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#### **Return of Private Foundation**

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

reated as a Private Foundation

2009

OMB No. 1545-0052

2010
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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					g	, 2009, and ending				, 20		
G Check all that apply Initial return					1		Initial return	of a former p	ublic charity	Fınal reti	ırn	
				Amended r	eturi	n	Address	change	Nan	me change		
Us	e the	IRS	Name of fo	oundation						A Employer Identification number		
label. DO UNTO OTHERS TRU					RU	ST INC	!			65-0517915		
Ot	herw	,	Number ar	nd street (or P.O. box ni	ımbe	r if mail is not	delivered to st	reet address)	Room/suite	B Telephone number	er (see instructions)	
	prin			W 11 ST				,		(305)643-0		
	or type Soc	ecific		n, state, and ZIP cod	le					<u> </u>	is pending, check here	
	•			FL 33135							zations, check here	
			of organiza		01(0	c)(3) exemp	t private four	ndation		2. Foreign organizati	ons meeting the 85% and attach computation	
			_	exempt charitable tru		$\overline{}$		ite foundation	1	E If private foundati	on status was	
				assets at end of			method X		Accrual	terminated under 507(b)(1)(A), chec		
			art II, col. (c		Ī	Other (sp	<u> </u>	,	7 1001 da.	F If the foundation i	s in a 60-month	
▶ S	_		•	4,405,405	(Pai			on cash basi	ıs )	termination under 507(b)(1)(B), chec		
		Anal		enue and Expenses					····		(d) Disbursements	
L	11IJ	(The	total of amo	unts in columns (b),	i		enue and	(b) Net in	vestment	(c) Adjusted net	for charitable	
				t necessarily equal th		•	ises per oks	inco	me	ıncome	purposes (cash basis only)	
	1	Cont	ributions, gifts	grants, etc., received	<del>′</del>						(02011 02010 0111))	
	2		ch schedule).		red			<del> </del>		***************************************		
	3		"► U to att	ach Sch. B and temp. cash investme	ŀ				51,208	E1 200		
	ر ا		•	and temp. cash investment of the securities	H		-		+	51,208 142,860	***************************************	
	<b>.</b>				` F		·	1.	12,860	142,860		
		Netr			. }							
R			ne or (loss)		- }							
Ε		-	ain/(ioss) trom s sales price fo	sale of assets not on line or	10							
V	١ ـ '	all as	sets on line 6a		-							
E N	(			ome (from Part IV, line 2)	-	·····			0			
ΰ	8			capital gain	.	······				0		
Ε	9 10 a		me modifica s sales less	itions I	<u>,</u>					0		
		rtns.	& allowances Cost of		<u> </u>							
		good	ssoldi ∙	L	$\overline{}$					····		
	l			loss) (attach schedule								
	11		•	ttach schedule) , #.	╸┝				6,706	104.000		
0	12		ensation of of	1 through 11	$\cdot$		0	20	00,774	194,068		
P	13	direc	tors, trustees,	etc	. }		0			······································		
E R	14	_		salaries and wages.	- H						<del> </del>	
A	15		•	employee benefits	. }			<u> </u>				
Ţ				th schedule)	;		685	<del></del>	655			
N	,		_	(attach schedule) #2	- ⊢		675		675			
Ğ				nal fees (attach schedul	e)						<del> </del>	
&	17				}		-	<u> </u>				
A	18			edule) (see instructions)	_ }							
D M	19			ach sch ) and depletio	n					,		
<u> </u> -	20		ipancy		.		0.65=	<u></u>				
Ņ	21			es, and meetings	.		2,067		2,067	2,067		
ŧ	22-		ing-and-pub		:					<del> </del>		
PO PO	23			(attachedule).#.	<b>≯</b>		27,204		27,204	27,204		
ĘĆ	24			and administrative								
8 8	ــاِ ا			Jines 194 prough 23	-		29,946	2	29,946	29,271	0	
Ē		_		ffs grants paid	.		59,800				259,800	
S				ements. Add lines 24 and	25	2	89,746	2	29,946	29,271	259,800	
	27 2	Subt	ract line 26	from line 12: 1ue over expenses								
	1	and	disburseme	ents	Ļ	-2	89,746			······		
	1			income (if neg., enter -	٠,			17	70,828			
		: Adju	sted net in	come (if neg., enter -0-	<u> </u>					164,797		

