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Form 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

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

OMB No 1545-0052

2009

For	calend	ar year 2009, or tax year be	eginning,			and er	iding		
G (heck a	ll that apply: Ini	tial return		al return of a fo		harity	Final return	1
			nended return		Address chan	ge		Name change	
	the IR	S Name of foundation						A Employer identification	number
	abel.	BETSY M. CA	MDBET.T. EOT	ר דייו גרוואי	ant .			58-6346237	•
Uti	erwise print	Number and street (or P O b					Room/suite	B Telephone number	
0	r type.	104 BROADUS			,			864-233-08	808
	Specif	ic City or town, state, and 2						C If exemption application is p	
Inst	ruction	S GREENVILLE,						D 1. Foreign organizations	s, check here 🕨 🗔
H (heck t	/pe of organization:	Section 501(c)(3) ex	empt private	foundation			Foreign organizations me check here and attach or	peting the 85% test, proputation
	Sect	ion 4947(a)(1) nonexempt c	charitable trust	Other taxable	private founda	ation		E If private foundation sta	tus was terminated
1 Fa	ur mark	et value of all assets at end	· · · —	ng method:	X Cash	Accr	uat	under section 507(b)(1)(A), check here 🕨 🗀
		art II, col (c), line 16)	O1	ther (specify)				F If the foundation is in a	
	·\$		438. (Part I, colu					under section 507(b)(1	
Pa	 .	Analysis of Revenue and Ex (The total of amounts in columns	(b), (c), and (d) may not	(a) Reve	enue and s per books	(b) Net in:		(c) Adjusted net income	(d) Disbursements for charitable purposes
		necessarily equal the amounts in contributions, gifts, grants, e		GAPORIOG	- Por Books			N/A	(cash basis only)
	l .	theck X if the foundation is n	-			· · · · · · · · · · · · · · · · · · ·		44/ 42	
		nterest on savings and temporary ash investments			9,882.	-	9,882.		STATEMENT 1
	1	ovidends and interest from s			6,745.		6,745.		STATEMENT 2
		Pross rents							
	b N	let rental income or (loss)							
Ð		let gain or (loss) from sale of asse	ets not on line 10	-6	3,488.				·
Revenue	b a	iross sales price for all ssets on line 6a	500,438.						ļ
Je v		Capital gain net income (from Part	IV, line 2)				0.		ļ
	i	let short-term capit al gam	DECEIVEL			-			ļ
	ء ا	ncome modifications iross sales less returns	11-0	78					
		ess Cost of goods sold (C)	DCT 29 2011	100					
		ess Cost of goods sold coll	111 1.80 20.	<u> 産 </u>					
	l l	1 1	SDENI I	IT 1		_ 			
	12 1	otal. Add lines 1 through 1	06111141	15	3,139.	21	6,627.		
	13 (Compensation of officers, director	s, trustees, etc		5,651.		2,825.		22,826
	l	Other employee salaries and	•						
	15 F	Pension plans, employee ber	nefits						
Ses	16a L	egal fees							
Expenses	b #	Accounting fees	STMT 3		4,510.		<u>2,255.</u>		2,255
	1	Other professional fees	STMT 4	8	0,809.	8	0,809.	-	0
ıtive	1	nterest	CMVm -		2 502				
Administrative		axes	STMT 5		3,593.		0.		ļo
Ë	J	Depreciation and depletion Decupancy		 					
å	1	ravel, conferences, and me	atinae	<u> </u>					
and /	I .	Printing and publications	sungs						
	1	Other expenses	STMT 6		2,968.		2,968.		
perating	24 1	otal operating and adminis							
Operating and		xpenses Add lines 13 thro		13	0,345.	10	8,857.		25,081
0		Contributions, gifts, grants p			4,000.				324,000
		otal expenses and disburs	ements.						
		Add lines 24 and 25	<u> </u>	45	4,345.	10	<u>8,857.</u>		349,081
	27 9	Subtract line 26 from line 12	•						
	1	xcess of revenue over expenses		30	1,206.			ļ	ļ
	l	let investment income (if ne				10	7,770.		
9235		djusted net income (if negat	ive, enter -0-) Panerwork Reduction			<u>. </u>		N/A	Form 990-PF (200

1

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	[_1]	5,890,642.
2	Enter amount from Part I, line 27a	2	-301,206.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	5,589,436.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,589,436.

