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

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.

For calendar year **2009**, or tax year beginning , and ending

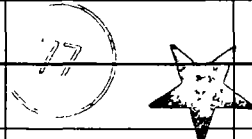
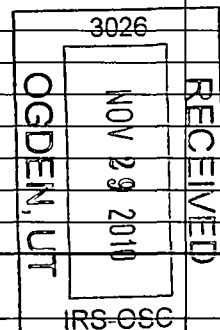
G Check all that apply: Initial return Initial return of a former public charity Final return
 Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation SCHEFFLER FAMILY FOUNDATION	A Employer identification number 59-2129811
	Number and street (or P O box number if mail is not delivered to street address) Room/suite 210 E. ELDERBERRY CIRCLE	B Telephone number (602) 432-2884
	City or town, state, and ZIP code ATHENS, GA 30605	C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 935,068.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	2,042.	2,042.		STATEMENT 1
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	29,715.	29,715.		STATEMENT 2
12 Total. Add lines 1 through 11	31,757.	31,757.		
13 Compensation of officers, directors, trustees, etc	5,500.	2,750.		2,750.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees STMT 3	4,295.	2,148.		2,147.
c Other professional fees				
17 Interest				
18 Taxes STMT 4	249.	0.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 5	1,203.	615.		615.
24 Total operating and administrative expenses Add lines 13 through 23	11,247.	5,513.		5,512.
25 Contributions, gifts, grants paid	51,375.			51,375.
26 Total expenses and disbursements. Add lines 24 and 25	62,622.	5,513.		56,887.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	<30,865.>			
b Net investment income (if negative, enter -0-)		26,244.		
c Adjusted net income (if negative, enter -0-)			N/A	

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Operating and Administrative Expenses



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Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	47,264.	9,909.	9,909.
	2 Savings and temporary cash investments	325,968.	355,538.	355,538.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 6	592,484.	569,621.	569,621.	
14 Land, buildings, and equipment: basis ▶ 3,295.				
Less: accumulated depreciation STMT 7 ▶ 3,295.				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers)	965,716.	935,068.	935,068.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ EXCISE TAX PAYABLE)	45.	262.	
23 Total liabilities (add lines 17 through 22)	45.	262.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	658,171.	658,171.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	307,500.	276,635.	
30 Total net assets or fund balances	965,671.	934,806.		
31 Total liabilities and net assets/fund balances	965,716.	935,068.		

Part III Analysis of Changes in Net Assets or Fund Balances

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	965,671.
2 Enter amount from Part I, line 27a	2	<30,865.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	934,806.
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	934,806.

Part IV Capital Gains and Losses for Tax on Investment 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.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	}	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8			3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	53,950.	1,230,275.	.043852
2007	52,915.	976,120.	.054210
2006	56,559.	971,468.	.058220
2005	51,611.	975,068.	.052931
2004	53,881.	939,792.	.057333

2 Total of line 1, column (d)	2	.266546
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.053309
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	945,198.
5 Multiply line 4 by line 3	5	50,388.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	262.
7 Add lines 5 and 6	7	50,650.
8 Enter qualifying distributions from Part XII, line 4	8	56,887.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	262.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	262.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5	262.
6	Credits/Payments:		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	262.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
1b		X
1c		X
d		
e		
2		X
3		X
4a		X
4b		
5		X
6	X	
7	X	
8a		
8b	X	
9		X
10		X

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	X		
14	The books are in care of ▶ <u>VINCE LAVIANO</u> Telephone no. ▶ <u>561-393-3515</u> Located at ▶ <u>210 E. ELDERBERRY CIRCLE, ATHENS, GA</u> ZIP+4 ▶ <u>30605</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u> N/A			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here <u>N/A</u>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ _____, _____, _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <u>N/A</u>	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ _____, _____, _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009) <u>N/A</u>	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here **N/A**

