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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

	<u> </u>						
For o	calen	dar year 2009, or tax yea	r beginning		, and ending		
G (heck	all that apply:	Initial return		rmer public charity	Final return	1
			Amended return	Address chang	ge	Name change	
Use	the I	RS Name of foundation				A Employer identification	number
	abel.	- 1					
Oth	erwis	se, MITCHELL]	INDUSTRIES F	'OUNDATION		63-1190038	<u> </u>
	print	· ·	O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
	r type		CREEK PARK	YAW	1200	(205) 802-	2229
	Spec ructio	ne City of town, State, a				C If exemption application is p	ending, check here
		BIRMINGHAN				D 1. Foreign organizations	s, check here
H_C	_		X Section 501(c)(3) ex			Foreign organizations me check here and attach co	emputation
ᆫ		ction 4947(a)(1) nonexem		Other taxable private founda		E If private foundation sta	
		rket value of all assets at (-	Accrual	under section 507(b)(1	(A), check here
		Part II, col. (c), line 16)	0	ther (specify)		F If the foundation is in a	
<u> </u>				ımn (d) must be on cash b		under section 507(b)(1)	
Pa	<u>irt l</u>	" (The total of amounts in colu	ımns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
		necessarily equal the amoun		' '	niconic		(cash basis only)
	i _	Contributions, gifts, gran	•	215,868.		N/A	
	2	Check Interest on savings and temperature	on is not required to attach Sch. 8 orary		 	 	
	3	cash investments	•			<u> </u>	
	4	Dividends and interest fro	om securities			-	
		Gross rents	•	· · ·			
		Net rental income or (loss)					
ne		Net gain or (loss) from sale of Gross sales price for all	assets not on line 10				
Revenue	b	assets on line 6a	5 4844 60		0.		
Re e	7	Capital gain net income (from	•		<u> </u>		IVED
	8 9	Net short-term capital gail Income modifications				REC	TIVED
	40.	Gross sales less returns	1				
						NUL (S)	1 2010 S
	l .	Gross profit or (loss)					<u> </u>
	11	Other income	• •			OGD	FNIIT
	12	Total, Add lines 1 through	nh 11	215,868.	0.		
	13	Compensation of officers, dire		0.	0.		0.
	14	Other employee salaries	·		-		
-	15	Pension plans, employee					
		Legal fees	STMT 1	439.	0.		0.
	Ι.	Accounting fees	STMT 2	1,085.	0.		0.
	С	Other professional fees					
Operating and Administrative Expe	17	Interest	• •				
	18	Taxes					
	19	Depreciation and depletion	on				
	20	Occupancy					
Z	21	Travel, conferences, and	meetings				
	22	Printing and publications					
Ü	23	Other expenses	STMT 3	669.	0.	<u> </u>	0.
œ <u>É</u>	24	Total operating and adm					
ě		expenses. Add lines 13 t	-	2,193.	_0.	·	0.
	25	Contributions, gifts, gran		209,750.		-	209,750.
	26	Total expenses and disb	oursements.	044 045	•		000 550
	-	Add lines 24 and 25		211,943.	0.		209,750.
	27	Subtract line 26 from line		2 005			
		Excess of revenue over exper		3,925.			
		Net investment income (0.		-
9235 02-0	01.	Adjusted net income (if n		Act Notice and the instruct	ione -	N/A	Form 990-PF (2009)
02-0	2-10	LUM LOI PHVACY ACT	anu raperwork Reduction	Act Notice, see the instruct	มบทจ.		10/111 330-1 1 (2009)

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	L	14,277.
2	Enter amount from Part I, line 27a	2	Γ	3,925.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4		18,202.
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		18,202.

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30 Total net assets or fund balances

31 Total liabilities and net assets/fund balances

18,202

18,202

14,277.