	M. CAMPBELL FOUNDAT			58-63	346237 Page 3
				(c) Date acquired	(d) Date sold
	use; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(mo., day, yr.)	(mo., day, yr.)
1a					
b SEE ATTACHED S'	<u> </u>				
<u>c</u>					
e					
(e) Gross sales price		st or other basis expense of sale		(h) Gain or (le (e) plus (f) min	
a					
b					
<u>c</u>					
e 500,438.		563,926	<u> </u>		-63,488
	n in column (h) and owned by the foundation			Gains (Col. (h) g	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis (k) Ex	cess of col. (1) col. (j), if any		(k), but not less Losses (from c	than -0-) or
a		<u>.</u>			
<u>b</u>					
d			- 		
e					-63,488
<u> </u>	∫ If gain, also enter ın Part I, line	7			05/100
Capital gain net income or (net capital Net chart term capital gain or (loca) as	loss) If (loss), enter -0- in Part I, line	7) 2		-63,488
3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colui)		
If (loss), enter -0- in Part I, line 8	. ,		J 3		<u>/A</u>
L	er Section 4940(e) for Reduced			ome	
(For optional use by domestic private four	ndations subject to the section 4940(a) tax on	net investment inc	ome.)		
If section 4940(d)(2) applies, leave this pa	rt blank.				
Was the foundation liable for the section 4	942 tax on the distributable amount of any ye	ear in the base perio	od?		Yes X No
	nder section 4940(e). Do not complete this pa				<u> </u>
	column for each year; see instructions before	making any entries	<u> </u>		(4)
Base period years	(b) Adjusted qualifying distributions	Net value of non	(c) charitable-use assets	Di	(d) stribution ratio divided by col. (c))
Calendar year (or tax year beginning in 2008	410,480.		7,214,812		• 05689
2007	415,172.		8,505,048		.04881
2006	368,538.		8,280,334		.044508
2005	371,438.		7,871,710		.04718
2004	326,717.		7,618,268	• '	.04288
2 Total of line 1, column (d)				2	.24028
	r base period - divide the total on line 2 by 5,	or by the number o	of years		0.400=
the foundation has been in existence if	less than 5 years	٠		3	.048058
4 Enter the net value of noncharitable-us	e assets for 2009 from Part X, line 5			4	5,757,753
5 Multiply line 4 by line 3				5	276,706
6 Enter 1% of net investment income (1	% of Part I, line 27b)			6	1,078
7 Add lines 5 and 6				7	277,784
8 Enter qualifying distributions from Par	t XII, line 4				349,081
If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line 1b, and comp	plete that part using	a 1% tax rate.		

