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Extension granted to 8/15/10

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

OMB No 1545-0052

2009

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<br><b>THE QUINTON B. &amp; BEVERLY H. MCNEW FOUNDATION, INC.</b>                                        |  | A Employer identification number<br><b>65-0568022</b>                                                                                                                        |
|                                                                                                                                                                                                                                                   | Number and street (or P.O. box number if mail is not delivered to street address) Room/suite<br><b>5571 HALIFAX AVENUE</b> |  | B Telephone number<br><b>(239) 454-4999</b>                                                                                                                                  |
|                                                                                                                                                                                                                                                   | City or town, state, and ZIP code<br><b>FORT MYERS, FL 33912</b>                                                           |  | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                   |
|                                                                                                                                                                                                                                                   |                                                                                                                            |  | D 1. Foreign organizations, check here <input type="checkbox"/><br>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<br><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)<br>\$ <b>691,414.</b> (Part I, column (d) must be on cash basis)                                                                                                |                                                                                                                            |  | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                             |
| J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify)                                                                                                        |                                                                                                                            |  |                                                                                                                                                                              |

| Part I Analysis of Revenue and Expenses<br>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) |                                                                                    | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                            | 1 Contributions, gifts, grants, etc., received                                     | 97,260.                            |                           | N/A                     |                                                             |
|                                                                                                                                                    | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 3 Interest on savings and temporary cash investments                               | 9,902.                             | 9,902.                    |                         | STATEMENT 1                                                 |
|                                                                                                                                                    | 4 Dividends and interest from securities                                           | 10,287.                            | 10,287.                   |                         | STATEMENT 2                                                 |
|                                                                                                                                                    | 5a Gross rents                                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                    | b Net rental income or (loss)                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 6a Net gain or (loss) from sale of assets not on line 10                           | <53,087.>                          |                           |                         |                                                             |
|                                                                                                                                                    | b Gross sales price for all assets on line 6a                                      | 415,779.                           |                           |                         |                                                             |
|                                                                                                                                                    | 7 Capital gain net income (from Part IV, line 2)                                   |                                    | 0.                        |                         |                                                             |
|                                                                                                                                                    | 8 Net short-term capital gain                                                      |                                    |                           |                         |                                                             |
| Operating and Administrative Expenses                                                                                                              | 9 Income modifications                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 10a Gross sales less returns and allowances                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                    | b Less Cost of goods sold                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                    | c Gross profit or (loss)                                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 11 Other income                                                                    | 624.                               | 624.                      |                         | STATEMENT 3                                                 |
|                                                                                                                                                    | 12 Total. Add lines 1 through 11                                                   | 64,986.                            | 20,813.                   |                         |                                                             |
|                                                                                                                                                    | 13 Compensation of officers, directors, trustees, etc.                             | 58,269.                            | 23,308.                   |                         | 0.                                                          |
|                                                                                                                                                    | 14 Other employee salaries and wages                                               |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 15 Pension plans, employee benefits                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                    | 16a Legal fees                                                                     |                                    |                           |                         |                                                             |
| b Accounting fees                                                                                                                                  |                                                                                    |                                    |                           |                         |                                                             |
| c Other professional fees                                                                                                                          | STMT 4                                                                             | 3,224.                             | 3,224.                    |                         | 0.                                                          |
| 17 Interest                                                                                                                                        |                                                                                    |                                    |                           |                         |                                                             |
| 18 Taxes                                                                                                                                           | STMT 5                                                                             | 4,732.                             | 2,057.                    |                         | 0.                                                          |
| 19 Depreciation and depletion                                                                                                                      |                                                                                    | 279.                               | 0.                        |                         |                                                             |
| 20 Occupancy                                                                                                                                       |                                                                                    |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings                                                                                                               |                                                                                    |                                    |                           |                         |                                                             |
| 22 Printing and publications                                                                                                                       |                                                                                    |                                    |                           |                         |                                                             |
| 23 Other expenses                                                                                                                                  | STMT 6                                                                             | 3,504.                             | 42.                       |                         | 0.                                                          |
| 24 Total operating and administrative expenses. Add lines 13 through 23                                                                            |                                                                                    | 70,008.                            | 28,631.                   |                         | 0.                                                          |
| 25 Contributions, gifts, grants paid                                                                                                               |                                                                                    | 32,850.                            |                           |                         | 32,850.                                                     |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                           |                                                                                    | 102,858.                           | 28,631.                   |                         | 32,850.                                                     |
| 27 Subtract line 26 from line 12:                                                                                                                  |                                                                                    |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                |                                                                                    | <37,872.>                          |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                   |                                                                                    |                                    | 0.                        |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                     |                                                                                    |                                    |                           | N/A                     |                                                             |