14,277

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				se	(c) Date acquired (mo., day, yr.)		(d) Date sold (mo., day, yr.)		
1a										
b NO	ONE									
C			· · · · · · · · · · · · · · · · · · ·		<u> </u>					
<u>d</u>				 -	<u> </u>					
<u>e</u>	T				<u> </u>		1			
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		st or other basis expense of sale					laın or (loss) s (f) mınus (
	+	(or anomable)	- Pius 0	Aponoc 01 3010				(0) più	3 (1) 11111103 (9/
<u>a</u>	+								_	
C					\neg				··-	
d				-						
e										
Complete only for assets show	ng gain in c	column (h) and owned by	he foundation	on 12/31/69					Col. (h) gain	
(i) F.M.V. as of 12/31/69		i) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			CO	l. (k), but Losses	not less than (from col. (i	1 -0-) or h))
a										
b										
C										
d	ļ									
<u>e</u>										
2 Capital gain net income or (net	capital loss)	If gain, also enter If (loss), enter -0	ın Part I, line ın Part I, line	7 7	}	2				
3 Net short-term capital gain or (I	3, column (c		d (6):		}					
If (loss), enter -0- in Part I, line Part V Qualification	。 Under S	ection 4940(e) for	Reduced	Tax on Net	Inv	estme	nt Inc	come		
(For optional use by domestic priva										
If section 4940(d)(2) applies, leave		•				-,				
Was the foundation liable for the se If "Yes," the foundation does not qu				•	riod?					Yes X No
1 Enter the appropriate amount is					es.					
(a) Base period years Calendar year (or tax year begin	nina in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) nchar	ıtable-us	e assets	3	Distrib (col. (b) divi	(d) ution ratio ided by col. (c))
2008		19	1,284.			10	,04			19.03891
2007		18	0,650.	,		3	, 230).		55.92879
2006		10	<u>4,150.</u>				314			331.68789
2005			1,250.			5	,62			14.45472
2004		5	<u>3,750.</u>				446	5.		<u> 120.51569</u>
2 Total of line 1, column (d)								2		541.62602
3 Average distribution ratio for th	e 5-year bas	e period - divide the total (on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exis	-	•		•				3		108.32520
4 Enter the net value of noncharit	able-use ass	sets for 2009 from Part X,	line 5					4		15,996
5 Multiply line 4 by line 3								. 5		1,732,770
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)	•					6_		0
7 Add lines 5 and 6								7		1,732,770
8 Enter qualifying distributions fro	om Part XII,	line 4						8_		209,750

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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.

_	990-PF (2009) MITCHELL INDUSTRIES FOUNDATION		<u> 1190</u>			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see	nstru	ctio	<u>ns)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here 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 and enter 1%	1			_	0.
	of Part I, line 27b	l				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	l				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3				0.
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				0.
6	Credits/Payments:					
-	2009 estimated tax payments and 2008 overpayment credited to 2009					
	Exempt foreign organizations - tax withheld at source	1				
	Tax paid with application for extension of time to file (Form 8868) 6c	1				
		1				
		7				0.
_	Total credits and payments. Add lines 6a through 6d		 			<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	-			
<u>11</u>	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11	<u> </u>			
	rt VII-A Statements Regarding Activities				Vaa	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		\vdash	Yes	
	any political campaign?			1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
	distributed by the foundation in connection with the activities.			.	-	
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$	<u>.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	••••		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	[/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5		X
٠	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
Ů	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	e law				
	remain in the governing instrument?			6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?	•		7	х	
•	If "Yes," complete Part II, col. (c), and Part XV.					
٥.	Enter the states to which the foundation reports or with which it is registered (see instructions)					
08	AL					
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
				01-	v	
^	of each state as required by General Instruction G? If "No," attach explanation	ondor		8b	<u>X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the state of the	enuar				.
40	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	_	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .			<u>10</u>	DE	
			FOR	m 990	-rr (ZUUY)

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

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be I	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	es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	· · · ·			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No	1 1
• •	=	L ''	3 L22 NU	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in Section		es X No	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es Las No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or			
the prevention of cruelty to children or animals?		•	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulatıons		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A L	5b
Organizations relying on a current notice regarding disaster assistance check h	ere	•		i i
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	om the tax because it mainta	ined		
expenditure responsibility for the grant?	N	1/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?			es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?	,		6b X
If "Yes" to 6b, file Form 8870.	ordonal bonont confider.			11
7a At any time during the tax year, was the foundation a party to a prohibited tax s	holter transaction?	v	es X No	}]
•			·	7b
b If yes, did the foundation receive any proceeds or have any net income attribute		nagara Highli		70
Part VIII Information About Officers, Directors, Trust	ees, roundation Ma	inagers, migni	y	
List all officers, directors, trustees, foundation managers and their	compensation			
List all officers, directors, dustees, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	account, other
(4)	to position	`enter'-0-)	compensation	allowances
SEE STATEMENT 4		0.	0.	0.
				-
				
