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# Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2009, and ending For calendar year 2009, or tax year beginning G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label Brendsel Family Foundation 54-6637308 Otherwise, Number and street (or P O box number it mail is not delivered to street address) Room/suite В Telephone number (see the instructions) print PO Box 6547 735 Swan Road (307) 739-9307 or type. State ZIP code See Specific City or town С If exemption application is pending, check here Instructions 83002-6547 **D** 1 Foreign organizations, check here Jackson WY X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated Ε 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 **►** \$ under section 507(b)(1)(B), check here 203,083. (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net Expenses (The total of amounts in expenses per books for charitable income ıncome columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see the instructions)) 400,000. 1 Contributions, gifts, grants, etc, received (att sch) if the foundn is not reg to att Sch B 2 Ck ► Interest on savings and temporary 23. 23. cash investments Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) REVEN 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 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) **W** 11 Other income (attach schedule) 67 12 Total. Add lines 1 through 11 400,023. 23. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) ADM-N-STRAT-VE 3,957. 100 **b** Accounting fees (attach sch) L-16b Stmt c Other prof fees (attach sch) 17 Interest 44. Taxes (attach schedule)(see instr.) Exclse Taxes 19 Depreciation (attach sch) and depletion 20 Occupancy Proces Environments 21 Printing and publications
Other penses (attach schedule)
See Cine 23 Stea 2 2 2010 22 136 Total operating and administrative expenses Add Inc. 13 through 22 Contributions after bank Mid UT 24 100 4,137. 202,779. 202,779. Total expenses and disbursements 100 202,779. Add lines 24 and 25 206,916 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 193,107.

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

0

Other increases not included in line 2 (itemize) 3 4 203,083. Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 203,083. 6

