part IV Capital Gains a		& PATRICI s for Tax on In			DA'	TIO	<u>N</u>	5	2-185	3565	Page 3
			of property sold (e.g. nmon stock, 200 shs			(b) I	How ac - Purcl - Dona	quired hase ation		acquired lay, yr.)	(d) Date (mo., da	
<u>1a</u>									_			
_b	SEE ATTACHED	STATEM	ENT	 								
_					· · - ·							
_ <u>d</u>												
	(e) Gross sales price		lation allowed llowable)		at or other basis expense of sale					ain or (loss s (f) minus		
_ <u>a</u>							_					
_												
_6					<u>2,828,58</u>	5.						<u>,963.</u>
_	Complete only for assets showing			ı				1)	Gains (C	Col. (h) gaın not less tha	minus	
	(i) F.M.V. as of 12/31/69		12/31/69		cess of col. (1) col. (j), if any				Losses	(from col. ((h))	
_a												
_										16		
					 -						-411	,963.
	Capital gain net income or (net cap	oital loss)	If gain, also enter	n Part I, line	7 7	}	2					,963.
	Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c	s) as defined in			•	٦						
	If (loss), enter -0- in Part I, line 8	olullin (c).					3			N/A		
F	Part V Qualification Ur	nder Secti	on 4940(e) for	Reduced	Tax on Net	lnv	estn	ent Inc	ome			
lf : W	or optional use by domestic private section 4940(d)(2) applies, leave this as the foundation liable for the section of the sec	s part blank. on 4942 tax or	the distributable am	nount of any ye	ear in the base per		e.)				Yes	X No
1	Enter the appropriate amount in ea					es.						
	(a) Base period years Calendar year (or tax year beginnin	gın) Ac	(b) Ijusted qualifying dis	tributions	Net value of no	(c) ncha	rıtable-	use assets		Dıstrıt (col. (b) dıv	(d) oution ratio rided by col.	(c))
_	2008			1,125.				5,250				<u>46751</u>
	2007			5,178.				3,014				<u> 15284</u>
_	2006			5,450.		_1		<u>5,903</u>				<u>49320</u>
_	2005			3,250.				$\frac{7,948}{1,036}$				$\frac{71141}{42505}$
_	2004		59	4,773.			80	<u>1,036</u>	•	Ι .	• 1	<u>42505</u>
	Total of line 1, column (d) Average distribution ratio for the 5	waar baaa nar	and - duudo the total (an line 2 hy 5	or by the number	of vo	arc		2		1.1	25001
J	the foundation has been in existen			on line 2 by 3,	or by the number	UI yu	:a13		3		. 2	25000
4	Enter the net value of noncharitable	e-use assets fo	or 2009 from Part X,	line 5					4		1,400	,943.
5	Multiply line 4 by line 3								5		315	,212.
6	Enter 1% of net investment income	e (1% of Part I	, line 27b)						6		- · · · - 	203.
7	Add lines 5 and 6								7		315	<u>,415.</u>
8	Enter qualifying distributions from								8		119	,845.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check th	e box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax ı	rate.				