Compensation of five highest-paid employees (other than those inc	luded on line 4). If none	ontor HNONE II		· · · · · · · · · · · · · · · · · · ·
Compensation of live highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(a) Evnança
(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		compensation	allowances
NONE				
				······································
		· · ·		
· · · · · · · · · · · · · · · · · · ·				
Catal number of other ampleyage paid eyes \$50,000		I		0
Total number of other employees paid over \$50,000				
			Form \$	990-PF (2009)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	ee 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.
ь	Average of monthly cash balances	1b	16,240.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	16,240.
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	16,240.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	244.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,996.
6	Minimum investment return Enter 5% of line 5	6	800.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	800.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	800.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	800.
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	800.
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	209,750.
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	209,750.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209,750.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for t	he section

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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,	Corpus	Tours prior to 2000		2000
line 7				800.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	<u> </u>
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 53,728.				
b From 2005 80,969.				
c From 2006 104,134.				
d From 2007 180, 489.				
e From 2008 190,782.	610,102.			
f Total of lines 3a through e	610,102.			
4 Qualifying distributions for 2009 from Part XII, line 4: ▶\$ 209,750.				
a Applied to 2008, but not more than line 2a			0.	
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				800.
e Remaining amount distributed out of corpus	208,950.			
5 Excess distributions carryover applied to 2009	0.		· · · · · · · · · · · · · · · · · · ·	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)			-	
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 31, 4c, and 4e Subtract line 5	819,052.			
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		0.		
amount - see instructions e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract			<u> </u>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	53,728.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	765,324.			
10 Analysis of line 9:				
a Excess from 2005 80,969.				
b Excess from 2006 104,134.				
c Excess from 2007 180, 489.				
d Excess from 2008 190, 782.				
e Excess from 2009 208,950.				Form 990-PF (2009)

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	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	status of recipient		
a Paid during the year	or šubstantial contributor	recipient		
SEE STATEMENT 5		:		
Total			▶ 3a	209,750
b Approved for future payment				
NONE				
			▶ 3b	0 orm 990-PF (2009

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt
1 Program service revenue:	code		COGE		
b	_				
c	-	·			· · · · · ·
d	1				
е					
1					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments .					
Dividends and interest from securities			ļ.		
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					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events				<u> </u>	
Gross profit or (loss) from sales of inventory		·	ļ		
Other revenue:					
<u> </u>	-				
b	-		1		
<u> </u>	-				
d					
e		0.		0.	
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		1 1	13	· · · · · · · · · · · · · · · · · · ·
See worksheet in line 13 instructions to verify calculations.	1				
Part XVI-B Relationship of Activities					

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
	<u> </u>	
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	• Exempt Organizations		ia nonanompo man monoma			
1	Did the organization directly or indirectly engage in any of the followi	ng with any other organization	described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 5					
a	Transfers from the reporting foundation to a noncharitable exempt of					
	(1) Cash			1a(1)		X
	(2) Other assets	•		1a(2)		Х
b	Other transactions:		•			
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		х
	(2) Purchases of assets from a noncharitable exempt organization		•	1b(2)		Х
	(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 solicitati	ons		1b(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid en	· ·		1c		х
	If the answer to any of the above is "Yes," complete the following sch		ays show the fair market value of the goods, of	her ass	ets,	
	or services given by the reporting foundation. If the foundation received					
	column (d) the value of the goods, other assets, or services received					
(a)	Line no (b) Amount involved (c) Name of noncharitable	le exempt organization	(d) Description of transfers, transactions, and si	naring arr	angeme	ents
	N/A			-		
2a	a Is the foundation directly or indirectly affiliated with, or related to, one	e or more tax-exempt organiza	itions described			
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	ction 527?		Yes	X	No
_ <u>b</u>	b If "Yes," complete the following schedule.					
	(a) Name of organization	(b) Type of organization	(c) Description of relationship	p		
	N/A					
_						
					_	
_						
	Under penalties of perjury, I declare that I have examined this return, including acc and complete. Declaration of preparer (other than taxpayer or fiduciary) is based or			ие, согтес	ct,	
	and complete Decidation of prepara (cirila than taxpayar or inductary) is based on		•			
	Laure)	06.17 2013				
ē	Signature of officer or trustee	Date	Title			
Sign Here	Preparer's Preparer's	C O A Dar		s identify	ing nun	iber
Sig	signature Firm's name (or yours BARFIELD, MURPHY, String of seff-employed). 1121 RIVERCHASE OF F		employed length			
	BARFIELD, MURPHY, S		I, P.C. EIN ►			
	1121 RIVERCHASE OF			_	_	_
	address, and ZIP code BIRMINGHAM, AL 3524	14	Phone no. 205-9			
			Fori	m 990 -	-PF (2009)