	(a) List and describe 2-story brick warehous	e the kınd(s) of property sold (e g , rea se, or common stock, 200 shares MLC	al estate, Company)	(b) How acc P — Purch D — Dona	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	<del></del>		·				
b			_				
C							
d	<u> </u>						
е	! 						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a							
b	<u> </u>						
	<del></del>						
			· · · · · · · · · · · · · · · · · · ·				
е	<del></del>	as some a solvery (b) and sound by th	no foundation on 12/21/60	-			
	(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by the column (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an			(I) Gains (Colu ain minus column (F an -0-) <b>or</b> Losses (fr	(), but not less
a	· · · · · · · · · · · · · · · · · · ·			-			<del></del>
t							
-							
•							
2	Capital gain net income or (net	capital loss) — If gain, also enter	enter in Part I, line 7 er -0- in Part I, line 7		2		
3	Net short-term capital gain or (	loss) as defined in sections 1222(5) ar	nd (6)				
	· -	e 8, column (c) (see the instructions)	_				
	in Part I, line 8	e a, column (c) (see the instructions)		,	3		
Pai		4040434					
(For		r Section 4940(e) for Reduced e foundations subject to the section 49 his part blank					
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual	e foundations subject to the section 49- nis part blank tion 4942 tax on the distributable amoi ify under section 4940(e) Do not com	40(a) tax on net investmen unt of any year in the base plete this part	t income ) period?		Yes	X No
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in the second sec	e foundations subject to the section 49- his part blank tion 4942 tax on the distributable amon ify under section 4940(e) Do not com n each column for each year, see the	40(a) tax on net investmen unt of any year in the base plete this part instructions before making	t income ) period?			X No
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual	e foundations subject to the section 49- nis part blank tion 4942 tax on the distributable amoi ify under section 4940(e) Do not com	40(a) tax on net investmen unt of any year in the base plete this part	t income ) period? any entrie	S	(d) Distribution umn (b) divided	n ratio
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year	tion 4942 tax on the distributable amounts under section 4940 (e) Do not compose a column for each year, see the Adjusted qualifying distributions	unt of any year in the base plete this part instructions before making (c)  Net value of noncharitable-use ass	t income ) period? any entrie	S	(d) Distribution	n ratio
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year beginning in)	e foundations subject to the section 49- nis part blank tion 4942 tax on the distributable amoing under section 4940(e). Do not comin each column for each year, see the	unt of any year in the base plete this part instructions before making (c)  Net value of noncharitable-use ass	t income )  period?  any entrie	S	(d) Distribution	n ratio by column (c))
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year beginning in)	tion 4942 tax on the distributable amounty under section 4940(e) Do not composed to compose the column for each year, see the (b)  Adjusted qualifying distributions	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass	period?  any entrie sets  8,384. 5,339. 4,210.	S	(d) Distribution	1.713212 0.831488 0.314199
(For If se Was	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year beginning in)  2008 2007	to foundations subject to the section 49 chis part blank tion 4942 tax on the distributable amounty under section 4940(e). Do not compose ach column for each year, see the (b) Adjusted qualifying distributions  219,949. 295,460.	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass	period?  any entrie sets  8,384.  5,339.	S	(d) Distribution	1.713212 0.831488 0.314199 0.466435
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(For If see Was If 'Ye' 1	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in the foundation does not qual Enter the appropriate amount in the foundation of the foundation does not qual enter the appropriate amount in the foundation of the foundation	re foundations subject to the section 49 for part blank  tion 4942 tax on the distributable among under section 4940(e). Do not compose a column for each year, see the (b)  Adjusted qualifying distributions  219,949.  295,460.  170,990.  332,750.  0.	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass 54 71  Il on line 2 by 5, or by the years	period?  any entrie sets  8,384. 5,339. 4,210. 3,390.	s (col	(d) Distribution	1.713212 0.831488 0.314199 0.466435 0.000000
(For If see Wass If 'Ye' 1	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in the foundation does not qual Enter the appropriate amount in the foundation of the foundation does not qual enter the appropriate amount in the foundation of the foundation	e foundations subject to the section 490 his part blank tion 4942 tax on the distributable amonify under section 4940(e). Do not complete ach column for each year, see the (b).  Adjusted qualifying distributions.  219, 949. 295, 460. 170, 990. 332, 750. 0.	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass 54 71  Il on line 2 by 5, or by the years	period?  any entrie sets  8,384. 5,339. 4,210. 3,390.	(col	(d) Distribution	1.713212 0.831488 0.314199 0.466435 0.000000 3.325334 0.665067
(For If see Wass If 'Ye' 1 2 3 4	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in the case of the foundation does not qual enter the appropriate amount in the case of the case o	e foundations subject to the section 49- nis part blank tion 4942 tax on the distributable amon ify under section 4940(e) Do not come n each column for each year, see the (b) Adjusted qualifying distributions  219,949. 295,460. 170,990. 332,750. 0.  ne 5-year base period — divide the total in has been in existence if less than 5 y stable-use assets for 2009 from Part X	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass 54 71  Il on line 2 by 5, or by the years	period?  any entrie sets  8,384. 5,339. 4,210. 3,390.	(col	(d) Distribution	1.713212 0.831488 0.314199 0.466435 0.000000 3.325334 0.665067 31,981.
(For If see Wass If 'Ye 1	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation.  Enter the net value of nonchar Multiply line 4 by line 3  Enter 1% of net investment income	e foundations subject to the section 49- nis part blank tion 4942 tax on the distributable amon ify under section 4940(e) Do not come n each column for each year, see the (b) Adjusted qualifying distributions  219,949. 295,460. 170,990. 332,750. 0.  ne 5-year base period — divide the total in has been in existence if less than 5 y stable-use assets for 2009 from Part X	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass 54 71  Il on line 2 by 5, or by the years	period?  any entrie sets  8,384. 5,339. 4,210. 3,390.	2 3 4	(d) Distribution	1.713212 0.831488 0.314199 0.466435 0.000000 3.325334 0.665067 31,981.
(For If see Wass If 'Ye' 1	optional use by domestic private ction 4940(d)(2) applies, leave the foundation liable for the seces, the foundation does not qual Enter the appropriate amount in (a)  Base period years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation.  Enter the net value of nonchar Multiply line 4 by line 3  Enter 1% of net investment income	e foundations subject to the section 490 his part blank tion 4942 tax on the distributable among under section 4940(e). Do not complete ach column for each year, see the (b).  Adjusted qualifying distributions.  219, 949. 295, 460. 170, 990. 332, 750. 0.	unt of any year in the base plete this part instructions before making (c) Net value of noncharitable-use ass 54 71  Il on line 2 by 5, or by the years	period?  any entrie sets  8,384. 5,339. 4,210. 3,390.	2 3 4 5	(d) Distribution	1.713212 0.831488 0.314199 0.466435 0.000000 3.325334 0.665067 31,981. 21,270.