orm	990-PF	(2009)	BETSY	М.	CAMPI	<u> BELL</u>	FOUND	ATION						<u> 58-</u>	<u>6346</u>	<u>237</u>		age 4
	t VI							ection 4940				1940(e), or 4	948 -	- see i	nstru	ctior	<u>s)</u>
1a	Exempt	operating found	ations descr	ibed in	section 494	10(d)(2),	check here	and er	nter "N/	/A" on	ı lıne 1.)					
		ruling or determi											1					
b	Domest	tic foundations th	at meet the	section	n 4940(e) re	quiremer	nts in Part V,	check here	- [X]	and	enter 19	6)	1_			1,0	<u>78.</u>
		l, line 27b						•••]					
C	All othe	r domestic found	lations enter	2% of	line 27b. Ex	cempt for	eign organiz	ations enter 4%	of Par	rt I, Iır	ne 12, co	ol. (b))					
2	Tax und	der section 511 (d	domestic sec	tion 4	947(a)(1) tr	usts and	taxable foun	dations only. Ot	hers er	nter -	0-)			2				<u>0.</u>
3	Add line	es 1 and 2												3			1,0	
4	Subtitle	A (income) tax (domestic se	ction 4	1947(a)(1) tı	rusts and	l taxable four	ndations only. O	thers e	enter -	-0-)			4				0.
5	Tax bas	sed on investme	nt income S	Subtrac	ct line 4 fron	n line 3. l	f zero or less	s, enter -0-						5			1,0	<u>78.</u>
6	Credits/	Payments:																
a	2009 es	stimated tax payr	nents and 20	08 ov	erpayment o	redited to	o 2009		6a	\bot		1,	040.					
b	Exempt	foreign organiza	itions - tax w	rthheld	d at source				6b									
C	Tax pair	d with application	n for extension	n of ti	ime to file (F	orm 886	8)		6c			1,	<u> 200.</u>		ļ			
d	Backup	withholding erro	neously with	nheld					6d									
7	Total cr	edits and payme	nts. Add line	s 6a th	rough 6d									7			2,2	<u>40.</u>
8	Enter ar	ny <mark>penalty</mark> for un	derpayment	of est	ımated tax. (Check he	re 🔲 ıf Fo	rm 2220 is atta	ched			_		8				
		e. If the total of la												9				
10	Overpa	yment. If line 7 is	s more than	the tot	al of lines 5	and 8, en	iter the amo	unt overpaid						10			1,1	62.
11	Enter th	e amount of line	10 to be: Cr	edited	to 2010 est	imated t	ax 🕨			1,	162	. Refun	ded 🖊	11				0.
Pa	rt VII-	A Statem	ents Re	gard	ing Acti	vities										-		
1a	During	the tax year, did t	the foundation	n atte	mpt to influ	ence any	national, sta	te, or local legis	lation o	or did	l it partic	ipate or i	ntervene	ın			Yes	No
	any pol	itical campaign?														1a		<u>X</u>
b	Did it sp	end more than \$	100 during	the yea	ar (either dir	ectly or II	ndirectly) for	political purpos	ses (se	e inst	tructions	for defin	ution)?			1b		X
	If the a	nswer is "Yes"	to 1a or 1b,	attac	h a detaile	d descri	ption of the	e activities and	d copie	es of	any ma	aterials p	ublishe	d or				
	dıstrıbı	uted by the fou	ndation in	conne	ection with	the acti	vities.											
		foundation file Fe														1c		X _
		ie amount (if any				es (sectio	n 4955) imp	osed during the	year:									
		the foundation.								3			0.					
		ne reimbursemen									osed or	foundat	on				i	
		ers. ► \$			0.	_												
	_	foundation enga			s that have	not previ	ously been r	eported to the If	RS?							2		X
		," attach a deta	-				-	•										
		foundation mad	-				to the IRS, ir	n its governing i	nstrum	nent, a	articles (of incorp	oration, c	r				
		, or other similar	_		-							·				3		X
4a	-	foundation have														4a		X
		has it filed a tax						-						N	/A	4b		
		ere a liquidation,						during the year?	•							5		X
		," attach the st						-										
6	Are the	requirements of	section 508	(e) (rel	lating to sec	tions 494	11 through 4	945) satisfied ei	ither:								ļ	
		nguage in the go					-	•										
	● By sta	ate legislation tha	at effectively	ameno	ds the gover	ning insti	rument so th	at no mandator	y direc	tions	that cor	oflict with	the state	law			ļ	
		un in the governi				_					_					6	X	
7	Did the	foundation have	at least \$5,0	00 in a	assets at any	y time du	ring the year	?			·					7	X	
		, • complete Pa																
		ne states to which				n which it	t is registered	d (see instructio	ns) 🕨	•							1	
	SC						J	,	•			-						
b		nswer is "Yes" to	line 7, has th	e four	ndation furni	shed a co	opy of Form	990-PF to the A	ttornev	y Gen	eral (or	designate	2)				1	
-		state as required							,	•	1	a	•			8b	x	
9		oundation claimir	-			-	•		ction 4	1942(j)(3) or	4942(1)(5) for cale	ndar				
		09 or the taxable						•								9	1	X
	-	persons become	-	_	-			-					es			10		Х

4a

X

Yes X No

N/A

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

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?

during the year?