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| <b>Part II Balance Sheets</b>                                                                            |                                                                                      | Attached schedules and amounts in the description column should be for end-of-year amounts only |                                                     |          |
|----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------|
|                                                                                                          |                                                                                      | Beginning of year<br>(a) Book Value                                                             | End of year<br>(b) Book Value (c) Fair Market Value |          |
| <b>Assets</b>                                                                                            | 1 Cash - non-interest-bearing                                                        |                                                                                                 |                                                     |          |
|                                                                                                          | 2 Savings and temporary cash investments                                             | 42,872.                                                                                         | 40,968.                                             | 40,968.  |
|                                                                                                          | 3 Accounts receivable ▶                                                              |                                                                                                 |                                                     |          |
|                                                                                                          | Less: allowance for doubtful accounts ▶                                              | 219.                                                                                            |                                                     |          |
|                                                                                                          | 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                                                      |                                                                                                 |                                                     |          |
|                                                                                                          | <b>Liabilities</b>                                                                   | 11 Investments - land, buildings, and equipment basis ▶                                         |                                                     |          |
| Less accumulated depreciation ▶                                                                          |                                                                                      |                                                                                                 |                                                     |          |
| 12 Investments - mortgage loans                                                                          |                                                                                      |                                                                                                 |                                                     |          |
| 13 Investments - other STMT 7                                                                            |                                                                                      | 673,180.                                                                                        | 637,781.                                            | 649,677. |
| 14 Land, buildings, and equipment: basis ▶ 4,573.                                                        |                                                                                      |                                                                                                 |                                                     |          |
| Less accumulated depreciation STMT 8 ▶ 4,573.                                                            |                                                                                      | 279.                                                                                            |                                                     |          |
| 15 Other assets (describe ▶ TAX DEPOSITS)                                                                |                                                                                      | 840.                                                                                            | 769.                                                | 769.     |
| 16 Total assets (to be completed by all filers)                                                          |                                                                                      | 717,390.                                                                                        | 679,518.                                            | 691,414. |
| 17 Accounts payable and accrued expenses                                                                 |                                                                                      |                                                                                                 |                                                     |          |
| 18 Grants payable                                                                                        |                                                                                      |                                                                                                 |                                                     |          |
| <b>Net Assets or Fund Balances</b>                                                                       | 19 Deferred revenue                                                                  |                                                                                                 |                                                     |          |
|                                                                                                          | 20 Loans from officers, directors, trustees, and other disqualified persons          |                                                                                                 |                                                     |          |
|                                                                                                          | 21 Mortgages and other notes payable                                                 |                                                                                                 |                                                     |          |
|                                                                                                          | 22 Other liabilities (describe ▶)                                                    |                                                                                                 |                                                     |          |
|                                                                                                          | 23 Total liabilities (add lines 17 through 22)                                       | 0.                                                                                              | 0.                                                  |          |
| <b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31</b> | 24 Unrestricted                                                                      |                                                                                                 |                                                     |          |
|                                                                                                          | 25 Temporarily restricted                                                            |                                                                                                 |                                                     |          |
|                                                                                                          | 26 Permanently restricted                                                            |                                                                                                 |                                                     |          |
|                                                                                                          | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 |                                                                                                 |                                                     |          |
|                                                                                                          | 27 Capital stock, trust principal, or current funds                                  | 0.                                                                                              | 0.                                                  |          |
|                                                                                                          | 28 Paid-in or capital surplus, or land, bldg., and equipment fund                    | 0.                                                                                              | 0.                                                  |          |
|                                                                                                          | 29 Retained earnings, accumulated income, endowment, or other funds                  | 717,390.                                                                                        | 679,518.                                            |          |
|                                                                                                          | 30 Total net assets or fund balances                                                 | 717,390.                                                                                        | 679,518.                                            |          |
| 31 Total liabilities and net assets/fund balances                                                        | 717,390.                                                                             | 679,518.                                                                                        |                                                     |          |

