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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 Treated as a Private Foundation Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return __ Address change Name change A Employer identification number Name of foundation Use the IRS label. 58-6343705 Otherwise, THE ROGERS FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) print B Telephone number or type. 381 INDIAN HARBOR ROAD (772) 231-4871See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. D 1. Foreign organizations, check here VERO BEACH, FL 32963 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization; Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation E If private foundation status was terminated X Cash I Fair market value of all assets at end of year | J | Accounting method: under section 507(b)(1)(A), check here (from Part II, col. (c), line 16) Other (specify) F If the foundation is in a 60-month termination 1,461,293. (Part I, column (d) must be on cash basis.) **S** under section 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income N/A Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 39,543. 39,543. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <8,143. STATEMENT 2 68 Net gain or (loss) from sale of assets not on line 10
b Gross sales price for all assets on line 6a 126, 97 SCANNED SEP Revenue 126,970. 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications RECEIVED 10a Gross sales less returns b Less Cost of goode s c Gross profit or (less) STATEMENT <5,555.b <5,555. 11 Other income 33,988. 25,845. 12 Total. Add lines 1 through CIDEN 5,344. 5,344. Ō. 13 Compensation of officers; directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 6,500. Ō. 0. **b** Accounting fees c Other professional fees 102.102. 17 Interest STMT 5 10,006. 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 6 410. 410. 0. 23 Other expenses 24 Total operating and administrative 22,362. 5,856 expenses. Add lines 13 through 23 103,116. 103,116. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 5,856. 125,478. 103,116. Add lines 24 and 25 27 Subtract line 26 from line 12: <99,633. 8 Excess of revenue over expenses and disbursements 28,132. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). N/A

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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Balance Sheets Attached schedules and	Balance Sheets Attached schedules and amounts in the description Beginning of year E		End o	nd of year		
Part II Balance Sheets Attached schedules and column should be fore	nd-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing						
2 Savings and temporary cash investments		468,072.	236,171.	236,171.		
3 Accounts receivable ►	1					
Less: allowance for doubtful accounts						
4 Pledges receivable ►						
Less: allowance for doubtful accounts						
5 Grants receivable						
6 Receivables due from officers, directors, trust	ees and other	·				
disqualified persons	.ccs, and other		•			
7 Other notes and loans receivable						
Less: allowance for doubtful accounts						
- I						
8 Inventories for sale or use 9 Prepaid expenses and deferred charges	į			 		
9 Prepaid expenses and deferred charges						
toa investinents - 0.3. and state government out		1 001 001	1 107 060	1 225 122		
b Investments - corporate stock	STMT 8	1,001,981.	1,127,069.	1,225,122.		
c Investments - corporate bonds		<u></u>				
11 Investments - land, buildings, and equipment basis						
Less accumulated depreciation						
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment; basis						
Less accumulated depreciation						
15 Other assets (describe ►)					
16 Total assets (to be completed by all filers)		1,470,053	<u>1,363,</u> 240.	1,461,293.		
17 Accounts payable and accrued expenses						
18 Grants payable						
g 19 Deferred revenue	·					
20 Loans from officers, directors, trustees, and other dis-	qualified persons			1		
21 Mortgages and other notes payable			- 	1		
22 Other liabilities (describe)]		
				1		
23 Total liabilities (add lines 17 through 22)		0.	0.			
Foundations that follow SFAS 117, check he	ere 🕨 📗			1		
and complete lines 24 through 26 and lines						
24 Unrestricted						
25 Temporarily restricted			·	1		
26 Permanently restricted				†		
Foundations that do not follow SFAS 117, c	heck here 🕨 🗓			1		
Permanently restricted Permanently restricted Foundations that do not follow SFAS 117, control and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and Retained earnings, accumulated income, end Total net assets or fund balances						
27 Capital stock, trust principal, or current funds		715,198.	715,198.			
28 Paid-in or capital surplus, or land, bldg., and		0.	713,130	`		
29 Retained earnings, accumulated income, end		754,855.	648,042	4		
30 Total net assets or fund balances	ownient, or other funds .	1,470,053.	1,363,240			
2 30 Total net assets or fund balances	• ••	1,410,033.	1,303,240	4		
31 Total liabilities and net assets/fund balance		1,470,053.	1,363,240.			
			1,303,240	' <u> </u>		
Part III Analysis of Changes in Ne	t Assets or Fund B	alances				
1. Total net access or fund belances at harmone of the	par - Dart II column (a) time	30				
1 Total net assets or fund balances at beginning of your control on the format agree with end of year figure reported on the		SU		1 470 052		
(must agree with end-of-year figure reported on pr	ior year s return) .	•	1	1,470,053.		
2 Enter amount from Part I, line 27a	•		2	<99,633.>		
3 Other increases not included in line 2 (itemize)			3	1 370 420		
4 Add lines 1, 2, and 3			A MICHAEL 7	<u> </u>		
5 Decreases not included in line 2 (itemize)			ATEMENT 7 5	7,180.		
6 Total net assets or fund balances at end of year (lin	e 4 minus line 5) - Part II, co	olumn (b), fine 30	6	1,363,240.		
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THE ROGERS FAMILY FOUNDATION 58-6343705