orm 990-PF (2009) BETSY M. CAMPBELL FOUNDA	TION	· · · · · · · · · · · · · · · · · · ·	<u>58-634623</u>	37 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a Quring the year did the foundation pay or incur any amount to:			_	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire		[55]	
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		-,	
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		s X No	1 1
the prevention of cruelty to children or animals?	les the eventions described i	• • —	8 LAL NO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		iii negulations	37/3	ь
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A 5	
Organizations relying on a current notice regarding disaster assistance check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		inad		
expenditure responsibility for the grant?		I/A Ye	s No	
If "Yes," attach the statement required by Regulations section 53.4945		س سا	ia 140	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	Jay promiums on		s X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?		6	b X
If "Yes" to 6b, file Form 8870.	ordenar bonom contract			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ Ye	a X No	
b If yes, did the foundation receive any proceeds or have any net income attribute				b
Information About Officers Divisions Truck		nagers. Highly		
Part VIII Paid Employees, and Contractors	<u> </u>			
1 List all officers, directors, trustees, foundation managers and their	compensation.			
A News and add are	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
WILLIAM W. BROWN	TRUSTEE			<u>—</u>
104 BROADUS AVENUE				
GREENVILLE, SC 29601	2.00	45,651.	0.	0.
]	J	
	1 1 1 1 2 2 2 2 2 2	101015	L l	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Evnança
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
270275	devoted to position		compensation	allowances
NONE				
		 		<u> </u>
	li .	1		
	<u> </u>			·
			-	
Total number of other employees paid over \$50,000				0
TOTAL HUMBER OF OTHER EMPROYEES PAIN OVER \$30,000			Enrm C	90-PF (2009)
			i Oi iii C	(2003)

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions.)
-	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	5,771,178.
	Average of monthly cash balances	1b	74,257.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	5,845,435.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,845,435.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	87,682.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,757,753.
6	Minimum investment return. Enter 5% of line 5	6	287,888.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	287,888.
2a	Tax on investment income for 2009 from Part VI, line 5		
	Income tax for 2009. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	1,078.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	286,810.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	286,810.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	286,810.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	349,081
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	349,081
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	1,078
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	348,003
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (nualifies for	the section

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
1 Distributable amount for 2009 from Part XI,	Corhas	1 σαι ο μιτοι το 2000	2000	2003
line 7				286,810.
2 Undistributed income, if any, as of the end of 2009				200,0101
a Enter amount for 2008 only			318,298.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:			_	
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 349,081.				
a Applied to 2008, but not more than line 2a			318,298.	<u>. </u>
b Applied to undistributed income of prior				
years (Election required - see instructions)	<u></u>			
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			<u> </u>
d Applied to 2009 distributable amount		· · · · · · · · · · · · · · · · · · ·	<u>.</u>	30,783.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				
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		7.		
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				256,027.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008	l			
e Excess from 2009				Form 900-DE (2000)

Part XIV Private Operating Fo		FOUNDATION	A ====================================		346237 Page 10
-			-A, question 9)	N/A	
1 a If the foundation has received a ruling or		• •			
foundation, and the ruling is effective for		•		1 10 10 1 10 1	0.40(7)(5)
b Check box to indicate whether the found		ting foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2009	(0) 2000	(6) 2007	(0) 2000	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	<u> </u>				
c Qualifying distributions from Part XII,					
line 4 for each year listed	<u> </u>				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				 	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				ļ	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:			1		
(1) Value of all assets					
(2) Value of assets qualifying				1	
under section 4942(j)(3)(B)(i)					ļ. <u>-—</u>
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			j		
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			Ì		
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Compl	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t				. ,	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	o have contributed mor	e than 2% of the total cont	ributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed in	ore than \$5,000). (See	section 507(d)(2).)			
NONE					
b List any managers of the foundation who			(or an equally large port	ion of the ownership of a j	partnership or
other entity) of which the foundation has	s a 10% or greater inter	est.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	n, Scholarship, etc., Pi	rograms		
Check here 🕨 🗓 if the foundation o					
the foundation makes gifts, grants, etc. ((see instructions) to ind	lividuals or organizations u	inder other conditions, c	omplete items 2a, b, c, an	ıd d.
a The name, address, and telephone numl	ber of the person to who	om applications should be	addressed:		
N/A					
				<u> </u>	
b The form in which applications should b	e submitted and inform	ation and materials they sl	hould include:		
N/A					
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on awards	s, such as by geographi	cal areas, charitable fields,	kinds of institutions, or	other factors:	
N/A					
					- 000
923601 02-02-10					Form 990-PF (2009)

3 Grants and Contributions Paid During the		Pavment		
Recipient	If recipient is an individual,			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount .
a Paid during the year		-		
				l
		[
				•
SEE STATEMENT 10				
Total			▶ 3a	324,00
b Approved for future payment				
NONE		İ		l
NONE				
	ĺ	[
			-	
	1			
Total	<u> </u>	1		
Total 3611 02-02-10		•	D 3b	orm 990-PF (200