**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<br>(must agree with end-of-year figure reported on prior year's return) | 1 | 717,390.  |
| 2 Enter amount from Part I, line 27a                                                                                                                            | 2 | <37,872.> |
| 3 Other increases not included in line 2 (itemize) ▶                                                                                                            | 3 | 0.        |
| 4 Add lines 1, 2, and 3                                                                                                                                         | 4 | 679,518.  |
| 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 | 679,518.  |

**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<br>P - Purchase<br>D - Donation | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1a SEE ATTACHED SCHEDULE</b>                                                                                                    | <b>P</b>                                         | <b>VARIOUS</b>                       | <b>VARIOUS</b>                   |
| <b>b SEE ATTACHED SCHEDULE</b>                                                                                                     | <b>P</b>                                         | <b>VARIOUS</b>                       | <b>VARIOUS</b>                   |
| <b>c CAPITAL GAINS DIVIDENDS</b>                                                                                                   |                                                  |                                      |                                  |
| <b>d</b>                                                                                                                           |                                                  |                                      |                                  |
| <b>e</b>                                                                                                                           |                                                  |                                      |                                  |

| (e) Gross sales price | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |
|-----------------------|--------------------------------------------|-------------------------------------------------|----------------------------------------------|
| <b>a 240,442.</b>     |                                            | <b>240,334.</b>                                 | <b>108.</b>                                  |
| <b>b 175,310.</b>     |                                            | <b>228,532.</b>                                 | <b>&lt;53,222.&gt;</b>                       |
| <b>c 27.</b>          |                                            |                                                 | <b>27.</b>                                   |
| <b>d</b>              |                                            |                                                 |                                              |
| <b>e</b>              |                                            |                                                 |                                              |

| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                      |                                                 | (l) Gains (col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |
|---------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------|
| (i) F.M.V. as of 12/31/69                                                                   | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                                 |
| <b>a</b>                                                                                    |                                      |                                                 | <b>108.</b>                                                                                     |
| <b>b</b>                                                                                    |                                      |                                                 | <b>&lt;53,222.&gt;</b>                                                                          |
| <b>c</b>                                                                                    |                                      |                                                 | <b>27.</b>                                                                                      |
| <b>d</b>                                                                                    |                                      |                                                 |                                                                                                 |
| <b>e</b>                                                                                    |                                      |                                                 |                                                                                                 |

|                                                                                                                                                                                        |                                                                                                                 |          |                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------|------------------------|
| <b>2</b> Capital gain net income or (net capital loss)                                                                                                                                 | <div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div> | <b>2</b> | <b>&lt;53,087.&gt;</b> |
| <b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c).<br>If (loss), enter -0- in Part I, line 8 |                                                                                                                 | <b>3</b> | <b>N/A</b>             |

**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)<br>Base period years<br>Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|----------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2008                                                                 | 166,697.                                 | 686,496.                                     | .242823                                                     |
| 2007                                                                 | 143,666.                                 | 643,261.                                     | .223340                                                     |
| 2006                                                                 | 37,620.                                  | 579,546.                                     | .064913                                                     |
| 2005                                                                 | 53,050.                                  | 543,208.                                     | .097661                                                     |
| 2004                                                                 | 93,079.                                  | 523,778.                                     | .177707                                                     |

|                                                                                                                                                                                       |          |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------|
| <b>2</b> Total of line 1, column (d)                                                                                                                                                  | <b>2</b> | <b>.806444</b>  |
| <b>3</b> 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 | <b>3</b> | <b>.161289</b>  |
| <b>4</b> Enter the net value of noncharitable-use assets for 2009 from Part X, line 5                                                                                                 | <b>4</b> | <b>685,602.</b> |
| <b>5</b> Multiply line 4 by line 3                                                                                                                                                    | <b>5</b> | <b>110,580.</b> |
| <b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | <b>6</b> | <b>0.</b>       |
| <b>7</b> Add lines 5 and 6                                                                                                                                                            | <b>7</b> | <b>110,580.</b> |
| <b>8</b> Enter qualifying distributions from Part XII, line 4                                                                                                                         | <b>8</b> | <b>32,850.</b>  |