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945-5(d). **N/A**

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **N/A**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BARTON BOURDO (DECEASED 2009) 12750 W. PINE LAKE RD PLAINWELL, MI 49080	TRUSTEE 1.00	1,500.	0.	0.
MELVIN PORTER P.O. BOX 28052 PRESCOTT VALLEY, AZ 86312	TRUSTEE 1.00	2,000.	0.	0.
VINCENT LAVIANO 210 ELDBERRY CIRCLE ATHENS, GA 30605	TRUSTEE 1.00	2,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

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		

Total number of others receiving over \$50,000 for professional services ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NOT APPLICABLE	
	0.
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 lines 1 and 2.	Amount
1 N/A	
2	
3	
All other program-related investments. See instructions.	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	378,540.
c	Fair market value of all other assets	1c	581,052.
d	Total (add lines 1a, b, and c)	1d	959,592.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	959,592.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,394.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	945,198.
6	Minimum investment return. Enter 5% of line 5	6	47,260.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	47,260.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	262.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	262.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	46,998.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	46,998.
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	46,998.

Part 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	56,887.
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	56,887.
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	262.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	56,625.

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				46,998.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			27,344.	
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: ▶ \$ 56,887.				
a Applied to 2008, but not more than line 2a			27,344.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				29,543.
e Remaining amount distributed out of corpus	0.			
5 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 lines 4d and 5 from line 1. This amount must be distributed in 2010				17,455.
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				
e Excess from 2009				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(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 foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs**

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

SEE ATTACHED

b The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED

c Any submission deadlines:

SEE ATTACHED

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 8				
Total			▶ 3a	51,375.
b Approved for future payment				
NONE				
Total			▶ 3b	0.

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No	Description	Date Acquired	Method	Life	C o v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	FAX & PRINTER	01/01/95	VAR	.000		HY16	869.				869.	869.		0.	869.
2	COMPUTER	09/19/98	VAR	.000		HY16	2,426.				2,426.	2,426.		0.	2,426.
	* TOTAL 990-PF PG 1 DEPR						3,295.				3,295.	3,295.		0.	3,295.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
BANK OF AMERICA	70.
CHASE ACCOUNTS	414.
SUNTRUST ACCOUNTS	1,558.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	2,042.

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
VARIOUS MORTGAGES AND NOTES	29,715.	29,715.	
TOTAL TO FORM 990-PF, PART I, LINE 11	29,715.	29,715.	

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
RSM MCGLADREY INC	4,295.	2,148.		2,147.
TO FORM 990-PF, PG 1, LN 16B	4,295.	2,148.		2,147.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX 2009	249.	0.		0.
TO FORM 990-PF, PG 1, LN 18	249.	0.		0.

FORM 990-PF	OTHER EXPENSES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	1,203.	615.		615.
TO FORM 990-PF, PG 1, LN 23	1,203.	615.		615.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	6
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MORTGAGE LOANS	COST	569,621.	569,621.
TOTAL TO FORM 990-PF, PART II, LINE 13		569,621.	569,621.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	7
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FAX & PRINTER	869.	869.	0.
COMPUTER	2,426.	2,426.	0.
TOTAL TO FM 990-PF, PART II, LN 14	3,295.	3,295.	0.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 8

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
JOSEPH AYODELE AKONI 3801 SW 13 ST GAINESVILLE, FL 33021	NONE EDUCATION	NONE	430.
ERIKA DIANE ALBRIGHT 1205 SW PLASS AVE TOPEKA, KS 66604	NONE EDUCATION	NONE	520.
CATHYNA AMERTIS 1480 NE 151 ST APT 101 MIAMI, FL 33162	NONE EDUCATION	NONE	660.
RACHAEL MARIE BEARD 1205 SW PLASS AVE TOPEKA, KS 66604	NONE EDUCATION	NONE	430.
ERIC LI-WEI CHEN 3209 HENDERSON WALK ATLANTA, GA 30340	NONE EDUCATION	NONE	430.
CARLETHA MARIA CLEMMONS 371 NW 16 ST POMPANO BEACH, FL 33060	NONE EDUCATION	NONE	555.
O'DARRIS MARVICE D'HAITI 322 NE 115 ST MIAMI, FL 33161	NONE EDUCATION	NONE	465.
JOSETTE EUNIDE DENIS-DESROSIERS 13600 SW 79 CT PALMETTO BAY, FL 33158	NONE EDUCATION	NONE	610.