Part IV Capital Gains al	nd Losses for Tax on Ir	ivesiment	income					
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(5) F	low ac - Purci - Dona	nase ',) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)	
1a MORGAN STANLEY	- SEE ATTACHED					P V.	ARIOUS	VARIOUS
b								
<u>C</u>				ļ				
<u>d</u>	· · · · · · · · · · · · · · · · · · ·			├				
<u>e</u>	(f) Degraciation allowed	(a) Coo	t or other been	! 			(h) Gain or (lo	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale	_			(e) plus (f) min	us (g)
a 126,970.		 	135,11	4.				<8,144.
<u>b</u>		 						
d		 		\dashv				
e	· · · · · · · · · · · · · · · · · · ·			$\neg \uparrow$				
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69	$\neg \uparrow$		(I) G	ains (Col. (h) g	ain minus
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			còl (k), but not less to osses (from co	than -0-) or
a				\neg				<8,144.
b								
С								
d								
е								· · · · · · · · · · · · · · · · · · ·
2 Capital gain net income or (net capi	tal loss) { If gain, also ente If (loss), enter -0	r in Part I, line i I- in Part I, line	7 7	}	2			<8,144.
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		nd (6):		J				
If (loss), enter -0- in Part I, line 8	10	- A	Table 10.	7	3	1 T	N/	<u>A</u>
Part V Qualification Un	<u></u>					ient inco	<u> </u>	
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment in	icome	.)			
If section 4940(d)(2) applies, leave this	s part blank.							
Was the foundation liable for the section	on 4042 tay on the distributable an	nount of any ve	ar in the hase ne	rınd?				Yes X No
If "Yes," the foundation does not qualify			•	ilou:				103 [44] 140
1 Enter the appropriate amount in ea				es.				
(a) Base period years	(b)	1	 	(c)		-	Die	(d) stribution ratio
Calendar year (or tax year beginning	in) Adjusted qualifying dis	stributions	Net value of no	_			(col. (b)	divided by col. (c))
2008		4,245.				4,075.		.072270
2007		8,300.				7,775.		.048271
2006		7,192.				5,021.		.180950
2005		1,369.				0,528. 8,290.		.170386
2004		7,635.	·		,10	0,290.		.000452
2 Total of line 1, column (d)		an Con Obor 5		6			2	.538329
3 Average distribution ratio for the 5- the foundation has been in existence		on line 2 by 5,	or by the number	or ye	ai \$		3	.107666
4 Enter the net value of noncharitable	-use assets for 2009 from Part X,	line 5					4	1,340,229.
5 Multiply line 4 by line 3							5	144,297.
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6	281.
7 Add lines 5 and 6							7	144,578.
8 Enter qualifying distributions from I	Part XII, line 4			-		••	8	103,116.
If line 8 is equal to or greater than li See the Part VI instructions.		e 1b, and comp	lete that part usir	ng a 1	 % tax	rate.		
								Form QQ0_DE (2000)

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X

X

8b

10

of each state as required by General Instruction G? If "No," attach explanation

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

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

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

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

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X

X

3b

4a

Yes X No

N/A

during the year?