Form 990-PF (2009) BETSY M. CAMPI	58-6	58-6346237 Page 12			
Part XVI-A Analysis of Income-Produ	ucing Activitie	s			
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
· ·	Code		1000		
ab	-		1		
			 		
c			_ _		
d					
e	-				
g Fees and contracts from government agencies	-		- - -		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	9,882.	
4 Dividends and interest from securities			14	206,745.	
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					
7 Other investment income					-
8 Gain or (loss) from sales of assets other					
than inventory			18	-63,488.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					·
1 Other revenue:			1 1	ł	
a	_				-
b	_				
c	_				_
d	-				
e	_		_ + - -	450 400	
2 Subtotal. Add columns (b), (d), and (e)			0.	153,139.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	153,139
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt Pu	ırposes	
Lies No. Evalue below how each activity for which in		aluma (a) of Dost VI	VI A contributed	importantly to the accomm	lighment of
Explain below how each activity for which income the foundation's exempt purposes (other than				importaintly to the accomp	MSIMIEM OI
the foundation's exempt purposes (other tha	in by providing funds	Tor Such purposes,	<u>,. </u>		
					
			-		
			<u> </u>		
					

923621 02-02-10

Form **990-PF** (2009)

•	ait A	Exempt Organ		and mansactions a	ind heladonships with Nonch			
1	Did th		rectly engage in any of the following	on with any other organization	on described in section 501(c) of		Yes	No
•)(3) organizations) or in section 52					
•		•	ation to a noncharitable exempt or					1
۰	(1) (, ,	ation to a noncharitable exempt of	gasization of.		1a(1)		X
		Other assets				1a(2)		X
	٠,	transactions:		•		1.0(5/		_==
		Sales of assets to a noncharital	hle evemnt organization			1b(1)		X
	• •		ncharitable exempt organization			15(2)		X
		Rental of facilities, equipment,	• =	• ••	• • •	1b(3)		X
	• •	Reimbursement arrangements			•	1b(4)		X
		oans or loan guarantees	•••	•		1b(5)		X
		<u> </u>	mbership or fundraising solicitation	nns		1b(6)		X
			iling lists, other assets, or paid em			1c		X
				-	ways show the fair market value of the good		ets	
٠					ie in any transaction or sharing arrangemen		,,,,	
			other assets, or services received.		or many transaction or originally arrangement	., 0		
(a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, a	nd sharing arra	naeme	nts
<u> </u>			N/A					
_			24/22				-	
								
_				· · · · · · · · · · · · · · · · · · ·				
								
				· <u>-</u>				
_				"		-		
_	·							
_								
_				-				
_		<u> </u>						
_								
_								
_								
_	_					·····		
22	a Is the	foundation directly or indirect	tly affiliated with, or related to, one	e or more tax-exempt organi	zations described			
			r than section 501(c)(3)) or in sec			Yes	X] No
t		s," complete the following sch						
		(a) Name of org		(b) Type of organization	(c) Description of relation	nship		
		N/A						
						_		
					nents, and to the best of my knowledge and belief, i	t is true, correc	t,	
	and cor	npiete Declaration of preparer (other	er than taxpayer or fiduciary) is based on	all information of which preparer	r has any knowledge			
				13/25/10	trata			
ere	/ Si	gnature of officer or trustee		Date	Trtle		_	
Sign Here	un .	Preparer's		$\bigcap \Omega_A = \begin{bmatrix} 1 \end{bmatrix}$	self-	parer's identify	ing nun	nber
Sig	Paid Preparer's Use Only	signature ///	upu L. /olk	CPA	O/22/10 employed ▶ □			
	Paid spare	1 2	TERROGERS LLP	,	EIN ▶			
	Prep. P.	if self-employed), 1411				_	_	_
		address, and ZIP code FLOR	ENCE, SC 29505	<u> </u>	Phone no. 843	<u>-665-</u>	<u>590</u>	<u>0_</u>
						Form OOA	DE	20000