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.<br>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 type="checkbox"/> and enter 1% of Part I, line 27b                                                                                      |  | 1  | 0.   |
| 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  | 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:                                                                                                                                                                                                                    |  |    |      |
| a 2009 estimated tax payments and 2008 overpayment credited to 2009                                                                                                                                                                    |  | 6a | 769. |
| 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  | 769. |
| 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  |      |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                           |  | 10 | 769. |
| 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 769. Refunded <input type="checkbox"/>                                                                                                   |  | 11 | 0.   |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                          | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                  |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |     | X  |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                   |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.                                                                                                                   |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.                                                                                                                                                                    |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                           |     | X  |
| 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                                                                                                             |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                           |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                       |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                     |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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?     | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year?<br>If "Yes," complete Part II, col (c), and Part XV                                                                                                                                                                                                    | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> FL                                                                                                                                                                                                        |     |    |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation                                                                                                                            | X   |    |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                   |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                    | X   |    |

N/A

STMT 9

**THE QUINTON B. & BEVERLY H. MCNEW  
FOUNDATION, INC.**

65-0568022

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**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) | 11                                   |   | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?                                                                   | 12                                   |   | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ► <u>N/A</u>                                     | 13                                   | X |   |
| 14 | The books are in care of ► <u>RONALD E. INGE</u> Telephone no. ► <u>239-454-4999</u><br>Located at ► <u>5571 HALIFAX AVENUE, FORT MYERS, FL</u> ZIP+4 ► <u>33912</u>                    |                                      |   |   |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here<br>and enter the amount of tax-exempt interest received or accrued during the year  | <input type="checkbox"/><br>15   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)?<br>Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                                       | N/A                                                                 | 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 |
| 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?<br>If "Yes," list the years ► _____, _____, _____                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| 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.)                                                                                                                                                                                       | N/A                                                                 | 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.<br>► _____, _____, _____                                                                                                                                                                                                                                                                                                                                                       |                                                                     |    |
| 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.) | N/A                                                                 | 3b |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                |                                                                     | 4a |
| 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 |

Form 990-PF (2009)

**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)?

N/A

**5b**

Organizations relying on a current notice regarding disaster assistance check here

☒**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?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**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?**6b**☒

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?

N/A

**7b****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 |
|----------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| SEE STATEMENT 10     |                                                           | 58,269.                                   | 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 N/A                                                                                                                                                                                                                                                  |          |
|                                                                                                                                                                                                                                                        |          |
|                                                                                                                                                                                                                                                        |          |
| 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                                                                                                                 |        |
|                                                                                                                   |        |
|                                                                                                                   |        |
| All other program-related investments. See instructions.                                                          |        |
| 3                                                                                                                 |        |
|                                                                                                                   |        |
|                                                                                                                   |        |
| Total. Add lines 1 through 3                                                                                      | 0.     |

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

|          |                                                                                                             |           |          |
|----------|-------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |           |          |
| <b>a</b> | Average monthly fair market value of securities                                                             | <b>1a</b> | 653,283. |
| <b>b</b> | Average of monthly cash balances                                                                            | <b>1b</b> | 41,920.  |
| <b>c</b> | Fair market value of all other assets                                                                       | <b>1c</b> | 840.     |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c)                                                                       | <b>1d</b> | 696,043. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1e</b> | 0.       |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets                                                        | <b>2</b>  | 0.       |
| <b>3</b> | Subtract line 2 from line 1d                                                                                | <b>3</b>  | 696,043. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | <b>4</b>  | 10,441.  |
| <b>5</b> | <b>Net value of noncharitable-use assets</b> Subtract line 4 from line 3. Enter here and on Part V, line 4  | <b>5</b>  | 685,602. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5                                                        | <b>6</b>  | 34,280.  |

**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.)

|           |                                                                                                           |           |         |
|-----------|-----------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b>  | Minimum investment return from Part X, line 6                                                             | <b>1</b>  | 34,280. |
| <b>2a</b> | Tax on investment income for 2009 from Part VI, line 5                                                    | <b>2a</b> |         |
| <b>b</b>  | Income tax for 2009. (This does not include the tax from Part VI.)                                        | <b>2b</b> |         |
| <b>c</b>  | Add lines 2a and 2b                                                                                       | <b>2c</b> | 0.      |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1                                     | <b>3</b>  | 34,280. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions                                                 | <b>4</b>  | 0.      |
| <b>5</b>  | Add lines 3 and 4                                                                                         | <b>5</b>  | 34,280. |
| <b>6</b>  | Deduction from distributable amount (see instructions)                                                    | <b>6</b>  | 0.      |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>  | 34,280. |