SCHEFFLER FAMILY FOUNDATION

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CATALINE SHANITHA DUGAZON 20542 NE 8 PLACE MIAMI, FL 33179	NONE EDUCATION	NONE	590.
NANCY ANN DUGAZON 20321 ME 15 AVE MIAMI, FL 33179	NONE EDUCATION	NONE	590.
PHILLIP JAMES FITE 5310 EVANS AVE AUSTIN, TX 78751	NONE EDUCATION	NONE	660.
MICHAEL IAN GREGORY 2709 BELCOURT AVE NASHVILLE, TN 37212	NONE EDUCATION	NONE	660.
DOMINIQUE MARIE HICKS 836 RICHMOND ST APT 1 TALLAHASSEE, FL 32304	NONE EDUCATION	NONE	480.
PHILIP NATHAN JACOBSON 17850 LASSEN ST APT BOX 1836 NORTHRIDGE, CA 91325	NONE EDUCATION	NONE	625.
TADAYA NICOLE JOHNSON 15400 NE 6 AVE N MIAMI, FL 33161	NONE EDUCATION	NONE	590.
MELISSA ANNE JONES 823 EAS 38 ST AUSTIN, TX 78705	NONE EDUCATION	NONE	430.
NAOMI JOSEPH 5912 NW 54 CR CORAL SPRINGS, FL 33067	NONE EDUCATION	NONE	555.
CHRISTIAN JORDAN LACOMBE 1231 SW 85 TERR PEMBROKE PINES, FL 33025	NONE EDUCATION	NONE	375.

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NAME AND ADDRESS	RELATIONSHIP	EDUCATION	AMOUNT
ANTHONY ANDREW LAVIANO 5416 JACKSON ST HOLLYWOOD, FL 33021	GRANDSON	EDUCATION	645.
TAMARAH MARIA LEE 18900 NW 14 AVE MIAMI, FL 33169	NONE	EDUCATION	625.
LISA MARIE MARTINEZ 2641 OLD NORCROSS RD TUCKER, GA 33084	NONE	EDUCATION	520.
BRANDON GERALD MCDONALD 1316 NW 51 TERR GAINESVILLE, FL 32605	NONE	EDUCATION	570.
JOY LAURA MCDONALD 5725 FERNWOOD DR JACKSON, MS 39206	NONE	EDUCATION	715.
LAURA ASHLEY MCGEHEE 3031 CARDINAL LAKE DR DULUTH, GA 30096	NONE	EDUCATION	570.
JAMIE MORANCY 281 CORRY VILLAGE APT 4 GAINESVILLE, FL 32603	NONE	EDUCATION	625.
CHINYERE BLESSING OGAMDI 23135 BARWOOD PARK LANE BOCA RATON, FL 33433	NONE	EDUCATION	445.
GILES DIONE PAUL 836 RICHMOND ST APT 1 TALLAHASSEE, FL 32304	NONE	EDUCATION	660.
NATACHA JENEL PAUL 910 BRETT DR APT 124 HINESVILLE, GA 31313	NONE	EDUCATION	395.

