

## 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**

Department of the Treasury Internal Revenue Service

G Check all that apply:

For calendar year 2009, or tax year beginning

Initial return

Amended return

# **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

Address change

Initial Return of a former public charity

, 2009, and ending

Name change

OMB No 1545-0052

2009

Final return

Employer identification number

Name of foundation Ā Use the IRS label. KLINGSTEIN FOUNDATION 54-6052224 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite В Telephone number (see the instructions) print (540) 421-3202 O. BOX 1124 or type. State ZIP code See Specific City or town C If exemption application is pending, check here Instructions. HARRISONBURG VA 22803 D 1 Foreign organizations, check here . Check type of organization: X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Fair market value of all assets at end of year J Accounting method: X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ▶\$ 291,583. (Part I, column (d) must be on cash basis under section 507(b)(1)(B), check here Analysis of Revenue and Part I (b) Net investment (a) Revenue and (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc. received (att sch) Ck ► X If the foundn is not req to att Sch B Interest on savings and temporary cash investments 859. 859. Dividends and interest from securities . 5a Gross rents b Net rental income or (loss) REVE 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 1099-R AIG ANNUITY 12,702 12,702 Total. Add lines 1 through 11 13,561 13,561 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) b Accounting fees (attach sch) L-16b Stmt 500. 125 375 c Other prof fees (attach sch) 17 Interest Taxes (attach scheduleXsee instr.) 2008 990-PF 62. Depreciation satisfies of VED 2,805. Occupancy . 5,610 2,805 Travel, conferences, and meet P Hing and public floors 19. Other expenses (attach schedu 21 22 23 Total operating and administrative 24 expenses. Add lines 13 through 23 3,180. 6,172 2,930 25 12,800. 12,800. Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 18,972 2,930 15,980. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -5,411 b Net investment income (if negative, enter -0-) 10,631

C Adjusted net income (if negative, enter -0-)

Dart		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
-ait	<u>",  ,                                  </u>	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
.	1	Cash — non-interest-bearing .	3,104.	6,131.	6,131.
-	2	Savings and temporary cash investments .			
	3	Accounts receivable .		_	 
ASSET		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less. allowance for doubtful accounts ▶			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			
		Less: allowance for doubtful accounts			
Š	8	Inventories for sale or use .			
F	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments — corporate stock (attach schedule) L-10b Stmt	35,684.	36,543.	30,619.
	c	: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less. accumulated depreciation (attach schedule)			
		Other assets (describe ► ANNUITY CONTRACT)	265,211.	254,833.	254,833.
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item l)	303,999.	297,507.	291,583.
Ļ	17	Accounts payable and accrued expenses .			
Å B	18				
B	19				
L	20	Loans from officers, directors, trustees, & other disqualified persons .		··	
I	21	Mortgages and other notes payable (attach schedule)	<del></del>		
ı	22	Other liabilities (describe			
E S	23				,
	•	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			:
N F E U T N	24	Unrestricted .			
ΤŇ	25	Temporarily restricted .	<u> </u>		
D	26				
A B A L A N		Foundations that do not follow SFAS 117, check here . X and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			
ŚŃ	28	Paid-in or capital surplus, or land, building, and equipment fund			,
O E	29	Retained earnings, accumulated income, endowment, or other funds	303,999.	297,507.	1
ŘŠ	30	Total net assets or fund balances (see the instructions)	303,999.	297,507.	1
	31	Total liabilities and net assets/fund balances			]
D		(see the instructions)	303 <u>,</u> 999.	297,507.	<u> </u>
		Analysis of Changes in Net Assets or Fund Balance			<del> </del>
1	Total	I net assets or fund balances at beginning of year — Part II, colum of year figure reported on prior year's return).	ın (a), line 30 (must agr	ee with	303 000
			••		303,999.
		r amount from Part I, line 27a	•	2	-5,411.
		increases not included in line 2 (itemize)		3	200 500
		lines 1, 2, and 3		4	298,588. 1,081.
5		ases not included in line 2 (itemize) Annuity unreal		5	
_6_	Total	I net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), lin	e 30 <b>6</b>	297,507.