**Part XII. Qualifying Distributions** (see instructions)

|          |                                                                                                                                   |           |         |
|----------|-----------------------------------------------------------------------------------------------------------------------------------|-----------|---------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                        |           |         |
| <b>a</b> | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26                                                     | <b>1a</b> | 32,850. |
| <b>b</b> | Program-related investments - total from Part IX-B                                                                                | <b>1b</b> | 0.      |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                         | <b>2</b>  |         |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:                                                              |           |         |
| <b>a</b> | Suitability test (prior IRS approval required)                                                                                    | <b>3a</b> |         |
| <b>b</b> | Cash distribution test (attach the required schedule)                                                                             | <b>3b</b> |         |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                 | <b>4</b>  | 32,850. |
| <b>5</b> | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | <b>5</b>  | 0.      |
| <b>6</b> | <b>Adjusted qualifying distributions</b> Subtract line 5 from line 4                                                              | <b>6</b>  | 32,850. |

**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)<br>Corpus | (b)<br>Years prior to 2008 | (c)<br>2008 | (d)<br>2009 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2009 from Part XI, line 7                                                                                                                       |               |                            |             | 34,280.     |
| <b>2</b> Undistributed income, if any, as of the end of 2009                                                                                                                      |               |                            |             |             |
| <b>a</b> Enter amount for 2008 only                                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Total for prior years:                                                                                                                                                   |               | 0.                         |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2009:                                                                                                                         |               |                            |             |             |
| <b>a</b> From 2004                                                                                                                                                                | 66,890.       |                            |             |             |
| <b>b</b> From 2005                                                                                                                                                                | 25,890.       |                            |             |             |
| <b>c</b> From 2006                                                                                                                                                                | 8,643.        |                            |             |             |
| <b>d</b> From 2007                                                                                                                                                                | 113,171.      |                            |             |             |
| <b>e</b> From 2008                                                                                                                                                                | 132,514.      |                            |             |             |
| <b>f</b> Total of lines 3a through e                                                                                                                                              | 347,108.      |                            |             |             |
| <b>4</b> Qualifying distributions for 2009 from Part XII, line 4: ► \$                                                                                                            | 32,850.       |                            |             |             |
| <b>a</b> Applied to 2008, but not more than line 2a                                                                                                                               |               |                            | 0.          |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions)                                                                                    |               | 0.                         |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions)                                                                                            | 0.            |                            |             |             |
| <b>d</b> Applied to 2009 distributable amount                                                                                                                                     |               |                            |             | 32,850.     |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                               | 0.            |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)                                        | 1,430.        |                            |             | 1,430.      |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                          | 345,678.      |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b                                                                                                         |               | 0.                         |             |             |
| <b>c</b> 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.                         |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions                                                                                                         |               | 0.                         |             |             |
| <b>e</b> Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.                                                                                |               |                            | 0.          |             |
| <b>f</b> Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010                                                              |               |                            |             | 0.          |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)                                                     | 0.            |                            |             |             |
| <b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7                                                                                                 | 65,460.       |                            |             |             |
| <b>9</b> Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a                                                                                               | 280,218.      |                            |             |             |
| <b>10</b> Analysis of line 9:                                                                                                                                                     |               |                            |             |             |
| <b>a</b> Excess from 2005                                                                                                                                                         | 25,890.       |                            |             |             |
| <b>b</b> Excess from 2006                                                                                                                                                         | 8,643.        |                            |             |             |
| <b>c</b> Excess from 2007                                                                                                                                                         | 113,171.      |                            |             |             |
| <b>d</b> Excess from 2008                                                                                                                                                         | 132,514.      |                            |             |             |
| <b>e</b> 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 |               |           |
| <b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed                     |          |          |          |          |               |           |
| <b>b</b> 85% of line 2a                                                                                                                                  |          |          |          |          |               |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed                                                                             |          |          |          |          |               |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities                                                           |          |          |          |          |               |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                   |          |          |          |          |               |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:                                                                                      |          |          |          |          |               |           |
| <b>a</b> "Assets" alternative test - enter:                                                                                                              |          |          |          |          |               |           |
| <b>(1)</b> Value of all assets                                                                                                                           |          |          |          |          |               |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                     |          |          |          |          |               |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                              |          |          |          |          |               |           |
| <b>c</b> "Support" alternative test - enter:                                                                                                             |          |          |          |          |               |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |          |          |          |          |               |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |          |          |          |          |               |           |
| <b>(3)</b> Largest amount of support from an exempt organization                                                                                         |          |          |          |          |               |           |
| <b>(4)</b> 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).)