	990-PF	<u>, , , , , , , , , , , , , , , , , , , </u>	MICH	AEL	J &	PATRI	CIA K	BATZA	FOUN	DAT	ION		<u> 52-</u>	<u> 1853</u>	<u> 565</u>		Page 4
Par	t VI	Excise 1	Tax Base	ed on	Inves	tment In	come (Section 49	940(a),	4940(b), 4 <u>94</u> 0	(e), or 4	948	- see i	nstru	ction	าร)
1a	Exempt	operating four	ndations des	scribed i	n sectioi	n 4940(d)(2)	, check here	e 🕨 🔙 an	d enter "N/	'A" on lin	ne 1.)					
								py of letter if									
b	Domesti	ic foundations	that meet t	ne sectio	n 4940(e) requireme	nts in Part	V, check here		and en	ter 1%	}	1			4	<u>06.</u>
(of Part I	, line 27b															
C	All other	r domestic fou	ndations en	ter 2% o	of line 27	b. Exempt fo	reign organ	nizations enter	4% of Par	t I, line	12, col. (b)	J	i				
2	Tax und	er section 511	(domestic	section 4	4947(a)(1) trusts and	l taxable for	undations only	. Others er	nter -0-)			2				<u>0.</u>
3	Add line	s 1 and 2											3			4	06.
4	Subtitle	A (income) ta	x (domestic	section	4947(a)	(1) trusts an	d taxable fo	undations only	y. Others e	nter -0-))		4				0.
5	Tax bas	ed on investn	nent income	Subtra	ict line 4	from line 3.	If zero or le	ss, enter -0-					5			4	06.
6	Credits/I	Payments:								1							
a :	2009 es	timated tax pa	yments and	2008 ov	verpaym	ent credited	to 2009		6a			428.					
b	Exempt	foreign organ	ızatıons - ta:	c withhel	d at sou	rce			6b								
C	Tax paid	d with applicati	on for exter	ision of 1	time to f	ile (Form 886	3 8)		6c	ļ		600.					
d	Backup	withholding ei	rroneously v	vithheld					6d								
		edits and payn											7			<u>1,0</u>	<u> 28.</u>
								Form 2220 is a	attached				8				
		If the total of											9_	ļ			
								nount overpaid	d	_	1		10			6	22.
		e amount of li								6	22. Ref	unded 🚩	11_	L	_		<u>0.</u>
	-	A State	-		_										1	V	Nia
	_			ation atte	empt to	influence any	/ national, s	tate, or local le	egislation o	or did it j	participate c	r intervene	IN		<u> </u>	Yes	
		tical campaigr													1a		X
	•			-		_		for political pui							_1b		X
								he activities	апа сорю	es ot an	ny material	s publisne	a or				
		ited by the fo					ivities.								4.		v
		foundation file					4055\		the week						1c		<u> </u>
								nposed during				0					
								ndation manag			ad an faund	0.	-				
			ent (ii any) i		_	ation during	i tile year lu	r political expe	enunure ia	к інірозі	eu on lound	iation					
	-	rs. ► \$			<u>0 .</u>	our not near	uouolu boon	reported to th	no IDC2						2		x
		" attach a de					lously been	i reporteu to ti	ie ino								
				•			l to the IDS	, ın ıts governı	na inetriim	ant arti	clas of inco	rnoration (
								y of the cha		iciit, ai ti	CICS OF HICO	i poration, t)		3		X
								ore during the	-						4a		X
		has it filed a to			-		1,000 01 1110	oro daring the	your				N	/A	4b		
							contraction	n during the ye	ear?					,	5		x
		" attach the						i during the ye	.								
					-			4945) satisfie	d either:								
		iguage in the (-			,,									
	•				•	overnina ins	trument so	that no manda	atory direct	tions tha	at conflict w	ith the state	e law				
		ın ın the gover			9				•						6	Х	
7		foundation ha	-		assets a	it any time di	uring the ye	ar?							7	X	
		" complete F				•	,										
		-					ıt ıs register	red (see instru	ctions) 🕨								
-	MD						5	•	•								
b		swer is "Yes" 1	to line 7, has	the fou	ndation	furnished a c	copy of Forr	n 990-PF to th	ne Attorney	Genera	l (or design	ate)					
		state as requi							•		,	•			8b	X	
								the meaning o	f section 4	942(j)(3	3) or 4942(j)	(5) for cale	ndar				
								XIV)? If "Yes							9		_X_
10	Did any	persons beco	<u>me subs</u> tan	tial conti	ributors	during the ta	x year? if "Y	es," attach a sch	nedule listing	their nar	nes and addre	esses			10		X

orm 990-PF (2009) MICHAEL J. & PATRICIA K. B	ATZA FOUNDATI	ON	<u>52-18535</u>	<u>65 Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be f	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?	in addarbad in addition	□ v ₄	es X No	
	or advertional numbers or t		3 LAL NO	İ
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		es X No	
the prevention of cruelty to children or animals?	d th		יאונבם פי	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		iii negulalions	37/3	_
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	<u>5b</u>
Organizations relying on a current notice regarding disaster assistance check I				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. —		
expenditure responsibility for the grant?		I/A ∐ Ye	es No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es 🔀 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870		_		
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es 🗶 No 📙	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	y	
Paid Employees, and Contractors	, , <u>.</u>			
List all officers, directors, trustees, foundation managers and their		77.0		
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances
PATRICIA K. BATZA	OFFICER			
501 FAIRMOUNT AVENUE				
rowson, MD 21286	0.00	0.	0.	0.
MICHAEL J. BATZA	OFFICER			
501 FAIRMOUNT AVENUE	1			
rowson, MD 21286	0.00	0.	l o.l	0.
MAUREEN B. MORRIS	OFFICER			
501 FAIRMOUNT AVENUE				
rowson, MD 21286	0.00	0.	0.	0.
MICHELLE B. RAILEY	OFFICER			
501 FAIRMOUNT AVENUE	DITICER			
TOWSON, MD 21286	0.00	0.	0.	0.
Compensation of five highest-paid employees (other than those inc				
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	(e) Expense account, other allowances
NONE	devoted to position		compensation	unowanous
NONE				
		 		.
	+			
		 		