Form 990-PF (2009) KLINGSTEIN FOUNDATION

54-6052224

Page 2

(a) List and describ	the kind(s) of property sold (e.g., rese, or common stock, 200 shares ML(	al estate,	How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	<del></del>	<del></del>	D — Donation		
b		<del></del>			
С					
d					
e	·			L	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	(loss) inus (g)
<u>a</u>					
b	<del> </del>				
<u> </u>	<u> </u>				<del></del>
e					
	ing gain in column (h) and owned by	the foundation on 12/31/69		(I) Course (Colu	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	) (	(I) Gains (Coli gain minus column (I an -0-) or Losses (fr	(), but not less
а					
b					
c					
d					
e					
If gain, also enter in Part I, ling in Part I, line 8	[loss] as defined in sections 1222(5) as e 8, column (c) (see the instructions)	If (loss), enter -0-	2 3		
\	e foundations subject to the section 49				
If 'Yes,' the foundation does not qua  1 Enter the appropriate amount  (a)	ction 4942 tax on the distributable amount of the distribu	nplete this part Instructions before making ar (c)		Yes(d)	X No
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asset	s (col	Distribution umn (b) divided	
2008	19,763.		762.	<u> </u>	0.064635
2007	15,612.		491.		0.047382
2006	12,069.		544.		0.037535
2005	16,358.		354.		0.049517
2004	15,598.	320,	888.	<del></del> _	0.048609
2 Total of line 1, column (d)			2	ļ	0.247678
	ne 5-year base period — divide the totan has been in existence if less than 5		3		0.049536
4 Enter the net value of nonchar	itable-use assets for 2009 from Part X	K, line 5	4		290,531.
5 Multiply line 4 by line 3			5		14,392.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		106.
7 Add lines 5 and 6			7		14,498.
8 Enter qualifying distributions fi	rom Part XII, line 4		<u>8</u>		15,980.
Part VI instructions.	than line 7, check the box in Part VI, I	ine 1b, and complete that part	using a 1%	tax rate. See the	

Form	990-PF (2009) KLINGSTEIN FOUNDATION 54-605222		P	age 4
<u>Part</u>		ictions)		
1 a	Exampt operating foundations described in section 4940(d)(2), check here .   I and enter 'N/A' on line 1	-		
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	06.
	check here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			4
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only. Others enter -0-)			<u> </u>
3	Add lines 1 and 2		1	06.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		]	06.
6	Credits/Payments:			
	2009 estimated tax pmts and 2008 overpayment credited to 2009			;
	Exempt foreign organizations — tax withheld at source . 6b			1
	Tax paid with application for extension of time to file (Form 8868)  6 c			1
_	Backup withholding erroneously withheld . 6d			
7	Total credits and payments. Add lines 6a through 6d			
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 .			106.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
Day	Enter the amount of line 10 to be. Credited to 2010 estimated tax			
	VII-A Statements Regarding Activities	<del></del>	V	Nic
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	Yes	No
	participate or intervene in any political campaign?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1ь		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
•	(1) On the foundation (1) On foundation managers . • \$			
	foundation managers . • \$			<u>'</u>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If 'Yes,' attach a detailed description of the activities			<u> </u>
9				]:
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
Ŀ	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>x</u>
	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			ļ
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	6	-	x
7	with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	<del>  ^</del>
φ.	Enter the states to which the foundation reports or with which it is registered (see the instructions)	<del>  '-'-</del>	Α.	<del>                                     </del>
02	Lines the states to which the foundation reports of with which it is registered (see the instructions)			
				[ '
Ł	olf the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General  (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b	X -	_
_			-1	<del>                                     </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		x
				<del></del>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10		x
BAA		Form 99	0-PF	