Schedule B

(Form 990, 990-EZ, or 990-PF) .

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

MITCHELL INDUSTRIES FOUNDATION 63-1190038 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

MITCHELL INDUSTRIES FOUNDATION

63-1190038

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MITCHELL INDUSTRIES 820 SHADES CREEK PARKWAY, SUITE 1200 BIRMINGHAM, AL 35209	\$ 215,868.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

FORM 990-PF	LEGAL	FEES	S	PATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
MAYNARD COOPER & GALE	439.	0.		0.
TO FM 990-PF, PG 1, LN 16A	439.	0.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	FATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
BARFIELD, MURPHY, SHANK, & SMITH, P.C.	1,085.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	1,085.	0.		0.
FORM 990-PF	OTHER E	XPENSES	S	ratement 3
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
FUNDRAISING CAMPAIGN BANK CHARGES	642. 27.	0.		0.
TO FORM 990-PF, PG 1, LN 23	669.	0.		0.

	ST OF OFFICERS, D. D FOUNDATION MANA	STATEMENT 4		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GUY K MITCHELL, JR. 2809 PUMPHOUSE ROAD BIRMINGHAM, AL 35243	PRESIDENT 0.50	0.	0.	0.
KATHARINE J MITCHELL 2809 PUMPHOUSE ROAD BIRMINGHAM, AL 35243	VICE PRESIDENT 0.50	0.	0.	0.
JETT T HAWK 17 NORMAN DRIVE BIRMINGHAM, AL 35213	DIRECTOR 0.50	0.	0.	0.
STEVEN F GARRETT 868 MEADOWRIDGE DRIVE GARDENDALE, AL 35071	SECRETARY/TREAS	SURER 0.	0.	0.
BRUCE R DONNELLAN 35 WINTHROP AVENUE BIRMINGHAM, AL 35213	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 5		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
ALABAMA BALLET	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	7,500.	
ALTAMONT SCHOOL	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	6,000.	
BIRMINGHAM MUSEUM OF ART	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	7,500.	
CHILDCARE RESOURCES	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	2,500.	
CRIPPLED CHILDREN'S FOUNDATION	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	5,000.	
FRIENDS OF BIRMINGHAM BOTANICAL GARDENS	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	2,500.	
GLENWOOD INC.	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	17,000.	
JUNIOR ACHIEVEMENT	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	750.	

MITCHELL INDUSTRIES FOUNDATION		63	3-1190038
MCWANE CENTER	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	10,000.
ST PETERS ANGLICAN CHURCH	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	60,000.
THE FOUNDRY RESCUE MISSION	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,500.
TOCQUEVILLE SOCIETY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	10,000.
UNIVERSITY OF ALABAMA	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	10,000.
CAHABA RIVER SOCIETY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
UAB COMPREHENSIVE CANCER CENTER	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	2,000.
THE SALVATION ARMY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,600.
THE ALS ASSOCIATION	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	2,750.
ROBERT E. REED	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.

MITCHELL INDUSTRIES FOUNDATION	1	6:	3-1190Ó38
THE 410 BRIDGE	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.
THE KING'S RANCH	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	5,250.
AMH FOUNDATION	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	5,000.
UAB DEPARTMENT OF MEDICINE	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	8,100.
THE ROARING GAP FUND	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	10,000.
ALLEGHANY COUNTY RESCUE SQUAD	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.
CADDIE FUND	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	300.
WFUBMC	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.
BAYLOR SCHOOL	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
THE UNIVERSITY OF VIRGINIA	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.