D:	irt II	Balance Sheets description column should be for	Beginning of year	End	of year
	47 4 47	end-of-year amounts only. (See inst )	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash non-interest-bearing	-61,569	53,508	53,508
	2	Savings and temporary cash investments	3,381,084	3,522,084	3,522,084
	3	Accounts receivable ▶		,	
		Less. allowance for doubtful accts. ▶	ĺ		10,000
	4	Pledges receivable ▶			
	İ	Less: allowance for doubtful accts. ▶	ĺ		ĺ
	5	Grants receivable		<del></del>	
A	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) Other notes and loans receivable (attach schedule)			
S		Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
S	10a	Investments U.S. and state govt. obligations (attach sch)			· · · · · · · · · · · · · · · · · · ·
	ь	Investments corporate stock (attach schedule) #4.			
	c	Investments corporate bonds (attach schedule)			
	11	Investments land, buildings, and equipment, basis			
	12	Investments mortgage loans	976,752	819,813	819,813
	13	Investments other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers see the			
		ınstructions. Also, see page 1, item I)	4,296,267	4,395,405	4,405,405
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			1
A B I	19	Deferred revenue			1
L	20	Loans from officers, directors, trustees, and other disqualified persons			1
H	21	Mortgages and other notes payable (attach schedule).			1
1	22	Other liabilities (describe ▶			1
E S	23	Total liabilities (add lines 17 through 22)	0	0	†
<u> </u>		Foundations that follow SFAS 117, check here ▶			-
N F E U	24	and complete lines 24 through 26 and lines 30 and 31.  Unrestricted			
ΤN	25	Temporarily restricted			1
A B A L A N	26	Permanently restricted			1
SB		Foundations that do not follow SFAS 117, ck. here ▶ 🏻			1
ΕĹ		and complete lines 27 through 31.	i		
T A	27	Capital stock, trust principal, or current funds	į		
- (:	28	Paid-in or capital surplus, or land, bldg., and equipment fund			-
O É R S	29	Retained earnings, accumulated income, endowment, or other funds	1 206 267	4 405 405	-
H S	30	Total net assets or fund balances (see the instructions)	4,296,267	4,405,405	-
	31	Total liabilities and net assets/fund balances (see the institutions)	4,296,267	4,405,405	-
Do			4,296,267	4,405,405	<u> </u>
		Analysis of Changes in Net Assets or Fund Bal			<del></del>
ı		net assets or fund balances at beginning of year Part II, column	· · · · · · · · · · · · · · · · · · ·	)	4 206 255
_		of-year figure reported on prior year's return)			4,296,267
2		r amount from Part I, line 27a			-289,746
3		r increases not included in line 2 (itemize) See attachme		3_	398,884
4		lines 1, 2, and 3			4,405,405
5		eases not included in line 2 (itemize) ▶		5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)	Part II column (h) line :	30 I 6	4 405 405

Form 990-PF (2009)DO UNTO		-0517915		<del></del>	Page
. (a) List and describe	s and Losses for Tax on In the kind(s) of property sold (e.g., re nouse; or common stock, 200 shs. N	al estate,	(b) How acquired P Purchase	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
1a	10000, 01 0011111011 010011, 200 0110. 11		D Donation	(mo., day, y. )	(mo., day, y)
b				<del></del>	<del></del>
	<del></del>	<del></del>	-	<u> </u>	
d	- · · · · · · · · · · · · · · · · · · ·				
е					<del></del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, · • ·	or other basis ense of sale		or (loss) ) minus (g)
a					<u> </u>
b					
С					
d					
e	<u> </u>				
Complete only for assets sh	nowing gain in column (h) and owner	d by the foundati	on on 12/31/69	(I) Gains (Col.	(h) gain minus
(I) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. (I) ol. (J), if any	• • •	less than -0-) <b>or</b> om col. (h))
a					
b					
C					
d					
<u>e</u>	<u> </u>	<u> </u>		<u> </u>	
2 Capital gain net income or (	net capital loss) If gain,	also enter in Part enter -0- in Part	I, line 7	2	0
	or (loss) as defined in sections 1222				
	ine 8, column (c) (see the instruction				
	line 8			3	0
	Under Section 4940(e) for				
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax c	n net investment inc	ome )	
If section 4940(d)(2) applies, lea	ave this part blank.				
Was the foundation liable for the	e section 4942 tax on the distributab t qualify under section 4940(e). Do	le amount of any	year in the base peri	od?	. Yes X No
· · · · · · · · · · · · · · · · · · ·					
	unt in each column for each year; se	e the instructions	<del></del>	ntries.	/-/\
( <b>a)</b> Base period years	(b) Adjusted gualifying distribu	tions	<b>(C)</b> Net value of	Dist	(d) ribution ratio
Calendar year (or tax year beg. II	n)	noi	ncharitable-use assets	(col. (b) c	livided by col. (c))
2007	<del></del>		<del>-</del>		
2006			<del></del>		·
2005					
2004				-	<del> </del>
				<u> </u>	* .
2 Total of line 1, column (d)				2	0.00000
	or the 5-year base period divide				
	s been in existence if less than 5 year				0.00000
	charitable-use assets for 2009 from				
	t income (1% of Part I, line 27b)				1,708
7 Add lines 5 and 6				7	1,708