	ses for Tax on Investment Income				
(a) List and	describe the kınd(s) of property solo ick warehouse; or common stock, 20	i, e.g., real estate, 10 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)	
1a 2100 SHS ALCOA	INC		P	05/10/0111/09/09	
b 900 SHS ALCOA			P	VARIOUS 11/09/09	
c 1400 SHS APPLI			P	03/02/0511/25/09	
d 1000 SHS APPLI	ED MATERIALS		P	05/17/0111/25/09	
	ED MATERIALS		P	03/02/0511/25/09	
f 100 SHS APPLIE			P	03/02/0511/25/09	
g 100 SHS APPLIE			P	03/02/0511/25/09	
h 3000 SHS BANK			P	VARIOUS 02/19/09	
1 2000 SHS CATER			<u>P</u>	01/15/0212/18/09	
1000 SHS MEDICA			<u>P</u>	05/25/07/07/06/09	
k 1000 SHS PLUM		P	01/15/0211/09/09		
1 325 POTASH COR		P	07/18/08/12/18/09		
m 3500 SHS VULCA	N MATERIALS		<u>D</u>	12/08/98VARIOUS	
n 3000 SHS YAHOO	DECEMBER DECEMBER		P P	VARIOUS 11/25/09	
o MOTOROLA SETTL		(-) O		05/31/09	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		n) Gain or (loss) plus (f) minus (g)	
a 27,875.		77,241.		<u>-49,366.</u>	
b 11,935.		37,582.		-25,647.	
c 17,347.		24,368.		<u>-7,021.</u>	
d 12,382.		26,797.		-14,415.	
e 4,956.		6,962.		-2,006. -502.	
1,239.		1,741. 1,741.		-502.	
g 1,239.		126,913.		-115,030.	
h 11,883. i 113,716.		49,827.		63,889.	
5,954.		13,581.		-7,627.	
k 33,435.		29,223.		4,212.	
34,571.		68,574.		-34,003.	
m 172,582.		3070,20		172,582.	
n 45,891.		99,376.		-53,485.	
0 423.				423.	
	g gain in column (h) and owned by	the foundation on 12/31/69	(I) Lo	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (j), if any		of col. (h) gain over col. (k), not less than "-0-")	
a				-49,366.	
b				-25,647.	
С				-7,021.	
d					
<u>e</u>				-2,006.	
<u>f</u>				<u>-502.</u>	
9				-502.	
<u>h</u>				-115,030.	
1				63,889.	
	· · · · · · · · · · · · · · · · · · ·			<u>-7,627.</u>	
<u>k</u>				4,212.	
				-34,003.	
m	-			172,582.	
<u>-53,485.</u>					
0	. If goin also enter	un Part I fine 7		423.	
2 Capital gain net income or (net ca	11 (1000)) 011101	5 1	2		
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c).	od (6):	3		

CONTINUATION FOR 990-PF, PART IV OF BETSY M. CAMPBELL FOUNDATION 58-6346237 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo., day, yr.) (d) Date sold (a) List and describe the kind(s) of property sold, e.g., real estate, (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. P 02/28/09 1a ATT SETTLEMENT b CAPITAL GAINS DIVIDENDS C е m n 0 (f) Depreciation allowed (h) Gain or (loss) (g) Cost or other basis (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 10. 10 a 5,000. 5,000 b C d е h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (k) Excess of col. (ı) (j) Adjusted basis but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 10. 5,000. b C d 9 h 1 m

923591 04-24-09

<u>n</u> 0

{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }

-63,488.

N/A

2 Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
CAROLINA FIRST FIDELITY INVESTMENTS FIDELITY INVESTMENTS - US TRE	AS OBLIGAT	IONS		·		18. 20. 44.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	OLUMN A		:	9,88	82.
FORM 990-PF DIVIDEND	S AND INTE	REST FROM	SECUR	ITIES	STATEMENT	2
SOURCE	GROS	E AMOUNT		TAL GAINS VIDENDS	COLUMN (A)
FIDELITY INVESTMENTS - DIVIDE INCOME OID ON US TREAS OBLIGATIONS	END	172,723. 39,022.		5,000.	167,7: 39,0:	
TOTAL TO FM 990-PF, PART I, L	N 4	211,745.		5,000.	206,7	45.
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	4,510	. 2	,255.	 	2,2	5.5
			•		- •	55.
TO FORM 990-PF, PG 1, LN 16B	4,510	2	,255.		2,2	
-	4,510 OTHER PROFES		,255.			
-		SSIONAL FI (B) NET INV	EES	(C) ADJUSTED NET INCOM	2,2 STATEMENT (D) CHARITA	55. 4
FORM 990-PF C	(A) EXPENSES	SSIONAL FI (B) NET INVI MENT INC	EES	ADJUSTED	2,2 STATEMENT (D) CHARITA	55. 4