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Part VII-B Statements Regarding Activities for Which F	orm 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	1 4945(e))?	Ye	s 🗓 No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	s 🗶 No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		ĺ	1 1
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	-
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described i	n Regulations		1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ ┌	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ined		
expenditure responsibility for the grant?	N	[/A □ Y€	s No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d)		1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			1	
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870			Γ	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribute	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	inagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.	-		
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	allowances
	· · · · · · · · · · · · · · · · · · ·			
SEE STATEMENT 9		5,344.	0.	0.
			2.1	
			-	
				
		ļ		
	1			
		l		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(0)	compensation	allowances
NONE	ļ]		<u> </u>
				1
		<u> </u>		
	Ì			{
		•		1
		ļ		
	Į			1
	L	<u> </u>	<u> </u>	<u> </u>
Total number of other employees paid over \$50,000	<u></u>			(

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on managero, riigiiiy	
3 Five highest-paid independent contractors for professional services. If none, enter	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	1	
	_	
Total number of others receiving over \$50,000 for professional services	1	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produc	ced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
*		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	1es 1 and 2.	Amount
1		
2	 	
All other program-related investments. See instructions. 3 N/A		
2 IV / IV		
		0.
Total. Add lines 1 through 3	•	0.
Total. Add lines 1 through 3	>	Form 990-PF (20

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

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6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI,				
line 7				66,448.
Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
Excess distributions carryover, if any, to 2009.				Į
a From 2004 19,237	<u>-</u>			
b From 2005 158,059	-1			
c From 2006 154,757	-			
dFrom 2007	_			
eFrom 2008 39,012				
f Total of lines 3a through e	371,065.			
Qualifying distributions for 2009 from				ļ
Part XII, line 4 ⁻ ► \$ 103,116	-1 1			
a Applied to 2008, but not more than line 2a			0.	<u> </u>
b Applied to undistributed income of prior		0		ŀ
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	ا م			
(Election required - see instructions)	0.			66,448.
d Applied to 2009 distributable amount	36 660		<u> </u>	00,440.
e Remaining amount distributed out of corpus	36,668.	· ·		0.
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
Enter the net total of each column as indicated below:]
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	407,733.		İ	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	1,		 -	
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	<u> </u>]	
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	19,237.			<u> </u>
Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	388,496.			
D Analysis of line 9:		٠,		
a Excess from 2005 158,059		*		
b Excess from 2006 154,757	<u>-</u>			
c Excess from 2007	_		,	
d Excess from 2008 39,012		, ´		
e Excess from 2009 36,668	• <u> </u>		<u> </u>	Form 990-PF (2000)

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3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year SEE STATEMENT 10	or šubstantial contributor	recipient		
Total .	<u> </u>	· · · · · · · · · · · · · · · · · · ·	▶ 3a	103,116.
NONE Total				0.
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Part XVI-A Analysis of Income-Producing Activities

Enter groce amounts unless otherwise and setted	Unrelated bu	siness income	Excluded	by section 512, 513, or 514	(c)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Idiletion income
å	_		 		
c	- 		┼-		
d	-				
			 -		·
<u> </u>			 		
g Fees and contracts from government agencies	- 		 		-
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			 		
investments			1 1		
4 Dividends and interest from securities			14	39,543.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		 -			
6 Net rental income or (loss) from personal					
property			1.		
7 Other investment income	211110	<5,555.	>		
8 Gain or (loss) from sales of assets other					
than inventory			14	<8,144.	11
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1 1		
8	_		 		
ь	_				
·	_	<u> </u>	├ ├		· · · · · · · · · · · · · · · · · · ·
d	_		 		
e	_	<5,555.	- -	31,399.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<3,333.		13	25,845
(See worksheet in line 13 instructions to verify calculations.	1			. "	23,013
Part XVI-B Relationship of Activities	**	nlishment of F	xempt F	Purnoses	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the			A contribute	o importantly to the accomp	DIISNMENT OF
nte toundation's exempt purposes (other th	ian by providing failes	tor sacri parposcoj.	_		
- 172		<u></u>			
					
					
					
					
					
			<u> </u>		
823521					
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9) THE ROGERS FAMILY FOUNDATION 58-6343705
Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 58-6343705 Page 13