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

259,800

8 Enter qualifying distributions from Part XII, line 4.....

Pa	rt VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 s	see th	e Instr	uctic	ns)	
1 a	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 ruling letter if necessary see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			1,7	708
	here ▶ X and enter 1% of Part I, line 27b					
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			1,7	708
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			1,7	708
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c	- 1				
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7				0
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached [	8				52
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1,7	760
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶	11				
	t VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participates the state of the foundation attempt to influence any national, state, or local legislation or did it participates the state of the foundation attempt to influence any national, state, or local legislation or did it participates the state of the foundation attempt to influence any national, state, or local legislation or did it participates the state of the foundation attempt to influence any national, state, or local legislation or did it participates the state of the stat				Yes	No
	Intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instruction	ns for	i			
	definition)?		· [_	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publi	shed				
	or distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?			1c		X
đ	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 > \$		0			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		į.			
_	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
44	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	N/A	Х
5	If "Yes," has it filed a tax return on Form 990-T for this year?			-	N/A	
3	If "Yes," attach the statement required by General Instruction T.	• • • • •	… ⊨	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		-			
•	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 law remain in the governing instrument?		ŀ	6		v
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & F			7		X
	Enter the states to which the foundation reports or with which it is registered (see the instructions)	-αιι Υ/	<b>'</b>			
0 a	► NONE					ĺ
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	—				Ė
D			ŀ	, l	i	•
9	designate) of each state as required by General Instruction G? If "No," attach explanation		··	ВЬ		X
,	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," co	nmala	.		1	İ
				9		X
10	Part XIV		⊢	-		^
	and addresses			10		Х
JVA	<b>09 990PF4</b> TWF 33162 Copyright Forms (Software Only) – 2009 TW		Form <b>9</b>		DF (	

Form	990-PF (2009) DO UNTO OTHERS TRUST INC 65-0517915		Pa	ge 5
Par	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)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ▶N/A			
14	The books are in care of ▶See attachment #6 Telephone no. ▶			
	Located at ► ZIP+4 ►		-	
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 ▶   15			
Par	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🔀 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? [ Yes X 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)?			
	(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.)			
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 the instructions)?	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
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))			
а	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?			
_	If "Yes," list the years > 20 , 20 , 20 20			
D	Are there any years listed in 2a for which the foundation is <b>not</b> 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 the instructions.)	2b		X
U	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2-	▶ 20, 20, 20			
Jä	Did the foundation hold more than a 2% direct or indirect interest in any business			
h	enterprise at any time during the year?			
U				
	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4042(c)(7)) to dispose of heldings commissioner under section 4042(c)(7)) to dispose of heldings commissioner under section 4042(c)(7)) to dispose of heldings commissioner.			
	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	Ł	1	<b>:</b>

JVA

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?......