FORM 990-PF	TAXES				STATEMENT	T 5
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVE		ADJUSTED	(D) CHARITAI E PURPOSI	
FOREIGN TAXES PAID EXCISE TAX REFUND	20. -3,613.		0.			0.
TO FORM 990-PF, PG 1, LN 18	-3,593.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	<u> </u>
DESCRIPTION		NET INVE	ST-	ADJUSTED	(D) CHARITAI E PURPOSI	
BANK CHARGES & MISC. EXPENSES MEMBERSHIP DUES INSURANCE	276. 495. 2,197.		276. 495. 197.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	2,968.	2,	968.			0.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	7
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKE	r
US TREASURY NOTES	X	 .	791,066.		969,201.	
TOTAL U.S. GOVERNMENT OBLIGAT				791,066.	969,20	01.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART I	I, LINE 10A			791,066.	969,20	01.

FORM 990-PF	CORPORATE STOCK	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COMMON STOCK MUTUAL FUNDS	3,872,098. 481,326.	4,355,565. 473,252.
TOTAL TO FORM 990-PF, PAR	11, LINE 10B 4,353,424.	4,828,817.
FORM 990-PF	OTHER INVESTMENTS	STATEMENT 9
DESCRIPTION	VALUATION METHOD BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN REITS	COST 175,086.	165,520.
TOTAL TO FORM 990-PF, PAR	II, LINE 13 175,086.	165,520.

STATEMENT 10

FORM 990-PF

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
CAMPBELL YOUNG LEADERS CORP 104 BROADUS AVENUE GREENVILLE, SC 29601	N/A CONTRIBUTION - OPERATING FUNDS	EXEMPT	141,500.
CHEROKEE CHILDREN'S HOME, INC. PO BOX 1896 GAFFNEY, SC 29342	N/A CONTRIBUTION - OPERATING FUNDS	ЕХЕМРТ	5,000.
CHURCH OF THE NATIVITY 5900 N. LOCKWOOD RIDGE ROAD SARASOTA, FL 34243	N/A CONTRIBUTION - YOUTH PROGRAM	EXEMPT	15,000.
CLEMSON UNIVERSITY FOUNDATION 155 OLD GREENVILLE HWY UNIT 105 CLEMSON, SC 29631	N/A YOUTH GARDENING PROGRAMS	EXEMPT	110,000.
LIMESTONE COLLEGE 1115 COLLEGE DRIVE GAFFNEY, SC 29340	N/A ORGAN RESTORATION	EXEMPT	25,000.
MOLDOVA WORLD CHILDREN'S FUND 5442 THORNWOOD DRIVE SAN JOES, CA 95123	N/A CONTRIBUTION - OPERATING FUNDS	ЕХЕМРТ	7,500.
ST JOHN'S EPISCOPAL CHURCH 500 PARK SHORE DRIVE NAPLES, FL 34103	N/A YOUTH PROGRAMS	EXEMPT	5,000.
METROPOLITAN ARTS COUNCIL 16 AUGUSTA STREET GREENVILLE, SC 29601	N/A ANNUAL CAMPAIGN OF THE ARTS	EXEMPT	10,000.

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

BETSY M. CAMPBELL FOUNDATION

58-6346237

GREENVILLE TECH FOUNDATION P. O. BOX 5616 GREENVILLE, SC GREENVILLE TECH 29601

N/ASTUDENT EMERGENCY FUND PRIVATE FOUNDATION

5,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

324,000.

Page 2 Form 8868 (Rev. 4-2009) \mathbf{x} If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868. If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed) Name of Exempt Organization Employer identification number Type or print 58-6346237 BETSY M. CAMPBELL FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. For IRS use only extended due date for 104 BROADUS AVENUE filing the City, town or post office, state, and ZIP code. For a foreign address, see instructions. return See instructions GREENVILLE, SC 29601 Check type of return to be filed (File a separate application for each return) Form 8870 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990 Form 1041-A Form 990-BL Form 6069 X Form 990-PF Form 990-T (trust other than above) Form 4720 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. WILLIAM W. BROWN The books are in the care of ► 104 BROADUS AVENUE, GREENVILLE, SC -29601 Telephone No. ► 864-233-0808 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for reguest an additional 3-month extension of time until NOVEMBER 15, 2010. 4 For calendar year 2009, or other tax year beginning 5 , and ending 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO COMPILE ALL THE INFORMATION NECESSARY FOR A COMPLETE RETURN. 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 2,240. nonrefundable credits. See instructions 8a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid 2,240. previously with Form 8868 8b Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 0. Signature and Verification Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form. Signature > Title > Date >