Part VI	PF (2009) Brendsel Family Foundation 54-663 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the in		ons)		age
1 a Exemp	t operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1				
Date o	f ruling or determination letter (attach copy of letter if necessary - see instr.)				
<b>b</b> Dome	estic foundations that meet the section 4940(e) requirements in Part V,				
chec	k here ► X and enter 1% of Part I, line 27b				
c All oth	er domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
<b>2</b> Ταχ ι	under section 511 (domestic section 4947(a)(1) trusts and taxable				
found	dations only Others enter -0-)				(
3 Add	ines 1 and 2 .				(
4 Subt	tle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			···-	(
5 Tax I	pased on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u>			(
6 Cred	its/Payments				
<b>a</b> 2009 e	stimated tax pmts and 2008 overpayment credited to 2009 6a 489.				
<b>b</b> Exen	npt foreign organizations — tax withheld at source 6b				
c Tax p	paid with application for extension of time to file (Form 8868)  6c 0.				
<b>d</b> Back	up withholding erroneously withheld				
7 Total	credits and payments Add lines 6a through 6d			4	8
	r any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8	<u> </u>			
9 Tax d	ue If the total of lines 5 and 8 is more than line 7, enter amount owed	ļ			
O Overp	ayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	ļ		4	18
	the amount of line 10 to be. Credited to 2010 estimated tax				
art VII-	A   Statements Regarding Activities	<del></del>			
<b>1 a</b> Durir parti	ng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it cipate or intervene in any political campaign?		1 a	Yes	>
<b>b</b> Did i (see	t spend more than \$100 during the year (either directly or indirectly) for political purposes the instructions for definition)?		1ь		>
	e answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials publish stributed by the foundation in connection with the activities	ed			
<b>c</b> Did t	he foundation file Form 1120-POL for this year?	L	1 c		}
	r the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	On the foundation \$ (2) On foundation managers \$				ĺ
	r the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	dation managers \$the foundation engaged in any activities that have not previously been reported to the IRS?		2		}
			-		
	es,' attach a detailed description of the activities				
3 Has	the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		3	1	7
	corporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	-	4a		2
	he foundation have unrelated business gross income of \$1,000 or more during the year?	-	4b		
	es,' has it filed a tax return on <b>Form 990-T</b> for this year?	-	5		-
	nere a liquidation, termination, dissolution, or substantial contraction during the year?	-	3		H
	es,' attach the statement required by General Instruction T				
	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				l
-	language in the governing instrument, or			Î	
• Ву	state legislation that effectively amends the governing instrument so that no mandatory directions that conflic h the state law remain in the governing instrument?	:t	_	v	
		}-		<u>X</u>	⊢
	e foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	-	<del></del>		⊢
	r the states to which the foundation reports or with which it is registered (see the instructions)  - Wyoming	-	1	ļ	
<b>b</b> If the	answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General signate) of each state as required by <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>		8b	Х	
•		0()(E)	- 35		
for c	e foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 alendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? <i>If 'Yes,' complete Pa</i>	rt XIV	9		>
10 D.4	any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	s			
	addresses		10		1 3

а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
	If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or long

by the foundation er 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)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

Х 4 a 4h Form 990-PF (2009)