TEEA0304 07/06/09

	n 990-PF (2009) KLINGSTEIN FOUNDATION  † VII-A   Statements Regarding Activities Continued	54-605222	4	F	Page 5
rar	t VII-A   Statements Regarding Activities Continued			Γ	т
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 Website address	application?	13	х	
14	The books are in care of ► DONALD KOONTZ Telephor	ne no ► (540)	421	-320	J2
15	Located at ► P. O. BOX 124 HARRISONBURG VA ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	22803	- <b></b>		Π-
	and enter the amount of tax-exempt interest received or accrued during the year	. ► 15			
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1:	a During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			i
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			]
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruction)	ons)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🔲			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1 c		X
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)):				
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20				1
1	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(including to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(including listed, answer 'No' and attach statement — see the instructions.)	(a)(2) a)(2) to	2 b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	iere.			
	► 20, 20, 20, 20				ļ
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			
I	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)		3 b		-
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		x
I	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		×

BAA

Form **990-PF** (2009)

Form 990-PF (2009) KLINGSTEIN FOUNDA			54-605	2224	Page 6
Part VII-B   Statements Regarding Activiti		1 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur	•		П. П		
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	∐ Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	tion drive?	-	Yes X		
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	∐ Yes X	No	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or r animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to quality a current notice regardi	ualify under the exception ing disaster assistance	ons	5 b	
Organizations relying on a current notice regar	ding disaster assistance	e check here .	. ▶□		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	ibility for the grant?	•	Yes	No	
If 'Yes,' attach the statement required by Regu	lations section 53 4945-	5(d)			'
6a Did the foundation, during the year, receive an on a personal benefit contract?	•		Yes X		-
<b>b</b> Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870	ums, directly or indirectl	y, on a personal benefit	contract?	6 b	<u> </u>
7a At any time during the tax year, was the found	ation a party to a prohib	uted tax shelter transact	ion? Yes X	No.	
<b>b</b> If yes, did the foundation receive any proceeds				7b	<del></del> '
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	5,
and Contractors  1 List all officers, directors, trustees, foundation	n managers and their co	omponention (see instru	ections)		<del></del>
1 List all officers, directors, trustees, foundation	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	e account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	
DONALD KOONTZ					
P. O BOX 1124	PRESIDENT				
HARRISONBURG VA 22803	2.00	_0.	0.		0.
ROBERT_GILLETTE P. O. BOX 1621	  VICE PRESIDENT				
SUFFOLK VA 23432	0.00	1	0.		0.
DAVID KOONTZ				-	
2113 Grayson Place	SECY-TREAS				•
Falls Church, VA 22043	0.00	0.	0.		0.
2 Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to		
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense other allo	e account, owances
NONE			Compensation		
0					
0					
<del></del>					
0					
				· 	
0					
				İ	
Total number of other employees paid over \$50,000	····································		<b>•</b>		None
BAA	TEEA0306 0	77/06/09		Form 990	)-PF (2009)

11 . Y .

Form 990-PF (2009) KLINGSTEIN FOUNDATION 54-60  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	D52224 Page 7 Employees,
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	-
2	-
3	-
	-
	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	]
	-
All other program-related investments. See instructions.	
3	_
	<u> </u>
Total. Add lines 1 through 3	Form <b>990-PF</b> (2009)
	(2003)

·: .

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:  a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	15,980
<b>b</b> Program-related investments — total from Part IX-B	1b	13,300
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)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	15,980
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	106
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,874

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form 990-PF (2009)