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

X

3b

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Par	t Vii-B Statements Regarding Act		Form 4720 May Be	Required (continued	<del>d)</del>				
5a	During the year did the foundation pay or inci-	ir 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 registr	ation drive?		Yes 🕅 I	No O	1			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								
	(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)? (see instructions)								
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or								
ь	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								
D						1,,			
	Regulations section 53.4945 or in a current no		•	•	5b	X			
	Organizations relying on a current notice rega			· · · · · · · · · •		Į			
C	If the answer is "Yes" to question 5a(4), does		-			1			
	because it maintained expenditure responsibil	lity for the grant?		N/A Yes I	No OF				
	If "Yes," attach the statement required by Reg	ulations section 53 494	5-5(d).			-			
6a	Did the foundation, during the year, receive a	ny funds, directly or inc	lirectly, to pay premiums			1			
	on a personal benefit contract?			Yes 🗓 I	vo l	1			
b	Did the foundation, during the year, pay prem				6b	x			
	If "Yes" to 6b, file Form 8870.	,,							
7a	At any time during the tax year, was the found	lation a narty to a nroh	hitad tay shalter transact	70 <b>0</b> 2	<b>.</b>				
	If yes, did the foundation receive any proceed					<b>₽</b>			
	t VIII Information About Officers,					<u> </u>			
: - (3)	and Contractors	Directors, Truste	es, roundation wa	inagers, nighty Pa	iid Empio	ees,			
			.1						
	List all officers, directors, trustees, foundate		T	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
	(a) Name and address	(b) Title, and avg. hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expense	-			
<del>-</del>		devoted to position	(ii not paid, enter -u-)	and deferred comp.	other alic	wances			
see	e attachment #7								
					1				
		Į.			1				
		į.							
2	Compensation of five highest-paid employ	ees (other than those	included on line 1 e	ee the Instructions)		<del></del>			
2	Compensation of five highest-paid employ If none, enter "NONE."	ees (other than those	included on line 1 s	ee the Instructions).					
2		T	Included on line 1 s	·					
		(b) Title, and avg.		(d) Contributions to	(e) Expense	account,			
	If none, enter "NONE."	(b) Title, and avg. hours per week	Included on line 1 s  (c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense other allo				
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg.		(d) Contributions to employee benefit					
(a	If none, enter "NONE."  Name and address of each employee paid	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					
(a	If none, enter "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and avg. hours per week		(d) Contributions to employee benefit plans and deferred					

	and Canta						
Part VIII	Informatio	n About	Officers, I	Directors,	Trustees,	Foundation	<b>Managers</b>
Form 990-PF	(2009) DC	UNTO	OTHERS	TRUST	INC 6	55-051791	.5

Total. Add lines 1 through 3 .....

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Form 990-PF (2009) DO UNTO OTHERS TRUST INC 65	-0517915	Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, F	oundation Managers, High	ly Paid Employees,
and Contractors (continued)		
3. Five highest-paid independent contractors for professional services (see	the Instructions). If none, enter "I	NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
See attachment #9		
Total number of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable netwiting divine the taylor and a relevant		
List the foundation's four largest direct charitable activities during the tax year. Include relevant s of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see the	instructions)	
Describe the two largest program-related investments made by the foundation du		Amount
1		
		· · · · · · · · · · · · · · · · · · ·
2		
All other program-related investments. See the instructions.		
3		

Form **990–PF** (2009)

Fa	Minimum Investment Heturn (All domestic foundations must complete this part. Foreign foundations must complete this part. Foreign foundations must complete this part.	dations,	
4	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	ГТ	
	purposes:		
а	Average monthly fair market value of securities.	1a	
ь	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets.	1 2 1	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		<del></del>
	the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Pa	T XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating	<u>.                                      </u>	
	foundations and certain foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
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.)	1	
C	Add lines 2a and 2b	2c	1,708
3	Distributable amount before adjustments. Subtract line 2c from line 1,	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		•
	line 1	7	0
Pa	Qualifying Distributions (see the 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	259,800
b	Program-related investments total from Part IX-B	1b	
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	Surtability 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	259,800
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 (see the instructions)	5	1,708
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	258,092
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	ne found	lation
	qualifies for the section 4940(e) reduction of tax in those years.		

Par	t XIII Undistributed Income (see	the instructions)	<del>,</del>		·
	`	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				0
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
					ļ
_	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005				
c	From 2006				
d	From 2007				
	From 2008				
	Total of lines 3a through e	0			
'		U			
4	Qualifying distributions for 2009 from Part XII,				
	line 4· ▶ \$ 259,800				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required see the instructions)				
c	Treated as distributions out of corpus				
•	(Election required see the instructions)				
	•				
	Applied to 2009 distributable amount				
е	Remaining amount distributed out of corpus,				
5	Excess distributions carryover applied to 2009	· · · · · · · · · · · · · · · · · · ·			
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income. Subtract				
b	•				
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b. Taxable				
	amount see the instructions				
е	Undistributed income for 2008. Subtract				
	line 4a from line 2a. Taxable amount				
	see the instructions				
T	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2010				
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2004				
•	not applied on line 5 or line 7 (see the				
_	instructions)				ļ
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
				1	
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DO UNTO OTHERS TRUST INC