3b

Yes X No

BAA

Form <b>990-PF</b> (2009) Brendsel Family Fo			54-663	37 <u>308</u>	
Part VII-B   Statements Regarding Activiti		4720 May Be Requ	uired (continued)	<del> ·</del>	
5a During the year did the foundation pay or incu	ir any amount to				
(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	☐ Yes X	No	
	3				
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	iic election (see section ation drive?	1 4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,		purposes?		No	
	• •		es E	"	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, oi 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio			Yes X	No	į
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in	the transactions fail to	qualify under the except ding disaster assistance	tions		
(see instructions)?	. a carrotti tictico regan	anny andaotor adolotarios			b
Organizations relying on a current notice rega	· ·		▶ 📋		
c If the answer is 'Yes' to question 5a(4), does	the foundation claim ex	emption from the	□ v <sub></sub> □	N	
tax because it maintained expenditure respon-			Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive air on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums	Yes X	No	
<b>b</b> Did the foundation, during the year, pay prem <i>If 'Yes' to 6b, file Form 8870</i>	iums, directly or indirec	tly, on a personal benef			6 b
7a At any time during the tax year, was the found	dation a narty to a prob	ihitad tav chaltar transa	ction? Yes X	No	
					<u>'</u> ь
b If yes, did the foundation receive any proceed Part VIII Information About Officers, D				•	- ,
and Contractors	nectors, riustees,	i Junuation Mailag	jers, ruginy Falu E	pioye	.cs,
1 List all officers, directors, trustees, foundation	on managers and their	compensation (see inst	ructions).		
ist an omount, anectors, trustees, roundation	(b) Title and average		(d) Contributions to	(e) Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other	
Inland C. Brandael			compensation	<del> </del>	<u>-</u>
Leland C. Brendsel				1	
D // DAM 6647 736 C D	I Transation				
	Trustee	2	•		
P.O. Box 6547 735 Swan Road, Jackson WY 83001	Trustee 2.00	0.	0.		
JacksonWY 83001Billie D. Brendsel	2.00	0.	0.		
Jackson WY 83001 Billie D. Brendsel PO Box 6547 735 Swan Road,	2.00 Trustee				
	2.00	0.	0.	1	· · · · · · · · · · · · · · · · · · ·
Jackson WY 83001 Billie D. Brendsel PO Box 6547 735 Swan Road,	2.00 Trustee				
JacksonWY 83001Billie D. BrendselPO Box 6547 735 Swan Road,	2.00 Trustee				
JacksonWY 83001Billie D. BrendselPO Box 6547 735 Swan Road,	2.00 Trustee				
Jackson WY 83001  Billie D. Brendsel  PO Box 6547 735 Swan Road,  Jackson, WY 83001  2 Compensation of five highest-paid employee	2.00 Trustee 2.00	0 . Cluded on line 1— see in	0 . nstructions). If none, e		
Jackson WY 83001  Billie D. Brendsel  PO Box 6547 735 Swan Road,  Jackson, WY 83001	2.00 Trustee 2.00	0.	0.	nter 'NON (e) Expe	ense
Jackson WY 83001  Billie D. Brendsel  PO Box 6547 735 Swan Road, Jackson, WY 83001  2 Compensation of five highest-paid employee  (a) Name and address of each employee	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel  PO Box 6547 735 Swan Road,  Jackson, WY 83001   2 Compensation of five highest-paid employee  (a) Name and address of each employee paid more than \$50,000	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel  PO Box 6547 735 Swan Road,  Jackson, WY 83001   2 Compensation of five highest-paid employee  (a) Name and address of each employee paid more than \$50,000	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel PO Box 6547 735 Swan Road, Jackson, WY 83001  2 Compensation of five highest-paid employee (a) Name and address of each employee paid more than \$50,000  None	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel PO Box 6547 735 Swan Road, Jackson, WY 83001  2 Compensation of five highest-paid employee (a) Name and address of each employee paid more than \$50,000  None	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel PO Box 6547 735 Swan Road, Jackson, WY 83001  2 Compensation of five highest-paid employee (a) Name and address of each employee paid more than \$50,000  None  0	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense
Jackson WY 83001  Billie D. Brendsel PO Box 6547 735 Swan Road, Jackson, WY 83001  2 Compensation of five highest-paid employee (a) Name and address of each employee paid more than \$50,000  None  0	2.00 Trustee 2.00  es (other than those included	0 . Cluded on line 1— see in	o.  structions). If none, er  (d) Contributions to employee benefit plans and deferred	<b>(e)</b> Expe	ense