_	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	Na
1		res	No	
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	a Transfers from the reporting foundation to a noncharitable exempt organization of:	<u> </u>	1	v
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions.			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		<u>X</u> _
	(2) Purchases of assets from a noncharitable exempt organization	15(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	16(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
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 goo	ods, other ass	ets,	
	or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements	ent, show in		
	column (d) the value of the goods, other assets, or services received.			
a)L	Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions	, and sharing ari	angeme	nts
	N/A			
_				
_				
			_	
			-	
_				—
_				
28	a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described	<u> </u>	(-43	٦
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes	[X] No
<u>. b</u>	If "Yes," complete the following schedule.	A		
	(a) Name of organization (b) Type of organization (c) Description of rela	tionsnip		
	N/A			
1	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 belied and complete. Declaration of prepares other than taxpayer or fiduciary) is based on all information of while in preparer has any knowledge	f, it is true, corre	ect,	
- [
	(15 M/162 19/7/10)			
9	Signature of officer or trustee Date Title			
		reparer's identif	ying nur	nber
톍.	Signature Pnv P	ر روم	20148	
" :	Firm's name (or yours DELOITTE TAX LLP	·•		
ľ	il self-employed). 191 PEACHTREE ST., NE SUITE 2000			
	address, and ZIP code ATLANTA, GA 30303-1924 Phone no. (4	04) 22	0-1	500
		Form 990		

FORM 990-PF DIVIDENDS AND	O INTEREST FROM	SECURITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
FROM KINDER MORGAN K-1 KINDER MORGAN DIVIDEND MORGAN STANLEY MORGAN STANLEY DIVIDEND	337. 27. 2,105. 37,074.	0. 0. 0.	337. 27. 2,105. 37,074.
TOTAL TO FM 990-PF, PART I, LN 4	39,543.	0.	39,543.

FORM 990-PF	GAIN	OR	(LOSS)	FROM	SALE	OF	ASSETS		STAT	TEMENT	2
(A) DESCRIPTION OF PROPE	RTY						MANNER ACQUIRED		_	DATE S	OLD
MORGAN STANLEY - SEE ATTACHED							PURCHASED	VARIO	OUS	VARIO	US
(B) GROSS SALES PRICE			C) T OR BASIS	EXI	(D) PENSE SALE		(E) DEPREC	. 6	LA TN	(F)	S
126,97			135,114	•		0.		0.		<8,1	
(A) DESCRIPTION OF PROPE	RTY						MANNER ACQUIRED	DAT ACQUI		DATE S	OLD
FROM K-1: KINDER MOR ENERGY PARTNERS	GAN						PURCHASED				
(B) GROSS SALES PRICE			C) T OR BASIS	EXI	(D) PENSE SALE		(E) DEPREC	. 0	SAIN	(F)	S
	0.		0	•		0.		0.		<u> </u>	1.
NET GAIN OR LOSS FRO	M SALE	OF	ASSETS							<8,1	.43.:
CAPITAL GAINS DIVIDE	NDS FR	OM	PART IV								0.
TOTAL TO FORM 990~PF	, PART	I,	LINE 6	A						<8,1	43.
FORM 990-PF			ОТН	ER IN	COME				STA'	PEMENT	3
DESCRIPTION					(A) REVEN ER BO	UE	(B NET IN MENT I	VEST-		(C) ADJUSTE ET INCO	
ORDINARY INCOME(LOSS MORGAN K-1) FROM	KI	NDER		<	5,5	55.> <	5,555	.>		

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT	4
DESCRIPTION		(B) NET INVEST- MENT INCOME			
TAX PREPARATION FEES	6,500.	0.			0.
TO FORM 990-PF, PG 1, LN 16B =	6,500.	0.			0.
FORM 990-PF	TAX	ES	S	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS			CHARITAI	
FOREIGN TAXES PAID TAXES	42. 9,964.				0.
TO FORM 990-PF, PG 1, LN 18 =	10,006.	0.	7		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT	6
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
FROM KINDER MORGAN K-1: SEC 59(E)(2) EXP.	410.	410.			0.
	44.0	44.0			0.
TO FORM 990-PF, PG 1, LN 23	410.	410.			
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREASE			BALANCES S	TATEMENT	7
			BALANCES S	TATEMENT	
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND 1	BALANCES S	AMOUNT	7