**SEE STATEMENT 11**

- 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:

**ELIZABETH A MCNEW**  
**5571 HALIFAX AVE, FORT MYERS, FL 33912**

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

**APPLICATION PACKAGE FORWARDED WITH PRIOR RETURNS**

- c** Any submission deadlines:

**NONE**

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

**APPLICATION PACKAGE FORWARDED WITH PRIOR RETURNS**

**Part XV** **Supplementary Information** (continued)

| <b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b> |                                                                                                                    |                                      |                                     |                |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|----------------|
| Recipient                                                                             | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount         |
| Name and address (home or business)                                                   |                                                                                                                    |                                      |                                     |                |
| <b>a Paid during the year</b>                                                         |                                                                                                                    |                                      |                                     |                |
| <b>SEE STATEMENT 12</b>                                                               |                                                                                                                    |                                      |                                     |                |
| <b>Total</b>                                                                          |                                                                                                                    |                                      | <b>▶ 3a</b>                         | <b>32,850.</b> |
| <b>b Approved for future payment</b>                                                  |                                                                                                                    |                                      |                                     |                |
| <b>NONE</b>                                                                           |                                                                                                                    |                                      |                                     |                |
| <b>Total</b>                                                                          |                                                                                                                    |                                      | <b>▶ 3b</b>                         | <b>0.</b>      |



**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

|   |                                                                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                                             |     |    |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                           |     |    |
|   | (1) Cash                                                                                                                                                                                                                                                                                                                                                                                     |     | X  |
|   | (2) Other assets                                                                                                                                                                                                                                                                                                                                                                             |     | X  |
| b | Other transactions:                                                                                                                                                                                                                                                                                                                                                                          |     |    |
|   | (1) Sales of assets to a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                                   |     | X  |
|   | (2) Purchases of assets from a noncharitable exempt organization                                                                                                                                                                                                                                                                                                                             |     | X  |
|   | (3) Rental of facilities, equipment, or other assets                                                                                                                                                                                                                                                                                                                                         |     | X  |
|   | (4) Reimbursement arrangements                                                                                                                                                                                                                                                                                                                                                               |     | X  |
|   | (5) Loans or loan guarantees                                                                                                                                                                                                                                                                                                                                                                 |     | X  |
|   | (6) Performance of services or membership or fundraising solicitations                                                                                                                                                                                                                                                                                                                       |     | X  |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees                                                                                                                                                                                                                                                                                                             |     | X  |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |     |    |

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A                      |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

and complete compensation of preparer (other than taxpayer or individual) is based on all information of which preparer has any knowledge.

|           |                                                                                                                                                                                                                                              |  |                                                                                                                                                                                             |                                                                                                |  |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--|
| Sign Here | <br>Signature of officer or trustee                                                                                                                       |  | 05/19/10<br>Date                                                                                                                                                                            | <br>Title |  |
|           | Paid Preparer's Use Only<br>Preparer's signature: <br>Date: 5-12-10<br>Check if self-employed: <input type="checkbox"/><br>Preparer's identifying number: |  | Firm's name (or yours if self-employed), address, and ZIP code: GILBERT, WALLACE, STEWART, STRAMEL & SOWERS, PA<br>PO BOX 308, FORT MYERS, FL 33902-0308<br>EIN:<br>Phone no.: 239 334-1363 |                                                                                                |  |

Form **990-PF** (2009)

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2009**

Name of the organization

THE QUINTON B. & BEVERLY H. MCNEW  
FOUNDATION, INC.

Employer identification number

65-0568022

Organization type (check one).