MITCHELL INDUSTRIES FOUNDATION	ī	6	3-1190038
HABITAT FOR HUMANITY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.
MEDICAL MISSION INTERNATIONAL	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	3,000.
CORNERSTONE SCHOOLS OF ALABAMA	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	2,500.
UNITED WAY OF CENTRAL ALABAMA	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
CHERRY LANE VOLUNTEER FIRE DEPARTMENT	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,000.
RESTORATION ACADEMY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	15,000.
ALABAMA STATE TROOPERS ASSOC	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
CAPSTONE ENGINEERING SOCIETY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
AMERICAN CANCER SOCIETY	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	500.
COMMUNITY CARE CENTER	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,500.

MITCHELL INDUSTRIES FOUNDATION		6	3-1190038
SECOND HARVEST FOOD BANK	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,500.
SAVE OUR STRAYS	NONE UNRESTRICTED	NON-PROFIT ORGANIZATI	1,500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		209,750.

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-I	Month Extension, complet	te only Part Land check	k this box		·	■ X
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).						
Do not complete Part II unless you h	•		· · · · · ·		m 8868.	
Part I Automatic 3-Mon	th Extension of Time	Only submit original (no copies needed).			
A corporation required to file Form 990)-T and requesting an autor	natic 6-month extension	- check this box and com	plete		
Part I only						
All other corporations (including 1120- to file income tax returns.	C filers), partnerships, REM	ICs, and trusts must us	e Form 7004 to request an	exten	sion of time	
Electronic Filing (e-file). Generally, yo noted below (6 months for a corporation (not automatic) 3-month extension or (3 you must submit the fully completed a www.irs.gov/efile and click on e-file for	on required to file Form 990 2) you file Forms 990-BL, 60 nd signed page 2 (Part II) o	-T). However, you canno 069, or 8870, group retu	ot file Form 8868 electroni urns, or a composite or co	cally if nsolida	(1) you want the ted Form 990-T.	additional
Type or Name of Exempt Organiza	tion			Empl	oyer identificat	ion number
print				_		_
File by the	STRIES FOUNDAT			6	<u>3-119003</u>	8
due date for Number, street, and room	or suite no. If a P.O box, so					
return See	EEK PARKWAY, 1	•				
City, town or post office, s BIRMINGHAM, A	tate, and ZIP code For a for Land 1991 L	oreign address, see inst	ructions			
Check type of return to be filed (file a	separate application for ea	ch return):				
Form 990	Form 990-T (corporation	n)	Form 47	'20		
Form 990-BL	Form 990-T (sec 401(a)		Form 52	27		
Form 990-EZ	Form 990-T (trust other	than above)	Form 60	069		
X Form 990-PF	Form 1041-A		Form 88	370		
 The books are in the care of 		35209			E 1200 -	
Telephone No ▶ <u>(205)</u> 80			<u>(205) 802-22</u>	<u> 27 </u>		. —
If the organization does not have ar	•	·				
If this is for a Group Return, enter the state of th						
box 🕨 💹 . If it is for part of the gro	up, check this box 🕨 📖	and attach a list with	the names and EINs of all	memb	ers the extension	n will cover
1 I request an automatic 3-month AUGUST 15, 201	` <u> </u>	•	90-T) extension of time unt the organization named a		The extension	
is for the organization's return fo						
► X calendar year 2009 o	ır					
tax year beginning		, and ending			_ ·	
2 If this tax year is for less than 12	months, check reason.	Initial return	Final return		Change in accou	unting period
3a If this application is for Form 990)-BL, 990-PF, 990-T, 4720, (or 6069, enter the tenta	tive tax, less any			
nonrefundable credits. See instr	uctions			3a	\$	0.
b If this application is for Form 990	-		ımated			
tax payments made. Include any				3b	\$	0.
c Balance Due. Subtract line 3b fr	•	-	•			
deposit with FTD coupon or, if re	equired, by using EFTPS (El	ectronic Federal Tax Pa	yment System).		•	^
See instructions.				3c	\$	0.
Caution. If you are going to make an e	electronic fund withdrawal v	vith this Form 8868, see	Form 8453-EO and Form	8879-6	O for payment	nstructions.
LHA For Privacy Act and Paperwo	ork Reduction Act Notice,	see Instructions.	·		Form 886	B (Rev. 4-2009)