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
4,000 SHARES OF DUKE ENE	RGY CORP HOLDINGS	63,626.	68,840.
3,224 SHARES FPL CORP		115,094.	
3,000 AMERICAN ELECTRIC	POWER CO.	88,206.	104,370.
1,200 3M COMPANY	• • • • • • • • • • • • • • • • • • • •	97,931.	99,204.
1,000 SHARES ALTRIA GROU	P INC	15,176.	19,630.
1,000 SHARES BANK OF AME		48,933.	15,060.
5,000 SHARES GABELLI DIV		83,747.	65,550.
1,000 KINDER MORGAN ENER	GY PARTNERS LP	10,873.	60,980.
2,000 HSBC FINANCE 6.36%		50,000.	41,280.
1,500 EATON VANCE TAX MG	D DIV EQU FD	25,380.	18,495.
1,000 SHARES BARCLAYS BK	PLC	25,000.	22,090.
2,141 SPECTRA ENERGY COR		46,193.	43,912.
1,000 PHILIP MORRIS INTL		34,865.	48,190.
1,000 BANK OF NEW YORK M		44,781.	27,970.
4,491 FIDELITY NATL INFO	RMATION SE	93,592.	105,269.
1,000 BPC PLC ADS		48,882.	57,970.
3000 SOUTHERN COMPANY		83,790.	99,960.
2000 AT&T, INC		51,000.	56,060.
100,000 15YR HYB RANGE		100,000.	100,000.
TOTAL TO FORM 990-PF, PA	RT II, LINE 10B	1,127,069.	1,225,122.

	VIII - LIST OF OFFICERS, DIRECTORS RUSTEES AND FOUNDATION MANAGERS			EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
CLARENCE B. ROGERS, JR. 381 INDIAN HARBOR ROAD VERO BEACH, FL 32963	TRUSTEE 0.00	3,144.	0.	0.
NANCY E. ROGERS 3833 EARLS COURT VIEW CINCINNATI, OH 452261328	DIST. COMMITTEE	500.	0.	0.
JOHN B. ROGERS 2419 DON ONOFRE TRAIL NW ALBUQUERQUE, NM 87107	DIST. COMMITTEE 0.00	500.	0.	0.
SALLY R. MITCHELL 2860 VININGS WAY ATLANTA, GA 30339	DIST. COMMITTEE 0.00	500.	0.	0.
CHASE A. ROGERS 1426 CORAL AVENUE VERO BEACH, FL 32963	DIST. COMMITTEE 0.00	500.	0.	0.
HANK MITCHELL 2860 VININGS WAY ATLANTA, GA 30339	DIST. COMMITTEE 0.00	200.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	PART VIII	5,344.	0.	0.

FORM 990-PF GRANTS PAID	STATEMENT 10			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
BY THE RIVER	NONE SUPPORT COMMUNITY	N/A	2,000.	
DAISEY BRIDGEWATER HOPE	NONE SUPPORT COMMUNITY	N/A	500.	
INDIAN RIVER HOSPITAL FOUNDATION	NONE SUPPORT COMMUNITY	N/A	15,000.	
VB POLICE BEN ASSSOC	NONE SUPPORT COMMUNITY	N/A	25.	
ARCS FOUNDATION	NONE SUPPORT COMMUNITY	N/A	100.	
INDIAN RIVER VOLUNTEER AMBULANCE	NONE SUPPORT COMMUNITY	N/A	100.	
GW ANNUAL FUND	NONE SUPPORT COMMUNITY	N/A	2,500.	
BOYS & GIRLS CLUB	NONE SUPPORT COMMUNITY	N/A	2,550.	