	+			
	4		}	
	4			
	I	<u> </u>		
Total number of other employees paid over \$50,000				0 000 DE (0000)
			Form	990-PF (2009)

923551 02-02-10

0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations i	nust complete this pa	rt Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le, etc., purposes:			
а	Average monthly fair market value of securities			1a	1,089,546.
b	Average of monthly cash balances			1b	47,731.
C	Fair market value of all other assets			1c	285,000.
d	Total (add lines 1a, b, and c)			1d	1,422,277.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	1,422,277.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see instructions)		4	21,334.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o			5	1,400,943.
6	Minimum investment return Enter 5% of line 5	•		6	70,047.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here and do not complete this part	****	g foundations ar	id certain	
1	Mınımum ınvestment return from Part X, line 6			1	70,047.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	406.		
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b	•		2c	406.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	69,641.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	69,641.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1		7	69,641.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	poses:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	119,845.
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 charita	ble, 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	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, a	nd Part XIII, line 4		4	119,845.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invo				
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4			6	119,845.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years v	when calculating whether	the foundation of	qualifies for	

4940(e) reduction of tax in those years.

Page 9

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				69,641.
2 Undistributed income, if any, as of the end of 2009			0	
a Enter amount for 2008 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2009:		0.		
a From 2004 558,575.				
b From 2005 23,401. c From 2006 138,126.				
d From 2007 116, 780.				
e From 2008				
f Total of lines 3a through e	836,882.			
4 Qualifying distributions for 2009 from	030,002.		·	
Part XII, line 4: ► \$ 119,845.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				69,641.
e Remaining amount distributed out of corpus	50,204.			
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:	007 006			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	887,086.			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		U•		
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				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	558,575.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	328,511.			
10 Analysis of line 9:				
a Excess from 2005 23, 401.				
b Excess from 2006 138, 126.				
c Excess from 2007 116,780.				
d Excess from 2008				
e Excess from 2009 50, 204.				Form 990-PF (2009)

				52-18	353565 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2009, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the foun	dation is a private operati	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
a If the foundation his seceed a ruling or determination space instructions and Part VIII-A, question 9) a If the foundation, and the ruling is effective for 2005, either the date of the ruling of the discrete for 2005, either the date of the ruling of the discrete for 2005, either the date of the ruling of the discrete for the adjusted on the adj					
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					
•					
c Qualifying distributions from Part XII.					
•					
•					
•					
(.)					
under section 4942(j)(3)(B)(i)					
shown in Part X, line 6 for each year					
and 5 or more exempt					
organizations as provided in					
			ļ		
• • •					
, ,			 		
	restion (Comple	de this new entr	if the foundation	n had \$5 000 ar m	oro in cocoto
			in the loundation	ii iiau \$5,000 oi iii	ore in assets
				100 m	_
		than 2% of the total cor	tributions received by th	e foundation before the cl	ose of any tax
					•
NONE					
			(or an equally large por	tion of the ownership of a j	partnership or
other entity) of which the foundation ha	is a 10% or greater intere	est			
NONE					
	•	•	-		
	·			complete items 2a, b, c, an	<u>d d.</u>
a The name, address, and telephone num	iber of the person to who	m applications should b	e addressed:		
b The form in which applications should	oe submitted and informa	ation and materials they :	should include:		
c Any submission deadlines:		-		–	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	s, kinds of institutions, or	other factors:	
2 . my room londing of minimulating off undire	-, - 20 20 2) goog, apine		.,		

2 Create and Contain the David During the V		Day		
3 Grants and Contributions Paid During the You	ear or Approved for Future	Payment	I	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	ļ	
a Paid during the year SEE ATTACHED RECIPIENT STMT	or substantial contributor	recipient		119,800.
Total	"T	1	<u>▶ 3a</u>	119,800.
NONE				
Total			<u>▶ 3b</u>	0.