and Contractors (continued)	tion Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services — (see in enter 'NONE.'	structions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
		<del></del>
Total number of others receiving over \$50,000 for professional services	▶	Nor
Part IX-A   Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in briganizations and other beneficiaries served, conferences convened, research papers produced, etc.	formation such as the number of	Expenses
1		
2		
3		· · · · · · · · · · · · · · · · · · ·
4		
4		
Part IX-B Summary of Program-Related Investments (see Instruction		
4		Amount
Part IX-B Summary of Program-Related Investments (see Instruction Describe the two largest program-related investments made by the foundation during 1		Amount
Part IX-B Summary of Program-Related Investments (see Instruction Describe the two largest program-related investments made by the foundation during		Amount
Part IX-B Summary of Program-Related Investments (see Instruction Describe the two largest program-related investments made by the foundation during 1		Amount
Part IX-B Summary of Program-Related Investments (see Instruction Describe the two largest program-related investments made by the foundation during 1		Amount
Part IX-B Summary of Program-Related Investments (see Instruction Describe the two largest program-related investments made by the foundation during 1		Amount

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

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

Form **990-PF** (2009)

0.

202,779.

5

6

# Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
Distributable amount for 2009 from Part XI, line 7				1 500
2 Undistributed income, if any, as of the end of 2009				1,599.
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years 20, 20, 20				-
3 Excess distributions carryover, if any, to 2009				
<b>a</b> From 2004 0.				
<b>b</b> From 2005 283, 453.				
c From 2006 144, 283.				
<b>d</b> From 2007 296,000.				
e From 2008 213, 632.	005 000			
f Total of lines 3a through e	937,368.			<del> </del>
4 Qualifying distributions for 2009 from Part				
XII, line 4 \( \bigs \) \( \frac{202,779.}{}{}				
a Applied to 2008, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·			
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	202,779.			
5 Excess distributions carryover applied to 2009	1,599.			1,599.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
Same amount must be snown 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	1,138,548.			
<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 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) (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	1,138,548.			
10 Analysis of line 9				
<b>a</b> Excess from 2005 281,854.				
<b>b</b> Excess from 2006 144,283.				
c Excess from 2007 296,000.				
<b>d</b> Excess from 2008 213, 632.				
e Excess from 2009 202,779.				

orm <b>990-PF</b> (2009) Brendsel Family				54-6637308	
Part XIV Private Operating Foundation					N/A
1 a 1f the foundation has received a ruling or of is effective for 2009, enter the date of the	ruling	·			4040()(5)
<b>b</b> Check box to indicate whether the foundat		erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a		· · · · · · · · · · · · · · · · · · ·			
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<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					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(i)(3)(B)(i)</li></ul>					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter		-			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Information	(Complete this	part only if the	organization ha	ad \$5,000 or moi	re in
assets at any time during th  1 Information Regarding Foundation Management		istructions.)			
a List any managers of the foundation who li close of any tax year (but only if they have	nave contributed m	ore than 2% of the t than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the foun-	dation before the
Leland C. Brendsel Billie D. Brendsel					
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	ooration (or an equ est.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gra	nt. Gift. Loan. Scho	olarship, etc. Progra	ms:		
Check here X If the foundation only r requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	s to preselected chai	ritable organization	s and does not acce anizations under oth	ept unsolicited ner conditions,
a The name, address, and telephone number	er of the person to	whom applications s	should be addresse	d	
<b>b</b> The form in which applications should be	submitted and info	rmation and materia	ls they should inclu	ude	
c Any submission deadlines		-			
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charital	ble fields, kinds of	ınstitutions, or other	factors
BAA	TE	EEA0310 07/06/09			Form <b>990-PF</b> (2009)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year Queen Anne's Conservation Fund, Inc. Charitable PO Box 157 Centreville MD 21617 501(c)3 Support 180,000. Hospice of Queen Anne's Inc. Charitable 255 Comet Drive Support Centreville MD 21617 501(c)3 1,000. Chesapeake Wildlife Heritage Charitable Support 46 Pennsylvania Avenue Easton MD 21601 501(c)3 10,000. Queen Anne's Conservation Association P.O. Box 157 Centerville MD 21617 501(c)3 Charitable Support 11,779. Total ...... 202,779. b Approved for future payment 3Ь Total .....