THE ROGERS FAMILY FOUNDATION			58-6343705
COMMUNITY CHURCH	NONE SUPPORT CHURCH	N/A	22,250.
GETTYSBURG COLLEGE	NONE SUPPORT SCHOOL	N/A	5,000.
GIFFORD YOUTH ACTIVITIES CENTER	NONE SUPPORT COMMUNITY	N.A	1,500.
HIGHLAND CASHIERS HOSP FOUNDATION	NONE SUPPORT COMMUNITY	N/A	5,000.
INDIAN RIVER MEDICAL CENTER	NONE SUPPORT COMMUNITY	N/A	2,091.
JOHNS ISLAND FOUNDATION	NONE SUPPORT COMMUNITY	N/A	5,000.
THE SEVEN HILLS SCHOOL	NONE SUPPORT SCHOOL	N/A	2,500.
TRINITY PRESBYTERIAN CHURCH	NONE SUPPORT CHURCH	N/A	6,500.
UNITED WAY	NONE SUPPORT COMMUNITY	N/A	15,000.
VNA AND HOSPICE FOUNDATION	NONE SUPPORT COMMUNITY	N/A	10,300.

THE ROGERS FAMILY FOUNDATION			58-6343705
WOMAN'S AUXILIARY OF PIEDMONT HOSPITAL	NONE SUPPORT COMMUNITY	N/A	200.
WOODRUFF ARTS CENTER	NONE SUPPORT COMMUNITY	N/A	5,000.
TOTAL TO FORM 990-PF, PART XV, I	LINE 3A	-	103,116.

CLARENCE B ROGERS TTEE Account Number: 769 203378 231

MorganStanley SmithBarney

Tax Year 2009

REALIZED GAIN/(LOSS) SUMMARY

Morgan Stanley Smith Barney LLC ("Morgan Stanley Smith Barney") cannot provide you with tax advice. Although Morgan Stanley Smith Barney is providing this information as an additional service, we do not guarantee that it is sufficient for tax reporting purposes, and are not liable for your reliance upon or use of this information. The Gain and Loss Summary is not a substitute 1099 form (or any other appropriate tax form), has not been supplied to the IRS and should not be filed with your taxes. This Gain and Loss Summary is provided for informational purposes only. It is important that you consult with a professional tax advisor regarding your individual tax situation, as

If cost basis information is not available, gain or (loss) will not be reflected on this Summary. For securities not purchased through Morgan Stanley Smith Barney, including securities purchased elsewhere and later transferred to Morgan Stanley Smith Barney, cost basis information may not be provided. To correct any information supplied by Morgan Stanley, please inform your Financial Advisor. To add cost basis information, you may either inform your Financial Advisor or input the data directly yourself through our client-only Web site, ClientServ. Morgan Stanley Smith Barney will adjust cost basis as appropriate in accordance with tax laws. However, Morgan Stanley Smith Barney does not adjust for all events and you should contact your tax advisor to determine the appropriate information to be used in the preparation of your tax return.

Long Term

REALIZED	GAIN/(LOSS)	\$5,803 71	\$(13,947 71)	\$(8,144.00)
TOTAL COST ORIGINAL/	ADJUSTED	\$49,394.65	\$85,719 42	
	PROCEEDS	\$55,198.36	\$71,771.71	\$126,970.07
DATE DATE	QUANTITY ACQUIRED SOLD	08/25/2003 (3,000.000 12/04/2003 05/13/2009	
	SYMBOL	HNO	WFC	
	DESCRIPTION	UNITEDHEALTH GP INC	WELLS FARGO & CO NEW	Total Long Term

Ine Total Cost for Unit Trusts, Mortgage-Backed Securities, and Zero Coupon Bonds have been adjusted to reflect of principal or capital that the have been paid to you, or accreted interest earned, since your purchase date. In the event that the accumulated total return of principal or capital is greater than the provided original costs, the adjusted cost will be "0.00". Form **8868**

(Rev. April 2009)