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

Enter gross amounts unless otherwise indicated.	Unrelate	o business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Iulicuoti ilicollic
a					
b					
c					•
d			<u> </u>		
e		_			
f				-	
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	24,205.	
5 Net rental income or (loss) from real estate:				21,2031	
a Debt-financed property	-				
			 -		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory			18	-411,963.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a CLASS ACTION LITIGATION					
b PROCEEDS			14	235.	
BROWN VENTURE INVESTORS					
d LP, SERIES 2000-A			14	15.	
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		-387,508.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	-387,508.
(See worksheet in line 13 instructions to verify calculations.)				_	
	- Ab - A	liabant of F		1 D	
Part XVI-B Relationship of Activities t	o the Acco	omplishment of E.	kemp	t Purposes	
Line No Explain below how each activity for which inco	me is reported	ın column (e) of Part XVI-	\ contrib	outed importantly to the accord	plishment of
the foundation's exempt purposes (other than	by providing fu	nds for such purposes).			
				·	
		··			*** · <u>-</u>
					· · · ·
					
					
					
					·
					·
923621 02-02-10					Form 990-PF (2009)
02 02-10					

the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X	Р	art XV	Information Re Exempt Organ		and Transactions a	nd Relationships With Nonch	aritable	9	<u> </u>
the Code (other than section 501(c)(3) or ganzations) or in section 527, relating to political organizations? 1 Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Sales of assets to a noncharitable exempt organization (2) Other sacets (3) Restal of facilities, equipment, or other assets (4) Remitturation of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remitturation of reviews or membership or fundrasing solicitations (5) Loans or foan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) White properties of the services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (10) Performance of services or membership or fundrasing solicitations (11) India Services (12) Loans or foan guarantees (13) Loans or foan guarantees (14) Membership or any of the above or "rest, "complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services received. (9) Name of organization (10) Responsibility organization (10) American any transaction or sharing arrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 5217? (9) If "Yes, Complete the following schedule. (9) Name of organization (9) Perpandicular sharing in the following schedule. (9) Name of organization (9) Perpandicular sharing in the following schedule. (9) Name of organization (9) Perpandicular sharing in the following schedule. (9) Name of organization (9) Remittee in the following schedule. (9) Name of organizatio	1	Did the	organization directly or indi	rectly engage in any of the follow	ving with any other organization	n described in section 501(c) of		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (1) Cash of assets (2) Purchases of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or dran guarantees (6) Performance of severes or membership or fundrasing solicitations (7) The arrangement of activities, equipment, making lists, other assets, or paid employees (8) The arrangement or any of the above ≈ Yes, complete the following solicitations (9) Performance of severes green by the reporting foundation. If the foundation received lises than fair market value in any transaction or sharing arrangement, show in obtaining (b) the value of the goods, other assets, or services green by the reporting foundation. If the foundation received lises than fair market value in any transaction or sharing arrangement, show in obtaining (b) the value of the goods, other assets, or services received. 2a) Live in (b) Amount involved (c) Name of noncharitable exempt organization (d) pescription of transfers, transactions, and arrangements. 2b) If Yes, complete the following spledelue. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Linguistic Strategies of transfers transactions, and arrangements. (b) Properties of transfers transactions, and arrangements. (c) Description of relationship N/A Linguistic Strategies of transfers transactions, and arrangements. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Linguistic Strategies Type of transfers transactions, and arrangements are distincted and additional transfers transactions and additional transfers transactions are descripting number of transfers transactions are descripting number of transfers. Linguistic Strategies Type of transactions are descripting number of transfers transactions are descripting number of transaction									
(2) Other sacets b Other transactions: (1) Sakes of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Bothless, quipment, or other assets (4) Remburs bernetiner arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations c Sharing of Bothless, equipment, making lists, other assets, or paid employees d if the answer to any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the following schedule. Column (d) the value of the goods, other assets, or services received. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization or sharing arrangement, show in section 501(c) of the Code (other than section 501(c)) of the Code (other than s	а								
(2) Other assets (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organization (5) Rental organization (6) Rental organization (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) A state answer to any of the above is "Ves," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation necessed less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of transfers, transactions, and altump arrangement. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (d) Description of transfers, transactions, and altump arrangement. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (e) Description of relationship. 3a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than sections 501(c)) of the Code (other than sections 50			· · · · · · · · · · · · · · · · · · ·	•			1a(1)		X
10 No.									X
(2) Purchases of assets from a nonchartable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organizations (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) It the answer in any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services sectioned. (9) It we value of the poods, other assets, or services received. (9) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Secretion of transfers, transactions, and sharing arrangements (11) N/A (12) N/A (13) N/A (14) Description of transfers, transactions, and sharing arrangements (15) Loans or loan guarantees (15) Loans or loan guarantees (15) Loans or loan guarantees (16) X (16) X (17) Secretion of transfers, transactions, and sharing arrangement, show in column (1) the value of the goods, other assets, or services received. (17) N/A (18) N/A (19) N/A (19) N/A (19) N/A (10) Description of transfers, transactions, and sharing arrangement, and to the beast of my knowledge and belled, it is four, correct, secretions, graphs of present as describing a purpose in transfers, transactions and belled, it is four, correct, secretions, graphs and the sharing and the correct of the poods of the	b								
(2) Purchases of assets from a nonchartable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental organizations (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) It the answer in any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services sectioned. (9) It we value of the poods, other assets, or services received. (9) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Amount involved (10) Amount involved (10) Name of noncharitable exempt organization (10) Secretion of transfers, transactions, and sharing arrangements (11) N/A (12) N/A (13) N/A (14) Description of transfers, transactions, and sharing arrangements (15) Loans or loan guarantees (15) Loans or loan guarantees (15) Loans or loan guarantees (16) X (16) X (17) Secretion of transfers, transactions, and sharing arrangement, show in column (1) the value of the goods, other assets, or services received. (17) N/A (18) N/A (19) N/A (19) N/A (19) N/A (10) Description of transfers, transactions, and sharing arrangement, and to the beast of my knowledge and belled, it is four, correct, secretions, graphs of present as describing a purpose in transfers, transactions and belled, it is four, correct, secretions, graphs and the sharing and the correct of the poods of the		(1) Sa	ales of assets to a noncharita	able exempt organization			16(1)		х