• • • • •

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
Distributable amount for 2009 from Part XI, line 7				14,421.
2 Undistributed income, if any, as of the end of 2009.				13,321.
a Enter amount for 2008 only			8,630.	
<b>b</b> Total for prior years 20, 20, 20				<del></del>
3 Excess distributions carryover, if any, to 2009				
<b>a</b> From 2004 .				
<b>b</b> From 2005	†			
<b>c</b> From 2006 .	1			(
<b>d</b> From 2007	1			
e From 2008	-	ļ		
f Total of lines 3a through e .				
4 Qualifying distributions for 2009 from Part	· · · · · · · · · · · · · · · · · · ·	<del></del>		
XII, line 4 ► \$15,980.	Į.	•		
a Applied to 2008, but not more than line 2a	-		8,630.	~†
• • • • • • • • • • • • • • • • • • • •			0,030.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
<ul> <li>Treated as distributions out of corpus (Election required — see instructions)</li> </ul>				
<b>d</b> Applied to 2009 distributable amount		<u> </u>	\	<del></del>
e Remaining amount distributed out of corpus	7,350.			<del>,,,</del>
5 Excess distributions carryover applied to 2009		ļ		
(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	7,350.			
	7,330.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				;
d Subtract line 6c from line 6b. Taxable amount — see instructions .		0.		
e Undistributed income for 2008. Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be				14 421
distributed in 2010		<del></del>		14,421.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions) .	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	7,350.			
10 Analysis of line 9:				
a Excess from 2005 0 .	_			
<b>b</b> Excess from 2006 0.				
c Excess from 2007 0.				
d Excess from 2008 0.	7			
e Excess from 2009 7, 350.	]			
BAA	<del></del>	· · · · · · · · · · · · · · · · · · ·	<u></u>	Form <b>990-PF</b> (2009)

Form 990-PF (2009) KLINGSTEIN FOUND				54-605222	4 Page 10
Part XIV   Private Operating Foundation	ons (see instruc	tions and Part \	/II-A, question 9	9)	N/A
1 a If the foundation has received a ruling or do is effective for 2009, enter the date of the r	uling		,	and the ruling	
<b>b</b> Check box to indicate whether the foundation		ating foundation des		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<del></del>	Prior 3 years	1	
investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a .		<u> </u>			<del> </del>
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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter:					
(1) Value of all assets			ļ		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(X3XB)(III)					
(3) Largest amount of support from an exempt organization					,
(4) Gross investment income					
Part XV Supplementary Information assets at any time during th  Information Regarding Foundation Manag a List any managers of the foundation who h	e year — see in ers:	structions.)			
close of any tax year (but only if they have	contributed more t	han \$5,000) (See se	ection 507(d)(2))	eived by the loundar	ion before the
NONE					
b List any managers of the foundation who o a partnership or other entity) of which the f NONE	wn 10% or more of oundation has a 10	the stock of a corpo % or greater interes	oration (or an equall t.	y large portion of the	e ownership of
2 Information Regarding Contribution, Gran	t Gift Loan Schol	archin etc Program			
Check here X if the foundation only makes	akes contributions	to preselected chari	table organizations	and does not acceptizations under other	unsolicited conditions,
a The name, address, and telephone number	of the person to w	hom applications sh	ould be addressed:		
a the name, address, and telephone number	or the person to w	nom applications sin	ould be addressed.		
<b>b</b> The form in which applications should be s	ubmitted and inform	nation and materials	they should include	<b>3</b> '	
c Any submission deadlines:					· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charitabl	le fields, kinds of in:	stitutions, or other fa	ctors.
DAA		<del></del>			
BAA	ΤΕ	EA0310 07/06/09		F	Form <b>990-PF</b> (2009)