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MARIA FERNANCA RICO 22535 SW 94 PL MIAMI, FL 33190	NONE EDUCATION	NONE	570.
MARITZA LENA SANCLAMENTE 6300 S CONGRESS AVE APT 508 AUSTIN, TX 78745	NONE EDUCATION	NONE	555.
JAMES AARON SANDLIN 305 UNIVERSITY CR ATHENS, GA 30605	NONE EDUCATION	NONE	520.
JOHN ANDREW SANDLIN 510 CALDWELL CR ATHENS, GA 30605	NONE EDUCATION	NONE	465.
MARK THOMAS SANDLIN 510 CALDWELL CR ATHENS, GA 30605	NONE EDUCATION	NONE	430.
JAMES RUSSEL SHEHORN 5210 E VIA DEL CIELO PARADISE VALLEY, CA 85253	NONE EDUCATION	NONE	680.
MELINDA SOUFFRANT 16215 NE 18 CT APT 309 N MIAMI, FL 33162	NONE EDUCATION	NONE	465.
DUDLYNE ST REMY 275 NW 193 ST MIAMI, FL 33169	NONE EDUCATION	NONE	480.
NATHAN ANDREW TASHMAN 2790 GLENBRIAR DR ATLANTA, GA 30345	NONE EDUCATION	NONE	375.
JOZANN TERMORSHUIZEN 2110 NW 3RD PLACE GAINESVILLE, FL 32603	NONE EDUCATION	NONE	590.

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KASSANDRA TIMOTHE 109 ARGOS COMPLEX TAMPA, FL 32620	NONE EDUCATION	NONE	645.
NATALIE TIMOTHE 950 NE 129 ST MIAMI, FL 33161	NONE EDUCATION	NONE	520.
EMMANUELL TOKWAULU 1000 SW 62 BLVD GAINESVILLE, FL 32607	NONE EDUCATION	NONE	625.
LAETITIA TOKWAULU 1000 SW 62 BLVD GAINESVILLE, FL 32607	NONE EDUCATION	NONE	645.
RICHARD KYLE VAN DER NOORD 540 BETHANY RD SIMPSONVILLE, SC 29681	NONE EDUCATION	NONE	430.
MARCIA KATHLEEN WELK 4801 38 AVE NE SEATTLE, WA 98105	NONE EDUCATION	NONE	645.
TANYEL RESHUNDA WHITE 7380 STIRLING RD APT 106 DAVIE, FL 33024	NONE EDUCATION	NONE	500.
ALCIDE NEWTON 560 NE 172 ST N MIAMI BCH, FL 33162	NONE EDUCATION	NONE	855.
CATHYNA AMERTIS 1480 NE 151 ST APT 101 MIAMI, FL 33162	NONE EDUCATION	NONE	785.
O'DARRIS MARVICE D'HAITI 322 NE 115 ST MIAMI, FL 33161	NONE EDUCATION	NONE	735.

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MICHAEL IAN GREGORY 2709 BELCOURT AVE NASHVILLE, TN 37212	NONE EDUCATION	NONE	805.
MARGARET ROSE HOWELL 1322 NW 48 TERRACE GAINESVILLE, FL 32605	NONE EDUCATION	NONE	565.
NOELIA CAROLINA DE LA ROSA 16146 NW 29 AVE MIAMI, FL 33054	NONE EDUCATION	NONE	880.
PHILIP NATHAN JACOBSON 8443 LINDLEY AVE APT 7 NORTHRIDGE, CA 91325	NONE EDUCATION	NONE	785.
MELISSA ANNE JONES 206 W 38 ST AUSTIN, TX 78705	NONE EDUCATION	NONE	610.
MICHAEL RYAN JONES 1732 WEST BOWLING ST ANAHEIM, CA 92804	NONE EDUCATION	NONE	635.
ANDREW MICHAEL KIEVLAN 1300 ADAMS AVE APT 18A COSTA MESA, CA 92626	NONE EDUCATION	NONE	880.
ANTHONY ANDREW LAVIANO 22260 FOUNTAIN LAKES BLVD ESTERO , FL 33928	GRANDSON EDUCATION	GRANDSON	855.
LISA MARIE MARTINEZ 2641 OLD NORCROSS RD TUCKER, GA 30084	NONE EDUCATION	NONE	785.
MCKENTOSH FITZLEE MATHIEU 1258 NE 146 ST MIAMI, FL 33161	NONE EDUCATION	NONE	660.