(4) Reinbursement arrangements (4) Reinbursement arrangements (5) Loans or loan parantees (6) Performance of services or membership or fundraising solicitations (7) Loans or loan parantees (8) Performance of services or membership or fundraising solicitations (8) End of the answer to any of the above is "Yes," complete the following schedulae. Column (6) should always show the fair market value of the goods, other assets, or services or services governed less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of wanities, viersactions, and sharing arrangements. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(s)) or in section 527? 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(s)) or in section 527? 3b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10		-							
(e) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Example of facilities, equipment, making lasts, other assets, or paid employees (8) If the answer to any of the above as "ex-s, complete the following schedulus. Column (b) should always show the fair market value of the goods, other assets, or services received. (9) If the convent of the goods, other assets, or services received. (9) Amount involved (1) Amount involved (2) Name of noncharitable exempt organization (3) Line no (4) Name of noncharitable exempt organization (5) Amount involved (6) Name of noncharitable exempt organization (6) Description of transfers, transactions, and sharing arrangement. (6) If the Code (other than section 50 f(c)(3)) or in section 52?? (8) If Yes, complete the following schedulus. (9) If Yes, complete the following schedulus. (9) If Yes, complete the following schedulus. (1) If Yes, complete the following schedulus. (1) If Yes, complete the following schedulus. (1) If Yes, complete the following schedulus and an information of which preparer is a mark proper in the factor of th				· -					
(6) Performance of services or membership or fundrasing solicitations (7) Enformance of services or membership or fundrasing solicitations (8) Enformance of services or services (as the assets, or paid employes (8) It the answer to any of the above 5° Yes, complete the following schedule, Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) I me no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N / A									
(6) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, making lists, other assets, or paid employees d the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. a) Line in (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of fransfers, transactions, and sharing arrangements. N/A									
Sharing of facilities, equipment, mailing lists, other assets, or paid employees If I A If the answer to any of the above is "es," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation deceeved less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements				embership or fundraising solicita	tions				
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (c) the value of the goods, other assets, or services received. a) Line for (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of varieties, transactions, and sharing arrangements N/A	C								
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A					-	avs show the fair market value of the goods	s. other ass	ets.	
column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? If Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Understanding it genus, I declare thay they desarrined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and school of the code (other than section 50 they be carrined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and school of the code (other than section) to the performance of proposition of the section of the code (other than section) to the performance of the performance of proposition of the section of the code (other than section) to the performance of the perfor	•								
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under Denative N garpury, Localize thay! have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete the flags of the flags of the filide of trushed examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and constitution of the flags of t						, , , , , , , , , , , , , , , , , , , ,	,		
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? In Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship In Yes, complete the following schedule.	(a)	Line no	(b) Amount involved	(c) Name of noncharital	ble exempt organization	(d) Description of transfers, transactions, ar	nd sharing ar	rangeme	ents
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? In Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship In Yes, complete the following schedule.			• •	N/A	·				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?					-		•		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			· ·····				. · · · · · · · · · · · · · · · · · · ·		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				<u> </u>	****				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	_		· · · · · · · · · · · · · · · · · · ·						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	22	Is the	foundation directly or indirec	tly affiliated with or related to o	ne or more tax-exempt organiz	ations described			
b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, area complete perforation of prepare form that tax payer or fiduciary) is based on all information of which preparer has any knowledge Spinature of officer of truetee Date Date Check if self-employed Firm's name (or yours RSM MCGLADREY INC. It self-employed). 100 INTERNATIONAL DRIVE, SUITE 1400							☐ Yes	X	T No
(a) Name of organization N/A Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete declaration of preparer forms than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Schnature of officer of truette Date Preparer's Signature Rim's name (or yours if self-employed). 100 INTERNATIONAL DRIVE, SUITE 1400	ŀ						100		
N/A Under benalties of perjury. I declare thay! have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete perparation of preparation	_				(b) Type of organization	(c) Description of relation	nship		
Under benalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepare (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Symature of officer of trustee Date Title					,,,,,	.,,			
and complete decaration of preparation of that taxpayer or fiduciary) is based on all information of which preparer has any knowledge Synature of officer or truetee Date Title									
and complete decaration of preparation of that taxpayer or fiduciary) is based on all information of which preparer has any knowledge Synature of officer or truetee Date Title									
and complete decaration of preparation of that taxpayer or fiduciary) is based on all information of which preparer has any knowledge Synature of officer or truetee Date Title									
and complete decaration of preparation of that taxpayer or fiduciary) is based on all information of which preparer has any knowledge Synature of officer or truetee Date Title									
Sphature of officer of trustee Sphature of officer of trustee Date Title		Under De	nalties of perjury, I declare that I	haye examined this return, including ac	ccompanying schedules and stateme	ents, and to the best of my knowledge and belief, it	is true, corre	ect,	
Spriature officer of trustee Date Title		and comp	plete declaration of preparer of	er than taxpayer or fiduciary) is based of	on all information of which preparer h	nas any knowledge			
Spriature officer of trustee Date Title			// Mulu ST	1 Dutto a 197	1 8/12/10	OPFIC ZA			
Him's name (or yours RSM MCGLADREY INC. EIN ► EIN ►	e l	SA	nature of officer of truetee	779					
Him's name (or yours RSM MCGLADREY INC. EIN ► EIN ►	Ĭ					ate Check If Prep	arer's identif	ying nun	nber
Him's name (or yours RSM MCGLADREY INC. EIN ► EIN ►	ē	ج ہے		7/1 LJ		self-			
if self-employed). address, and ZIP code BALTIMORE, MARYLAND 21202 Phone no. (410)246-9300	מ	등용등		MCGLADREY INC					
address, and ZIP code BALTIMORE, MARYLAND 21202 Phone no. (410)246-9300		S G P			DRIVE SHITTE		· 		
		ادة					0)246	-93	00