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 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, charitable, 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).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization  
**THE QUINTON B. & BEVERLY H. MCNEW  
 FOUNDATION, INC.**

Employer identification number  
**65-0568022**

**Part I Contributors** (see instructions)

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                           | (c)<br>Aggregate contributions | (d)<br>Type of contribution                                                                                                                                                  |
|------------|-------------------------------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1          | BEVERLY H MCNEW<br>5571 HALIFAX AVE<br>FORT MYERS, FL 33912 | \$ 47,500.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 2          | MISCELLANEOUS                                               | \$ 2,260.                      | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
| 3          | QUINTON B MCNEW<br>5571 HALIFAX AVE<br>FORT MYERS, FL 33912 | \$ 47,500.                     | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |                                                             | \$                             | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
|            |                                                             | \$                             | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |
|            |                                                             | \$                             | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.)            |

2009 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

| Asset No | Description         | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | * Reduction In Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Current Year Deduction |
|----------|---------------------|---------------|--------|------|---------|--------------------------|------------|----------------------|------------------------|--------------------------|-----------------|------------------------|
| 1        | COMPUTER            | 0311104200    | DB     | 5.00 | 17      | 1,934.                   |            |                      | 1,934.                 | 1,907.                   |                 | 27.                    |
| 2        | OFFICE FURNITURE    | 1111704200    | DB     | 5.00 | 17      | 2,639.                   |            |                      | 2,639.                 | 2,387.                   |                 | 252.                   |
|          | * TOTAL 990-PF PG 1 |               |        |      |         | 4,573.                   |            | 0.                   | 4,573.                 | 4,294.                   | 0.              | 279.                   |
|          | DEPR                |               |        |      |         |                          |            |                      |                        |                          |                 |                        |

McNEW FOUNDATION  
GAIN/LOSS ON SECURITIES TRANSACTIONS  
2009

| SECURITY                                     | DATE<br>ACQ | DATE<br>SOLD | SALES<br>PRICE | COST<br>BASIS | GAIN/<br>LOSS |
|----------------------------------------------|-------------|--------------|----------------|---------------|---------------|
| <u>SHORT TERM CAPITAL ITEMS</u>              |             |              |                |               |               |
| 386 shares Alcoa                             | 9/24/2008   | 5/20/2009    | 3869 74        | 10005 73      | -6135 99      |
| 118 shares Apple Inc                         | various     | 6/11/2009    | 16678 77       | 13690 45      | 2988.32       |
| 686 shares Chico's FAS Inc                   | 12/1/2008   | 4/9/2009     | 5787 16        | 2085 8        | 3701 36       |
| 130 shares Cisco Systems Inc                 | 10/14/2008  | 9/30/2009    | 3069 69        | 2434 90       | 634.79        |
| 106 shares Devon Energy Corp                 | various     | 5/20/2009    | 8661 85        | 8788.51       | -2106 66      |
| 130 shares Devon Energy Corp                 | 7/7/2009    | 8/12/2009    | 8369 32        | 6554.60       | 1814 72       |
| Federal Home Loan Bank Bond                  | 11/14/2008  | 2/12/2009    | 50000 00       | 50070 00      | -70 00        |
| Federal Home Loan Bank Bond                  | 9/29/2008   | 1/15/2009    | 25000 00       | 25000 00      | 0 00          |
| 746 shares Flaherty & Crummne                | various     | 2/5/2009     | 5469 64        | 6054 94       | -585 30       |
| 6 shares Google Inc                          | 9/22/2008   | 6/15/2009    | 2521.79        | 2651 85       | -130 06       |
| 74 shares ishares IBOXX                      | various     | 9/22/2009    | 7837 58        | 6957 77       | 879 81        |
| 547 shares ishares Trust Barclays            | various     | 7/29/2009    | 56875 27       | 56407.44      | 467.83        |
| 86 shares John Hancock Preferred Income Fund | 10/1/2008   | 1/5/2009     | 1320 60        | 1034 63       | 285 97        |
| 85 shares John Hancock Preferred Income Fund | 10/1/2008   | 1/15/2009    | 1191 39        | 1022 60       | 168 79        |
| 50 shares Petro-Canada                       | 9/5/2008    | 3/24/2009    | 1398 64        | 1988.69       | -590 05       |
| 160 shares Royal Dutch                       | 8/12/2009   | 11/13/2009   | 9916 53        | 8441.24       | 1475 29       |
| 382 shares Select Sector SPDR-Financial      | various     | 2/23/2009    | 2926 11        | 8388 78       | -5462 67      |
| 502 shares SPDR KBW Reginal Banking          | various     | 9/16/2009    | 11009 03       | 10845 10      | 163 93        |
| 74 shares SPDR S&P 500 Trust                 | 6/12/2009   | 7/7/2009     | 6599 15        | 6979 68       | -380 53       |
| 268 shares US Bancorp                        | 2/23/2009   | 2/26/2009    | 3960 29        | 3025.81       | 934 38        |
| 422 shares US Bancorp                        | 3/5/2009    | 3/13/2009    | 6069 05        | 3962.58       | 2106 47       |
| 50 shares Vanguard Short Term Bond           | 2/5/2009    | 3/5/2009     | 3910 16        | 3962 76       | -52 60        |