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God Will Consideration Information			<del></del>	<del></del>
Part XV   Supplementary Information 3 Grants and Contributions Paid Dur	ing the Vear or Ar	noroyod f	or Futuro Payment	<del></del>
	If recipient is an individual,	Foundation		
Recipient	show any relationship to	status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
See attachment #10				
			1	
			Ì	
				}
				i
Total				259,800
b Approved for future payment				
		ļ		
			1	
Total				

Enter gross amounts unless otherwise indicated.  Unrelated business in the program service revenue:  a	<b>)</b>	Excluded b	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See the instructions.)
1 Program service revenue:  a b c d e f g Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments . 4 Dividends and interest from securities 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 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a b c d		Excl.		function income (See the
b c d e f g Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 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 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a b c d		code		instructions.)
b c d e f g Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities, 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 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a b c d				
c d e f g Fees & contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 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				
d e f g Fees & contracts from government agencies 2 Membership dues and assessments				
g Fees & contracts from government agencies  2 Membership dues and assessments				
g Fees & contracts from government agencies  2 Membership dues and assessments				
g Fees & contracts from government agencies  2 Membership dues and assessments				
2 Membership dues and assessments				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities				
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				
b Not debt-financed property				
6 Net rental income or (loss) from personal property				
7 Other investment income				
8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a  b  c  d				
9 Net income or (loss) from special events  10 Gross profit or (loss) from sales of inventory  11 Other revenue: a  b  c  d		<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory .  11 Other revenue: a  b  c  d				
11 Other revenue: a b c d				
b				
c d		ļ <u>.</u>		
d	-			··· ··
		<del>                                     </del>		
		<del>                                     </del>		
12 Subtotal Add columns (b), (d), and (e)	0	+ +	0	
13 Total. Add line 12, columns (b), (d), and (e)		IL		0
(See worksheet in line 13 instructions to verify calculations.)		•••••		
Part XVI-B Relationship of Activities to the Accomplishme	ent of Ex	xempt P	urnoses	
Line No. Explain below how each activity for which income is reported in				tantly to the
▼ accomplishment of the foundation's exempt purposes (other than accomplishment of the foundation's exempt purposes)				

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		Exempt Orga		ialisters to allu t	iiaiisact	ions an	u neialio	nompo wim	Hononand	abie	
1	Did t	he organization directly		age in any of the follow	ving with a	ny other o	rganization (	described in sec	tion	Yes	No
	501(	c) of the Code (other th	an section 501(c	)(3) organizations) or ir	n section 5	27, relating	to political	organizations?			
а	Tran	sfers from the reporting	foundation to a	noncharitable exempt	organizatio	n of:	-	_			
	(1)	Cash							1a(1)	]	x
		Other assets									X
b	Othe	r transactions:									
	(1)	Sales of assets to a no	ncharitable exem	pt organization					1b(1)	1	x
		Purchases of assets fro									X
•		Rental of facilities, equi									Х
		Reimbursement arrang									X
		Loans or loan guarante									X
		Performance of service									Х
c		ing of facilities, equipm									x
		answer to any of the a		•					<u> </u>	of the	
(a) L		ds, other assets, or serveral arrangement, sho  (b) Amount involved	ow in column (d)		s, other ass	ets, or ser	vices receiv	ed.			
	section	e foundation directly or on 501(c) of the Code ( es," complete the follow (a) Name of organiza	other than sectioning schedule.	•	on 527?			ions described i	Ye		] No
	linder	nenalties of nerury. I declar	e that I have evamin	ed the seture, including ac-	COMPONENTIAL STATE OF THE STATE	schodulos -		and to the best of	my knowlodgo a	ad balla	
s	6	penalties of perjury, I declar prect, and complete. Declar Elicia	M.	Clinian taxpayer or fiducing	ary) is based	on all inform	ation of which	Fre	knowledge.		., 13
G	▼ Sig	nature of officer or trus	tee		la :	Date	·	Titlé	<del></del> ,		
N	Paid			1	Date		Check if	. 🗆 l	eparer's identify		
н	Pre-	Propararia A	1.11		,	,	self-emp		mber (see <b>Sig</b> i e <u>ins</u> tructions)	ialure	: 1/1
E	par-	Preparer's signature	MI h	4	18/20	10	1	l me	1007 9	966	4
R	er's Use		6 HRB T	AX GROUP IN	<u></u>	7 / -	<del></del>	EIN ▶		106	<u> </u>
	Only	Firm's name (or your if self-employed),	$\frac{11001}{12858}$		LVD			Phone no.	<del></del>		
	y	address, and ZIP cod			33181			(305)891	-5711		
JVA	09	<b>990PF13</b> TWF 331	1101(111	orms (Software Only) - 200				(303/071	Form <b>990</b> -	PF /	2009