MICHAEL J & PATRICIA K BATZA FOUNDATION Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a SALES OF PUBLICLY TRADED SECURITIES FROM BROWN IN VARIOUS VARIOUS P P b SALES OF PUBLICLY TRADED SECURITIES FROM CHARLES VARIOUS VARIOUS P c BROWN VENTURE INVESTORS LP, SERIES 2000-A VARIOUS VARIOUS d CAPITAL GAINS DIVIDENDS e g h k m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) -491,515. 2,389,873 1,898,358. 438,712. 73,587. 512,299. b 5,156. 5,156. C 809. 809. d g h m Π 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (ı) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any -491,515. 73,587. b 5,156. 809. d h m 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 -411,963. Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 N/A

FORM 990-PF DIVID	ENDS AND	INTER	EST	FROM	SECU	JRITIES	STATEMENT	1
SOURCE		GROSS	AMC	UNT		PITAL GAINS DIVIDENDS	COLUMN (A	.)
BROWN INVESTMENT ADVISORY TRUST COMPANY BROWN VENTURE INVESTORS LE			3,	310.		0.	3,3	10.
SERIES 2000-A CHARLES SCHWAB	_		21,	57. 647.		0. 809.	20,8	57. 38.
TOTAL TO FM 990-PF, PART I	, LN 4		25,	014.		809.	24,2	05.
FORM 990-PF	O ^t	THER I	NCOM	Œ			STATEMENT	2
DESCRIPTION			REV	A) ENUE BOOKS	S	(B) NET INVEST- MENT INCOME		
CLASS ACTION LITIGATION PE BROWN VENTURE INVESTORS LE 2000-A				2	235.	235 15		
TOTAL TO FORM 990-PF, PART	I, LINE	11			250.	250	•	
FORM 990-PF	OTHER I	PROFES	SION	AL FI	EES		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVI T INC				
INVESTMENT FEES PORTFOLIO DEDUCTIONS		2,585. 1,141.			,585. ,141.			0.
TO FORM 990-PF, PG 1, LN 1	.6C	3,726.		3 ,	,726.	•		0.