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

Enter•gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	1 by section 512, 513, or 514	
1 Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu sion code	( <b>d)</b> Amount	(e) Related or exempt function income (see the instructions)
a					
<b>b</b>			ļ		
C			<del> </del>		
d					
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments		·			
3 Interest on savings and temporary cash investments			14	23.	
4 Dividends and interest from securities		· · ·			-
5 Net rental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·			
a Debt-financed property		1			
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					*****
a					
b					
c					
d			-		
			1		
e			<del> </del>		<del></del>
e Subtotal Add columns (b), (d), and (e)				23.	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				23.	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify columns.				13	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		shment of Exempt	Purpo	13	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify columns.)	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.
e	e Accompli			13 ses	23.
e	e Accompli			13 ses	23.
e	e Accompli			13 ses	23.
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in the instructions for line 13 to verify compart XVI-B Relationship of Activities to the	e Accompli			13 ses	23.

Form <b>990-PF</b> (	(2009) Brendsel Family Foundation	54-6637308	_Page 13
Part XVII	Information Regarding Transfers To and Transactions and	Relationships With Noncharitable	
•	Exempt Organizations		

_	•	Exempt	Organi	izations									
	descr	ibed in section	501(c) o	f the Code (o	engage in a other than so	ny of the follo ection 501(c)(	wing with (3) organ	n any o Izations	ther organizations) or in sections!	n 527,		Yes	No
		ng to political of	•		a nonchari	table exempt	organiza	tion of					
<ul> <li>Transfers from the reporting foundation to a noncharitable exempt organization of</li> <li>Cash</li> </ul>										1 a (1)		x	
(2) Other assets									1 a (2)		X		
	• •	transactions									15 (2)		
		ales of assets	to a none	charitable exe	empt organi	zation					1 b (1)		x
	• • •	urchases of as					1				1 b (2)		X
	• •	ental of facilities			•						1 b (3)		Х
	• •	eimbursement		•							1 b (4)		Х
	(5) L	oans or loan gi	uarantees	S							1 b (5)		Х
	<b>(6)</b> P	erformance of	services	or membersh	up or fundra	aising solicital	tions				1 b (6)		Х
	<b>c</b> Sharı	ng of facilities,	equipme	ent, mailing lis	sts, other a	ssets, or paid	employe	es			1 c		X
	the a	oods, other ass	sets, or so haring ar	ervices given rangement, s	by the repo	ortina foundat	ion If the	e found e good:	ation received l s, other assets,	ess than fair or services re	fair market valumarket value in eceived		
_(4	a) Line no	(b) Amount ii	ivoiveu	(C) Name	OF HUHCHAFILAD	e exempt organiz	2411011	(0	Description of trai	isters, transaction	is, and sharing arrai	igenten	15
				<u>.</u>									
													<b></b>
_								,					
						<del></del>					. <del></del>		
	··												
					·· · ·	<del></del>							
		1			-						<u></u>		
		foundation dir ibed in section s,' complete th			ated with, o ther than s	or related to, ection 501(c)(	one or m (3)) or in	ore tax section	-exempt organii i 527?	zations	Yes	X	No
		(a) Name of o	rganızatı	on	(b)	) Type of orga	anızatıon		(0	c) Description	of relationship		
					·								
_		·											
_			<del></del>		<u> </u>				<u> </u>	<del> </del>	<del></del>		<del></del>
,	complete	Declaration of prepa	eclare that i	have examined translation taxpayer or fit	duciary) is base	d on all information	g schedules on of which	and state preparer h	ements, and to the behas any knowledge		e and belief, it is true	e, corre	ct, and
SIG	Sign	ature of officer or tri	ustee	NISIT.	MA UCL			Date	9,	Title	سري الم		<del></del>
G		[					Date	e		Preparer's Identify	เกฐ ถนฑ	nber	
H	Paid	Preparer's signature				an-				Check if self	(See Signature in	the inst	trs)
HERE	Pre-			than L N				108	/02/10	employed >	<u> </u>		
_	parer's Use	Firm's name (or yours if self-		& ASSOCI						EIN -			
	Only	employed), address, and		WISCONSI	IN AVE	5TE 1010		D 20	014 4001		/201\ 255	~ =	
<u></u>	ΛΔ	ZIP code	BETHE	PODA			M	ע 20	814-4881	Phone no	(301) 951	-374	
u,	~~										Form <b>u</b> u		: /UUM1