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LAURA ASHLEY MCGEHEE 3031 CARDINAL LAKE DR DULUTH, GA 30096	NONE EDUCATION	NONE	905.
SRIRAM MEKA 160 BRIDGESTONE COVE FAYETTEVILLE, GA 30215	NONE EDUCATION	NONE	760.
DIANE CHRISTINA PIERRE 1360 NW 132 ST MIAMI, FL 33167	NONE EDUCATION	NONE	830.
MARIA FERNANCA RICO 22536 SW 94 PLACE MIAMI, FL 33190	NONE EDUCATION	NONE	490.
MARTHA SONJA ROJAS 717 WHITEHEAD ROAD ATHENS, GA 30606	NONE EDUCATION	NONE	635.
MARITZA LENA SANCLAMENTE 6300 S CONGRESS AVE APT 508 AUSTIN, TX 78745	NONE EDUCATION	NONE	685.
JAMES AARON SANDLIN 305 UNIVERSITY CR ATHENS, GA 30605	NONE EDUCATION	NONE	735.
MARK THOMAS SANDLIN 510 CALDWELL CR ATHENS, GA 30605	NONE EDUCATION	NONE	585.
STEPHEN JAY SANDLIN 245 KENNEDY SELLS RD AUBURN, GA 30011	NONE EDUCATION	NONE	585.
MARISSA LYNN SBARDELLA PO BOX 1016 CYPRESS, CA 90630	NONE EDUCATION	NONE	710.

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MELINDA SOUFFRANT 16215 NE 18 CT APT 309 N MIAMI, FL 33162	NONE EDUCATION	NONE	710.
DUDLYNE ST REMY 275 NW 193 ST MIAMI, FL 33169	NONE EDUCATION	NONE	805.
AMOS TIMOTHE 950 NE 129 ST MIAMI, FL 33161	NONE EDUCATION	NONE	610.
NATALIE TIMOTHE 950 NE 129 ST MIAMI, FL 33161	NONE EDUCATION	NONE	685.
EMMANUELL TOKWAULU 1000 SW 62 BLVD GAINESVILLE, FL 32607	NONE EDUCATION	NONE	855.
LAETITIA TOKWAULU 1000 SW 62 BLVD GAINESVILLE, FL 32607	NONE EDUCATION	NONE	905.
RICHARD KYLE VAN DER NOORD 540 BETHANY RD SIMPSONVILLE, SC 29681	NONE EDUCATION	NONE	565.
HANNAH REBECCA VAN EENOO 2245 YALE AVE EAST APT 36 SEATTLE, WA 98102	NONE EDUCATION	NONE	785.
PETER JAMES VAN EENOO 2245 YALE AVE EAST APT 36 SEATTLE, WA 98102	NONE EDUCATION	NONE	830.
MARCIA KATHLEEN WELK 4801 38 AVE NE SEATTLE, WA 98105	NONE EDUCATION	NONE	905.

SCHEFFLER FAMILY FOUNDATION

59-2129811

KASSANDRA TIMOTHE 109 ARGOS COMPLEX TAMPA, FL 33620	NONE EDUCATION	NONE	735.
TADAYA NICOLE JOHNSON 15400 NE 6 AVE N MIAMI, FL 33161	NONE EDUCATION	NONE	585.
CATALINE SHANITHA DUGAZON 20542 NE 8 PLACE MIAMI, FL 33179	NONE EDUCATION	NONE	540.
NANCY ANN DUGAZON 20321 ME 15 AVE MIAMI, FL 33179	NONE EDUCATION	NONE	540.

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

51,375.

SCHEFFLER FAMILY FOUNDATION

210 Elderberry Circle, Athens, GA 30605

TELEPHONE (706) 534-0416

FAX (706) 534-0434

Instructions to applicants

Please read carefully, sign and return with your application.

The Scheffler Family Foundation is a scholarship fund founded by Jean Ann Scheffler for the purpose of assisting needy students in their endeavor to achieve a higher education.

Acceptance, qualification, and the continued renewal of this scholarship depends upon your academic performance, need and the availability of scholarship funds. You must maintain a grade point average of at least 2.0 and be taking a minimum of 12 credit hours per semester to be considered.