FORM 990-PF	TAXES			STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS		EST-	(C) ADJUSTED NET INCOM	CHARITAE		
FOREIGN TAXES PAID EXCISE TAXES	416. 428.		416.			0.	
TO FORM 990-PF, PG 1, LN 18	844.		416.			0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT		 5		
DESCRIPTION	(A) EXPENSES PER BOOKS		EST- ADJUSTEI				
BANK FEES	45.		0.		45		
TO FORM 990-PF, PG 1, LN 23	45.		0.		4	15.	
FORM 990-PF	CORPORAT	E STOCK	<u> </u>		STATEMENT	6	
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	?	
EHEALTH EQUITY MUTUAL FUNDS CHARLES SCHWAB ACCT - EQUITY	FUNDS			0. 0. 253,916.	350,43	0.	
TOTAL TO FORM 990-PF, PART II	, LINE 10B			253,916.	350,43	32.	
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	7	
DESCRIPTION			вос	OK VALUE	FAIR MARKET	?	
BROWN INTERMEDIATE BOND FUND CHARLES SCHWAB ACCT - BOND FU	JNDS			0. 323,415.	345,66	0.	
TOTAL TO FORM 990-PF, PART II	, LINE 10C	323,415.		323,415.	345,660.		

FORM 990-PF OT	HER INVESTMENTS	STATEMENT 8		
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
CHARLES SCHWAB ACCT - OTHER ASSET	S COST	190,343.	237,709.	
TOTAL TO FORM 990-PF, PART II, LI	NE 13	190,343.	237,709.	
FORM 990-PF	OTHER ASSETS		STATEMENT 9	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
CAROLINA RES FD LLC	97,055.	97,055.	97,055.	
BROWN ADVISORY PRIVATE EQUITY ACCEL VIII, LP LIFE INSURANCE POLICY	26,227. 260,000.	13,631. 390,000.	17,921. 390,000.	
TO FORM 990-PF, PART II, LINE 15	383,282.	500,686.	504,976.	

MICHAEL J & PATRICIA K BATZA FOUNDATION EIN 52-1853565 CONTIRBUTIONS, GIFTS, GRANTS PAID FORM 990, PART XV, LINE 3

Recipient	Address	Relationship to Contributor	Foundation Status	Purpose of Contirbution	Amount
Living Classrooms Foundation	1417 Thames Street, Baltimore, MD 21231	None	Public	Unrestricted	1,000
Active Survivor's Network	640 Piccadilly Rd, Towson, MD 21204	None	Public	Unrestricted	1,000
Catholic Charities	P O Box 17066, Baltimore, MD 21297-1066	None	Public	Unrestricted	20,000
UMBC Foundation	1000 Hilltop Circle, Baltimore, MD 21250	None	Public	Unrestricted	20,000
Notre Dame Preparatory School	815 Hampton Lane, Baltimore, MD 21286	None	Public	Unrestricted	40,000
Baltimore Chesapeake Bay Outward Bound Center	1900 Eagle Drive, Baltimore, MD 21207	None	Public	Unrestricted	5,000
Sarah's Hope Outreach Center	9100 Franklin Square Dr, Baltimore, MD 21237	None	Public	Unrestricted	5,000
PACT	7000 Tudsbury Road, Balitmore, MD 21244	None	Public	Unrestricted	2,000
Parks & People Foundation, Inc	800 Wyman Park Dr #10, Baltımore, MD 21211	None	Public	Unrestricted	5,000
Sisters of St Francis of Assisi	3221 S Lake Drive, St Francis, WI 53235	None	Public	Unrestricted	5,000
Hospice of Queen Anne's	300 Del Rhodes Ave, Queenstown, MD 21658	None	Public	Unrestricted	5,000
Boys Hope Girls Hope	250 S President St Suite 3500, Baltimore, MD 21201	None	Public	Unrestricted	4,000
Norbel School	7310 Park Heights Ave, Baltimore, MD 21208	None	Public	Unrestricted	500
Marian House	949 Gorsuch Ave, Baltimore, MD 21218	None	Public	Unrestricted	300
No More Stolen Childhoods	P O Box 1553, Cockeysville, MD 21030	None	Public	Unrestricted	1,000
St Vincent De Paul of Baltimore	2305 N Charles St, Suite 300, Baltimore, MD 21218	None	Public	Unrestricted	5 000
					119,800

Form **8868** (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

Form 8868 (Rev. 4-2009)