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization		Employer identification number
Brendsel Family Foundation		54-6637308
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> treated as 527 political organization	a private foundation
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a pi 501(c)(3) taxable private foundation	ivate foundation
Check if your organization is covered by the G Note: Only a section 501(c)(7), (8), or (10) org	eneral Rule or a Special Rule ganization can check boxes for both the General Rule and a	a Special Rule See instructions
General Rule –		
	Z, or 990-PF that received, during the year, \$5,000 or more	(in money or property) from any one
Special Rules –		
509(a)(1)/170(b)(1)(A)(vi) and received fro	Form 990 or 990-EZ, that met the 33-1/3% support test of t m any one contributor, during the year, a contribution of th or (ii) Form 990-EZ, line 1 Complete Parts I and II	he regulations under sections e greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organiaggregate contributions of more than \$1,00 prevention of cruelty to children or animals	zation filing Form 990 or 990-EZ, that received from any or 00 for use <i>exclusively</i> for religious, charitable, scientific, lites. Complete Parts I, II, and III	ne contributor, during the year, erary, or educational purposes, or the
this box is checked, enter here the total co	zation filing Form 990 or 990-EZ, that received from any or us, charitable, etc, purposes, but these contributions did no ontributions that were received during the year for an <i>exclu</i> unless the <b>General Rule</b> applies to this organization becai	sively religious, charitable, etc.
religious, charitable, etc, contributions of \$	5,000 or more during the year	<b>►</b> \$
990-PF) but it must answer 'No' on Part IV. Iir	y the General Rule and/or the Special Rules does not file S ne 2 of their Form 990, or check the box on line H of its Fo ng requirements of Schedule B (Form 990, 990-EZ, or 990-	rm 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Reduct for Form 990, 990EZ, or 990-PF.	ion Act Notice, see the Instructions Schedule I	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	anization sel Family Foundation	' '	r identification number
Part I	Contributors (see instructions )	124-00	337300
(a)	(b)	(0)	(d)
Number	Name, address, and ZIP + 4	(c) Aggregate contributions	Type of contribution
	Diane and Leland Brendsel 735 Swan Road	\$400,000.	Person X Payroll Noncash (Complete Part II if there
	Jackson WY 83002		is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)

Form 990-PF, Page 1, Part I, Line 23

#### Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Fines/Penalties	74.			
Postage/delivery	62.			

Total

136.

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
Huey & Associates	Tax Preparation	3,957.	100.		

Total

3,957. 100.

### **Supporting Statement of:**

Form 990-PF, p2/Line 9(a)

Description	Amo	unt
Federal Tax		253.
Total		253.