Application for Extension of Time To Exempt Organization Return

OMB No. 1545-1709

	nent of the Treasury Revenue Service		► File a se	parate application fo	r each return.				_
• If yo	ou are filing for an Auto ou are filing for an Add t complete Part II un	litional (Not Automa	tic) 3-Month Ex	ctension, complete	only Part II (on p	ī	•	▶ X	
Part	1 Automatic	c 3-Month Exter	nsion of Time	e. Only submit origin	al (no copies ne	eded).			_
A corp	poration required to file	e Form 990·T and red	juesting an auto	matic 6-month exten	sion · check this	box and con	nplete 	. •	
	er corporations (includ Income tax returns.	ding 1120-C filers), p	artnerships, REN	AICs, and trusts must	use Form 7004	to request ar	n extension of til	ne	
noted (not au you m	onic Filing (e-file). Go below (6 months for a stomatic) 3-month extr ust submit the fully co rs.gov/efile and click of	a corporation required ension or (2) you file empleted and signed	d to file Form 99 Forms 990-BL, 6 page 2 (Part II)	0-T). However, you ca 3069, or 8870, group	annot file Form 8 returns, or a con	868 electroni nposite or co	ically if (1) you v insolidated Forn	vant the additional 1990-T. Instead,	
Type o	Name of Exemp	t Organization					Employer ide	ntification number	•
print		RS FAMILY	FOUNDATI	ON			58-634	3705	
File by to due date filing you	_{for} Number, street,	and room or suite no AN HARBOR		see instructions.					
return S instruction	ee	st office, state, and		foreign address, see	nstructions.				_
Check	type of return to be	filed(file a separate	application for e	ach return):					_
	Form 990 Form 990-BL Form 990-EZ Form 990-PF	Form Form	990-T (corporation 1990-T (sec. 401(i 1990-T (trust other 1041-A	a) or 408(a) trust)		Form 47 Form 52 Form 60 Form 88	227 069		
Tele If the	e books are in the care ephone No. \(\sum_{177} \) ne organization does rous is for a Group Return . If it is for part	e of \triangleright 381 IN 2) 231-487 not have an office or irn, enter the organiz	1 place of busines ation's four digit	BOR ROAD — FAX No ss in the United State Group Exemption N	. ► es, check this boo umber (GEN)	x	is is for the who	le group, check thi	
	AUGUST 16 Is for the organization X calendar year tax year begin	's return for: 2009 or		n required to file Forrot organization return , and ending		1		nsion	
2	If this tax year is for le	ess than 12 months,	check reason:	Initial return	Final	return	Change i	n accounting perio	d
	If this application is fo nonrefundable credits		PF, 990·T, 4720,	or 6069, enter the te	entative tax, less	any	3a \$	563	
	If this application is fo				estimated			1,000	r
	tax payments made. I Balance Due. Subtra				m, or, if required,		3b \$	1,000	÷
	deposit with FTD coup						30	0	
	See instructions.			water the second		F0 1 F	3c \$		
	on. If you are going to		 		see Form 8453-	EU and Form			
LHA	For Privacy Act and	d Paperwork Reduc	tion Act Notice	, see Instructions.			Fo	rm 8868 (Rev. 4-200	19)

Form 8	3868 (Rev. 4-2009)					Page 2
Note.	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check the Only complete Part II if you have already been granted an automatic 3-month extension on a previously ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		orm 8	8868.	▶ [X)
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copi	es n	eeded).		
Туре	or Name of Exempt Organization	E	mpl	oyer identif	ication n	umber
print	THE ROGERS FAMILY FOUNDATION		51	8-6343	705	
File by t extende due date filing the	Number, street, and room or suite no. If a P.O. box, see instructions.	F	or IR	S use only		
retum S instructi	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
	k type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720		5	rm 5227 rm 6069	Fon	m 8870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a pre	viously	file	Form 886	8.	
Tel			s for	the whole g		
box 1		of all me	embe	ers the exter	ision is to	<u>or</u>
	i request an additional 3-month extension of time until NOVEMBER 15, 2010.					
	For calendar year 2009, or other tax year beginning, and endi	ng	7			
	If this tax year is for less than 12 months, check reason: Initial return Final return	L	٠ رـــ	Change in a	counting	period
	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION TO	FIL	F: 2	A COMP	.संगम	ΔND
	ACCURATE RETURN.	<u> </u>	<u> </u>	- COM	2212	HILD
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	· · · · T				
	nonrefundable credits. See instructions.		Ва	\$		563.
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		73			
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid				1	000.
	previously with Form 8868.		Вь	_\$	<u></u>	000.
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		Вс	\$		0.
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructi Signature and Verification	UIIS. U	00			
Under	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and e, correct, and complete, and that I am authorized to prepare this form					
Signati	· · · · · · · · · · · · · · · · · · ·		D <u>ate</u>	- 7kg	1201	>