• • • • •

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or	status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient						
a Paid during the year								
BLUE RIDGE AREA FOOD BANK			1					
P. O. BOX 937								
VERONA VA 24482		PAID	SUPPORT OF COMMUNITY GIVING PROGRAM	200.				
BIG BROTHERS/BIG SISTERS		1	1					
225 N HIGH ST								
HARRISONBURG VA 22802		PAID	SUPPORT OF CHILDREN'S PROGRAM	100.				
BOYS & GIRLS CLUB								
620 SIMMS AVE								
HARRISONBURG VA 22802		PAID	SUPPORT OF CHILDREN'S PROGRAM	100.				
CAMP KALEIDOSCOPE								
25 MEDIA LANE	ŀ	DATE		200				
HARRISONBURG VA 22801		PAID	SUPPORT OF CHILDREN'S PROGRAM	200.				
EASTERN MENNONITE UNIVERSITY 1200 PARK RD		}						
		DATE		1 000				
HARRISONBURG VA 22802		PAID	SUPPORT OF EDUCATIONAL PROGRAMS	1,000.				
HARRISONBURG TURKS BASEBALL CLUE								
1489 S MAIN ST		DATE		750				
HARRISONBURG VA 22801		PAID	SUPPORT OF AMATEUR ATHLETICS	750.				
MASSANUTTEN REGIONAL LIBRARY								
174 S MAIN ST		DATE	CURROR BOR EDUCATION	400				
HARRISONBURG VA 22801		PAID	SUPPORT FOR EDUCATION	400.				
SALVATION ARMY								
895 JEFFERSON ST		DATE		400				
HARRISONBURG VA 22802		PAID	SUPPORT FOR COMMUNITY GIVING	400.				
SPCA 2238 OLD FURNACE RD								
HARRISONBURG VA 22802		PAID		400.				
See Line 3a statement		FAID	SUPPORT FOR ANIMAL HEALTH ACTIVITIES	400.				
See Line da statement								
				9,250.				
			i	3,200				
Total	<del>*</del>	·	► 3a	12,800.				
b Approved for future payment								
			}					
		ļ						
			]					
			İ					
Total			► 3b					

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

		amazurta velaga athanusa indicated	Liprolate	d business income	Fuglished	1 hu anation 512 512 or 514	
		amounts unless otherwise indicated.	(a) Business code	d business income (b) Amount	(c) Exclusion code	1 by section 512, 513, or 514 (d) Amount	(e)  Related or exempt function income (see the instructions)
	_		r	<del></del>	Loue	<del></del>	(see the instructions)
,	<u>'</u>		<del></del>		<del> </del>		<del></del>
					+-+		<del></del>
	d		i	<del> </del>			<del></del> -
9	g Fees	and contracts from government agencies					
2	Memb	ership dues and assessments		<del></del>			
3		on savings and temporary cash investments			ļļ		
4		ends and interest from securities			14	859.	
5		ntal income or (loss) from real estate		<del></del>	1	<del></del>	
		inanced property .	ļ		<del>  </del>	<del></del>	
		ebt-financed property			<del> </del>	<del></del>	
:		tal income or (loss) from personal property		<del></del>	<u> </u>		
7		investment income .	ļ		┽──┤	<del></del>	
8		(loss) from sales of assets other than inventory	ļ	<del></del>	+		<del></del>
9		come or (loss) from special events		<del></del>			<del> </del>
10		profit or (loss) from sales of inventory revenue:			+		
11			<u> </u>		+		
			<del> </del>		+		
						<del></del>	
			h		<del>                                     </del>		
		<del></del>	<del>                                     </del>	·	<del>                                     </del>	<del></del>	
	e						
	e Subto	tal Add columns (b), (d), and (e)			+	859.	
12	Subto	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)				859. 13	859.
12 13	Subto	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	culations)				
12 13 (See	Subto Total.	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify cal		ichment of Event	at Burn	13	
12 13 (See	Subto Total.	Add line 12, columns (b), (d), and (e)		ishment of Exemp	ot Purpo	13	
12 13 (See	Subto Total. worksl t XVI- ne No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. worksl	Add line 12, columns (b), (d), and (e) neet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. worksl t XVI- ne No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. worksl t XVI- ne No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. worksl t XVI- ne No.	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		oses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		nses	859.
12 13 (See	Subto Total. works t XVI-	Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify cal  B Relationship of Activities to the	Accompl	·		nses	859.