In order to obtain assistance for the next Fall term please **complete** the enclosed application and return it, to us, together with a signed copy of this letter, by the date indicated on the application. Assistance will be awarded based upon grades, work load, financial need, and availability of funds. The application must be received, by us, at the above address, via USPS no later than the due date indicated. Applications, or supporting documents, sent by FAX or e-mail will not be accepted nor acknowledged, except by prior arrangement. If for some reason this is impossible please notify us of the delay, with reason, in writing prior to the due date. **Please follow all instructions on the application as incomplete, late, e-mailed or FAXed applications will not be considered nor replied to.**

Sincerely yours,

Scheffler Family Foundation

Trustees

Mr. Barton Bourdo

Mr. Vincent R. Laviano

Mr. Melvin B. Porter

Applicants Name (Please print)

Applicants signature

Applicants Social Security Number

Date

SCHEFFLER FAMILY FOUNDATION

210 Elderberry Circle, Athens, GA 30605 Tel (706) 534-0416 FAX (706) 534-0434

Fall 2009 SCHOLARSHIP APPLICATION

Due September 15, 2009

Student's Name: (FN) _____ (MN) _____ (LN) _____

Date of Birth: _____ Soc. Sec.# _____ E-Mail address: _____
Permanent Mailing Address _____

Home Telephone Number: () - _____ Other: () - _____ Cell: () - _____
Name and address of College or University you will be attending: _____

Year entering or in progress in September: (check one) ___ Freshman ___ Sophomore ___ Junior ___ Senior

Number of credit hours you will be taking this term _____ (12 min) Is this your first application to "The Scheffler Family Foundation"? (Y/N) _____

Expected annual college expenses:
Semester Tuition: \$ _____ Semester Books & Supplies: \$ _____ Semester Room & Board: \$ _____

Other educational grants or loans you expect to receive (source & amount): _____

Parent and Student Financial Statement:

Annual Income (amount and source) _____
\$ _____
\$ _____

When not attending school do you live with your parents? ___

Major Expenses: other than college:

\$ _____
\$ _____
Family composition _____

Explain your need for financial assistance (You may use additional sheets if necessary)

I DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION, PERTAINING TO INCOME, EMPLOYMENT, EXPENSES AND ASSETS, IS TRUE AND ACCURATE TO THE BEST OF MY/OUR KNOWLEDGE.

The Scheffler Family Foundation reserves the right to reject, without notice, any application that is not legible and complete, containing all information requested. Student must take 12 credits per semester and maintain a 2.0 GPA.

- A copy of the following **MUST** accompany this application:
1. your most recent Income Tax return complete with all schedules.
 2. your parents most recent Income Tax return complete with all schedules
 3. a complete copy of your transcript of grades.
 4. Evidence of enrollment for this term (including number of credits).
 5. Signed "Instructions To Applicant"

All documents must be mailed to the above address with original signatures.

PARENT'S SIGNATURE _____ DATE _____

PARENT'S SIGNATURE _____ DATE _____

STUDENT'S SIGNATURE _____ DATE _____

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- 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)	
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization SCHEFFLER FAMILY FOUNDATION	Employer identification number 59-2129811
	Number, street, and room or suite no. If a P.O. box, see instructions 210 E. ELDERBERRY CIRCLE	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ATHENS, GA 30605	

Check type of return to be filed (File a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

VINCE LAVIANO

- The books are in the care of **▶ 210 E. ELDERBERRY CIRCLE - ATHENS, GA 30605**
Telephone No **▶ 561-393-3515** FAX No **▶**
- 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 box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for
- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**
- 5 For calendar year **2009**, or other tax year beginning _____, and ending _____.
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension _____

**TAXPAYER IS WAITING ON INFORMATION FROM OUTSIDE THIRD PARTIES
ESSENTIAL IN FILING A COMPLETE AND ACCURATE RETURN.**

8a 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.	8a	\$	1,000.
b 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 previously with Form 8868.	8b	\$	1,000.
c 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.	8c	\$	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 **▶ CPA** Date **▶** _____