923832 05-26-09 Form 8868 (Rev. 4-2009)

, Form 8868 (F	Rev. 4-2009)			Page 2		
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	×		▶ [X]		
-	complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868			
 If you are 	filing for an Automatic 3-Month Extension, complete only Part I (on page 1).					
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies r	eeded)			
Type or	Name of Exempt Organization	Emp	oyer identificat	ion number		
	ETSY M. CAMPBELL FOUNDATION	5	8-634623	7		
EXIGIACO	Number, street, and room or suite no. If a P O box, see instructions 0.4 BROADUS AVENUE	For If	RS use only			
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions. REENVILLE, SC 29601	<u> </u>				
Check type	of return to be filed (File a separate application for each return) 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A		orm 5227	Form 8870		
==	990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	= :	orm 6069	7 01111 0070		
STOP! Do n	ot complete Part II if you were not already granted an automatic 3-month extension on a previous	sly file	d Form 8868.			
	WILLIAM W. BROWN					
The book	s are in the care of ▶ 104 BROADUS AVENUE, GREENVILLE, SC - 2	960	1			
Telephon	e No. ► 864-233-0808 FAX No ►					
• If the org	anization does not have an office or place of business in the United States, check this box			▶ □		
• If this is f	or a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	s is fo	the whole grou	p, check this		
box 🕨	If it is for part of the group, check this box > and attach a list with the names and EINs of all	memb	ers the extension	n is for		
4 I reque	est an additional 3-month extension of time until NOVEMBER 15, 2010.					
5 For ca	lendar year 2009, or other tax year beginning, and ending					
6 If this						
7 State	n detail why you need the extension					
ADD	ITIONAL TIME IS NEEDED TO COMPILE ALL THE INFORMATI	ON	NECESSAR	Y FOR		
A C	OMPLETE RETURN.					
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
nonre	rundable credits. See instructions	8a	\$	2,240.		
b If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated					
tax pa	yments made. Include any prior year overpayment allowed as a credit and any amount paid					
previo	ously with Form 8868	8b	\$	2,240.		
c Balan	ce Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit					
with F	TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0.		
	Signature and Verification					
Under penaltie it is true, corre	es of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the ect, and complete, and shall am authorized to prepare this form.	best o	f my knowledge ar	nd belief,		
Signature >	(Inglat 1801 Title > CFA	Date	. 8/7	110		
				8 (Rev. 4-2009)		

WebsterRogers LLP P.O. Box 6289 Florence, S.C. 29502-6289 EIN 57-0776381

Form **8868**

(Rev: April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

		_
 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously 		
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	y illed i O	
• • • • • • • • • • • • • • • • • • • •		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and c Part I only	complete	▶□
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reques	 t an eyter	ision of time
to file income tax returns.	C UTT CALCT	Sion or time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic externoted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic www.irs gov/efile and click on e-file for Chanties & Nonprofits.	ronically if consolid	f (1) you want the additional lated Form 990-T. Instead,
Type or Name of Exempt Organization	Emp	loyer identification number
print DEMON M. CAMPRELL FOUNDAMION	_	0 6246227
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions.		8-6346237
filing your 104 BROADUS AVENUE		
return See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions		
GREENVILLE, SC 29601		
Check type of return to be filed (file a separate application for each return):		
Form 990 Form 990-T (corporation) Form	1 4720	
	1 5227	
	1 6069	
X Form 990-PF	1 8870	
WILLIAM W. BROWN • The books are in the care of ▶ 104 BROADUS AVENUE, GREENVILLE, SC − Telephone No ▶ 864-233-0808 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		▶ ☐
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010 Is for the organization's return for: X calendar year 2009 or tax year beginning AUGUST 15, 2010 I tax year beginning AUGUST 15, 2010 I tax year deginning AUGUST 15, 2010 I tax year deginning I and ending		The extension
, and ending, and ending		 •
2 If this tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
nonrefundable credits. See instructions.	3a_	\$ 2,240.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3ь	\$ 1,040.
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	JU_	1,010.
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		
See instructions.	3c	\$ 1,200.
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Fo	rm 8879.	EO for payment instructions

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

Form 8868 (Rev. 4-2009)