BAA

Form **990-PF** (2009)

-	rm 990-P	<del></del>	TEIN FOUN		1.7		15 1 11 1		052224		ge 13
<u> </u>	art XVII	Exempt Organ	egarding Tr nizations	ansfers To and	1 ransactio	ns and	d Relationsr	iips With No	ncharitable	!	
	1 Did th	o organization dispetly	or indirectly or	and in any of the	followns with					Yes	No
	descri	e organization directly bed in section 501(c) o	of the Code (ot	her than section 50	01(c)(3) organiz	ations)	or in section 52	7,			!
		ng to political organizat		a nanaharitahla ay							
	(1) C	fers from the reporting	Touridation to	a nonchantable ex	empt organizati	on or			1a (1)	-	х
	` '	ther assets .							1a (2)		X
	• •	transactions.							12 (-7		
	(1) S	ales of assets to a non	icharitable exei	npt organization					1 b (1)		Х
	<b>(2)</b> P	urchases of assets from	m a noncharita	ble exempt organiz	zation				1 b (2)		Х
	<b>(3)</b> R	ental of facilities, equip	oment, or other	assets					1 b (3)		Х
		eimbursement arrange							1 b (4)		X
		oans or loan guarantee							1 b (5)		X
	٠.,	erformance of services				_			1b (6)		X
	C Shani	ng of facilities, equipmi	ent, maning iis	is, other assets, or	paid employee	5			1c	LJ	X
	the ac	answer to any of the a bods, other assets, or s ansaction or sharing a	services aiven l	ov the reporting foi	undation. If the	foundati	on received les	s than fair mark	et value in	of	
(;	a) Line no	(b) Amount involved		of noncharitable exempt				sfers, transactions,		ngement	s
						•					
			<del> </del>								
_											
			1	<del></del> -			<del></del> ··				
_											
									·		
_											
									-		
					-						
_				<del></del>							
	descr	foundation directly or ibed in section 501(c) os,' complete the following	of the Code (ot	ited with, or related her than section 50	d to, one or mor 01(c)(3)) or in s	re tax-ex ection 5	kempt organiza 27?	tions	Yes	X	No
		(a) Name of organizat		<b>(b)</b> Туре	of organization		(0	) Description of	relationship		
		· · · · · · · · · · · · · · · · · · ·	···								
		<del></del>									
		·				-					
_		<del></del>	<del>.</del>								
	Lladar par	Olivon of province I deplete that	. I have avament th	us ratura unaludus sass					and ballating as a		
	complete (	alties of perjury, I declare that Declaration of preparer (other	than taxpayer or fic	luciary) is based on all i	nformation of which i	preparer h	as any knowledge	est or my knowledge :	and delier, it is trui	e, correc	it, and
				1							
S	►	onald to	./con	<u></u>		05	/12/10	► PRESIDE	ENT		
G	Sign	ature of officer or trustee		<u> </u>		Date		Title			
н	<u>                                     </u>	Preparer's	) [	1. 1.0.	40	Date	-1, 1	Check if	Preparer's Identify (See Signature in		
E R	Paid Pre-	signature	Myson	julvall		5	16110	self- employed ►			
E	parer's		NION ACCO	ONTING AND	TAX SVC.			EIN ►			
	Use Only	yours if self- employed), address, and	ROANOKE	RD							
	l	ZIP code DALE	VILLE_		v	A 24	083	Phone no ►			

Form-990-PF, Page 11, Part XV, line 3a

#### · Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address (home or business)	show any relationship to	status of re-	_	Checkbox
(Tome of business)	any foundation manager or substantial contributor	cipient		Amount
a Paid during the year VIRGINIA ATHLETIC FOUNDATION P. O. BOX 7275 CHARLOTTESVILLE VA 22906		 PAID	SUPPORT HIGHER EDUCATION	Person or Business X 8,500.
WWOZ-FM				Person or
P. O. BOX 51840				Business X
NEW ORLEANS LA 70151-99	5	PAID	SUPPORT FOR FINE ARTS	750.

Total

Total

9,250.

36,543. 30,619.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TOM WILSON & COMPANY	TAX RETURNS	500.	125.		375.
Total		500.	125.		375.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
WASHINGTON MUTUAL INVS FD INC A	36,543.	30,619.	