#### SCHEDULE OF OTHER INCOME

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 11 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** DO UNTO OTHERS TRUST INC 65-0517915 Revenue Net Investment Adjusted Description of Other Income and Expenses Income Net Income CAPITAL GAIN DIST 1,226 CAPITAL GAIN DIST 5,480

Totals

6,706

#### **SCHEDULE OF ACCOUNTING FEES**

Attachment C. mans 1								
Attachment 2: page 1 - 990-1	rr rage 1, P	art I, Line	ΤρΏ					
Inspection For calendar year 2009, or tax pe	erlod beainnina	. and	ending					
Name of Organization		, , , , , , , , , , , , , , , , , , , ,		entification Number				
DO UNTO OTHERS TRUST INC			65-0517					
Accounting Category	Amount	Net Investment Income	Adjusted	Disbursements for				
HR BLOCK	675							
HR BLOCK	675	Income 675	Net Income	Charity				
Total	675	675		<del></del>				
i viai [		0/3	<u> </u>					

#### **OTHER EXPENSES SCHEDULE**

Attachment 3: page 1 990-PF Page 1, Part I, Line 23

Open to Public For calendar year 2009, or tax period beginning Inspection

, and ending

lame of Organization OO UNTO OTHERS TRUST INC			65-05179	ntification Number 15
Description of Activity	Revenue and	Net Investment	Adjusted	Disbursements fo
	Expenses	Income	Net Income	Charity
CELL	126	126	126	
REPAIRS	1,124	1,124	1,124	
FILING FEE	61	61	61	
OFFICE SUPPLIES	177	177	177	
ADVISOR	25,242	25,242	25,242	
POSTAGE	43	43	43	
SUBSCRIPTIONS	364	364	364	
EDUCATION	67	67	67	
Total	27,204	27,204	27,204	

SCHEDULE OF OTHER INCREASES Attachment 5: page 1 - 990- PF Page 2, Part III, Line 3 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** 65-0517915 DO UNTO OTHERS TRUST INC Description of Increase **Total Amount** APPRECIATION 398,884

#### **BOOKS ARE IN CARE OF**

Attachme	ent_6 - 99	0-PF Page 5, 1	Part VII-A	, Line	14	
Open to Public	;	*				
Inspection	For calenda	r year 2009, or tax period i	peginning		, and ending	
Name of Organ	ilzation OTHERS TR	UST INC	<del></del>		1	Employer Identification Number 5-0517915
Part VII-A - Lin						
	<del></del>				-	
Individual Name	9			ALICIA	CELORIO	
or			-		<del>-</del>	
Business Name	:					
		<del> </del>				
Street Address				2746 SW	11 ST	
			<u>-</u>			
US Address:						
<b>-</b>	22125	<b>34</b> 5				
•	le <u>33135</u>	City Miar	n1	<del></del>	State	<u>FL</u>
or						
Foreign Addres	S					
City .		· · · · · · · · · · · · · · · · · · ·				
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_		<del>-</del> .	
Provinc	e or State	· · · · · · · · · · · · · · · · · · ·				
Country	<i>,</i>					
Postal o	ode					
						<del></del>
Phone I	Number					(305)643-0966
Fax Nui	mber					

## **CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

Attachment 7: page 1 - 99	0-PF Page 6,	Part VIII	<del></del>			
Open to Public						
Inspection For calendar year 2009, or t	ax period beginning	, and	ending	I =	•	
Name of Organization DO UNTO OTHERS TRUST INC				65-05179	tification Number 1 5	
(A) Name and Address	(B) Title and Average	(C) Compensation (If		(D) Cont. to Employee (E) Expense Acc		
( )	Hrs. per Week	not paid, enter 0)	1	ns & Def. Comp.	& Other Allowances	
2746 SW 11 ST	PRESIDENT					
Miami, FL 33135 ALICIA CELORIO 2746 SW 11 ST	PRESIDENT	0		0	0	
Miami, FL 33135		0		0	0	
			į			