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	▶ X				
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)						
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi					
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)					
A cor	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete				
Part I	only	▶ □				
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	extension of time				
	income tax returns	an of time to file one of the returns				
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication at the stension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consist submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file irs gov/efile and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T Instead,				
Type		Employer identification number				
print	MICHAEL J & PATRICIA K BATZA FOUNDATION	52-1853565				
File by the due date for filing your return See instructions Number, street, and room or suite no. If a P.O. box, see instructions 901 SOUTH BOND STREET						
						Chec
	Form 990 Form 990-T (corporation) Form 47	720				
H	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52					
Ħ	Form 990-EZ Form 990-T (trust other than above) Form 60	 -				
X	Form 990-PF	370				
	THE FOUNDATION					
• Th	the books are in the care of 901 SOUTH BOND STREET - BALTIMORE, MD 2	1231				
	elephone No ► 410 – 769 – 6100 FAX No ►					
• If t	the organization does not have an office or place of business in the United States, check this box	▶ □				
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the					
box]	► ☐ If it is for part of the group, check this box ► ☐ and attach a list with the names and EINs of all	members the extension will cover				
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitary AUGUST 15, 2010 , to file the exempt organization return for the organization named a					
	is for the organization's return for					
	► X calendar year 2009 or					
	tax year beginning, and ending					
2	If this tax year is for less than 12 months, check reason	Change in accounting period				
3a	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	3a \$ 1,028.				
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3b \$ 428.				
С	tax payments made Include any prior year overpayment allowed as a credit Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	30 9				
•	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)					
	See instructions	3c \$ 600.				
Cauti	ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions				

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 886	88 (Rev. 4-2009)				Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and che	ck this box	(► X
	nly complete Part II if you have already been granted an automatic 3-month extension on a previo			868.	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)				
Part I	Additional (Not Automatic) 3-Month Extension of Time. Only file the orig	ınal (no co	pies n	eeded)	
_	Name of Exempt Organization		Empl	oyer iden	tification number
Type or		15 to			
print	MICHAEL J & PATRICIA K BATZA FOUNDATION	, ` `\	52	2-185	3565
File by the extended	Number, street, and room or suite no. If a P.O. box, see instructions	7 (Y ()	For IR	S use only	У
due date for filing the	901 SOUTH BOND STREET				
return See	City, town or post office, state, and zir code 1 of a foreign address, see instructions		``.	•	` <u> </u>
instructions	BALTIMORE, MD 21231	13, 3		٠ '	<u> </u>
Check t	ype of return to be filed (File a separate application for each return).	_	_		
Fo	orm 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 10	=	=	m 5227	Form 8870
U Fo	orm 990-BL X Form 990-PF Form 990-T (trust other than above) Form 47	20 _	Fo:	m 6069	
STOP! D	Oo not complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly file	d Form 88	168.
	THE FOUNDATION	MD 2	1 2 2 .	i	
	blooks are in the care of \triangleright 901 SOUTH BOND STREET - BALTIMORE, whose No. \triangleright 410-769-6100 FAX No \triangleright	FIL) Z.	145.	<u> </u>	
	organization does not have an office or place of business in the United States, check this box				
	s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this	ie for	the whole	group, check this
box ►	. If it is for part of the group, check this box . and attach a list with the names and E				
	equest an additional 3-month extension of time until NOVEMBER 15, 2010	1143 01 2/11	no moc	TO LITO OXI	CTIGIOTT IO TOT
-		ending			
	this tax year is for less than 12 months, check reason: Initial return Final ret			Change in	accounting period
	ate in detail why you need the extension	 ,	`		
	DDITIONAL TIME IS REQUIRED TO COLLECT INFORMATIO	N TO I	FILE	E A C	OMPLETE
	ND ACCURATE RETURN.				
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	,			
	onrefundable credits. See instructions.		8a	\$	1,028.
b If t	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estima	ited			
	x payments made Include any prior year overpayment allowed as a credit and any amount paid	i			
	reviously with Form 8868		8b	\$	1,028.
c Ba	alance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, dep	posit	1		
wi	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See inst	tructions	8c	\$	0.
	Signature and Verification				
Under per	nalties of perjury, I declare that I have examined this form, including accompanying schedules and statements	, and to the	best of	my knowle	dge and belief,
it is true,	correct, and complete, and that I am authorized to prepare this form.			ķ	3/5/2010
Signature	Disa M. Vfm Title ► CPT	• •	Date		
	\mathscr{O}			Forn	n 8868 (Rev. 4-2009)