### **COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES**

Attachment 8: page 1 990-PF Open to Public	Page 6, Part VI	II, Line I						
Inspection For calendar year 2009, or tax per	riod beginning	, and end	Ing					
Name of Organization			Employer Identifi	cation Number				
DO UNTO OTHERS TRUST INC			65-0517915					
Part VIII Compensation of the Five Higher (a) Name and address of each employee paid more	est Paid Employees Otl	her Than Office	rs, Directors, a	nd Trustees				
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position		(d) Contributions to empl. benefit plans & deferred compensation	i account and				
NONE	por visual to position		dererred compensation	Other allowances				
,		0	0	o				
			,					
		'						
		ĺ						
		-						

# COMPENSATION OF THE FIVE HIGHEST PAID INDEPENDENT CONTRACTORS FOR PROFESSIONAL SERVICES

	9: page 1 990-PF Page 6, Part VI		<u> </u>			
Open to Public	For calendar year 2009, or tax period beginning	and and	Una			
Inspection Name of Organiza		, and end		ttflcation Number		
	THERS TRUST INC	65-0517915				
Part VIII Con	npensation of the Five Highest Paid Independent C	Contractors for		Services		
	ddress of each independent contractor paid more than \$50,000	(b) Type	of service	(c) Compensation		
NONE						
,				0		
•						

#### **GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR**

Attachment 10: page 1 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2009, or tax period beginning , and ending

Name of Organization
DO UNTO OTHERS TRUST INC

Employer Identification Number 65-0517915

DO UNIO OTHERS TRUST INC			62-021	7915
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
AMERICARES	1	i		
88 HAMILTON AVE STAMFORD				
CT 06907				
STAMFORD CT 06907	1	l i		2,600
AMERICAN RED CROSS				
335 SW 27 AVE				
MIAMI FL 33135				20,000
ASCPA				
PO BOX 97288		}		
WASHINGTON DC 20077				2,000
CAMILLUS HOUSE				
PO BOX 11829				
MIAMI FL 33131				27,000
CLEVELAND ORCHESTRA				
200 S BISCAYNE BLVD				
MIAMI FL 33131		! !		2,000
HUMANE SOCIETY OF GREATER		]		
MIAMI				
16101 W DIXIE HWY				
N MIAMI BEACH FL 33160				1,700
KIWASIS OF LITTLE HAVANA				
1400 SW 1 ST				
MIAMI FL 33135				12,000
MIAMI CITY BALLET		i i		
2200 LIBERTY AVE				
MIAMI BEACH FL 33139				10,000
MIAMI RESCUE MISSION				
PO BOX 420620		ł !		
MIAMI FL 33242		ł f		5,000
NATIONAL WILDLIFE		†		
FEDERATION				
111000 WILDLIFE CENTER DR				
RESTON VA				
RESTON VA 20190				3,000
NEW WORLD SYMPHONY				
541 LINCOLN RD				
MIAMI BEACH FL 33139				1,000
USO		j [		
PO BOX 96860				
WASHINGTON DC 20077				3,500
ZOOLOGICAL SOCIETY OF				
FLORIDA				
12400 SW 152 ST				
MIAMI FL 33177	)			10,000
WPBT 2				
PO BOX 610002				
MIAMI FL 33261				2,000
SALVATION ARMY				,
		•		101,800

### **GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR**

Attachment 10: page 2 990-PF Page 11, Part XV Line 3a

Open to Pu

Inspection For calendar year 2009, or tax period beginning , and ending

Name of Organization

Employer Identification Number

DO UNTO OTHERS TRUST INC 65-0517915

DO UNTO OTHERS TRUST INC			65-051	65-051/915		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	- Contraction			
PO BOX 660607 MIAMI FL 33177 FREE WILL BAPTIST CHURCH 3600 WEST END AVE				1,000		
NASHVILLE TN 37205 EBENEZER CHURCH 410 SW 42 AVE				112,000		
MIAMI FL 33132 FLORIDA GRAND OPERA DORAL				20,000		
MIAMI FL ADRIEEN ARSHT CENTER BISCAYNE BLVD				1,000		
MIAMI FL HUMANE SOCEITY OF US 16300 BISCAYNE BLVD				1,000		
MIAMI FL 33181 LIGA CONTRA EL CANCER 12 AVE AND CORAL WAY				2,000		
MIAMI FL PARADISE MTN MINISTRIES PO BOX 635				20,000		
TOCCOA GA 30577				1,000		
				,		
				158,000		
				1 720,000		