TOTAL SHORT TERM 240441 76 240333 96 107.80

LONG TERM CAPITAL ITEMS

|                                  |            |            |          |          |           |
|----------------------------------|------------|------------|----------|----------|-----------|
| Alistate Life Global Notes       | 4/11/2007  | 5/29/2009  | 25000 00 | 24721 75 | 278 25    |
| American General Finance Notes   | 7/8/2005   | 7/14/2009  | 12937.50 | 25021 75 | -12084 25 |
| 346 shares Bank of America       | various    | 5/7/2009   | 4972.23  | 16995.46 | -12023 23 |
| 216 shares Bemis Co              | 5/29/2008  | 7/31/2009  | 5730 61  | 5815 09  | -84 48    |
| 112 shares Boeing Co             | 11/27/2009 | 7/9/2009   | 4394 82  | 10273 38 | -5878 56  |
| 418 shares Carmax Inc            | 8/7/2007   | 6/10/2009  | 5424 91  | 9986 10  | -4561 19  |
| 100 shares Corporate Executive   | 7/11/2007  | 8/12/2009  | 2489.22  | 6744 75  | -4255 53  |
| El DuPont Notes                  | 4/11/2007  | 9/23/2009  | 25500 75 | 24335 00 | 1165.75   |
| General Electric Capital Notes   | 6/14/2001  | 9/28/2009  | 26431 75 | 25115 00 | 1316 75   |
| 278 58 GNMA Mortgage Pool        | 11/14/2007 | 1/20/2009  | 278 58   | 270 83   | 7 75      |
| 285 15 GNMA Mortgage Pool        | 11/14/2007 | 2/20/2009  | 285.15   | 277.22   | 7 93      |
| 2229.55 GNMA Mortgage Pool       | 11/14/2007 | 3/20/2009  | 2229.55  | 2167 54  | 62 01     |
| 272 96 GNMA Mortgage Pool        | 11/14/2007 | 4/20/2009  | 272 96   | 265 37   | 7 59      |
| 1037.85 GNMA Mortgage Pool       | 11/14/2007 | 5/20/2009  | 1037 85  | 1008 99  | 28 86     |
| 267 11 GNMA Mortgage Pool        | 11/14/2007 | 6/22/2009  | 267 11   | 259 68   | 7 43      |
| 282 16 GNMA Mortgage Pool        | 11/14/2007 | 7/20/2009  | 282 16   | 274 31   | 7 85      |
| 270 88 GNMA Mortgage Pool        | 11/14/2007 | 8/20/2009  | 270 88   | 263 35   | 7 53      |
| 2625.48 GNMA Mortgage Pool       | 11/14/2007 | 9/21/2009  | 2625 48  | 2552 46  | 73.02     |
| 1879 14 GNMA Mortgage Pool       | 11/14/2007 | 10/20/2009 | 1879 14  | 1826 88  | 52 26     |
| 248 04 GNMA Mortgage Pool        | 11/14/2007 | 11/20/2009 | 248 04   | 241 14   | 6 90      |
| 263 61 GNMA Mortgage Pool        | 11/14/2007 | 12/21/2009 | 263 61   | 256 28   | 7 33      |
| 200 shares Jabil Circuit Inc     | 7/12/2007  | 8/10/2009  | 1895.95  | 4758 00  | -2862 05  |
| 200 shares Louisiana Pacific     | 7/12/2007  | 1/27/2009  | 407 19   | 3882 00  | -3474 81  |
| 300 shares Mylan Inc             | 7/11/2007  | 9/14/2009  | 4568.19  | 5301 00  | -732 81   |
| 58 shares Potash Corp            | 10/7/2008  | 10/21/2009 | 6014 46  | 5109 92  | 904 54    |
| 90 shares PPG Industries         | 5/29/2008  | 8/3/2009   | 5092 44  | 5716 64  | -624.20   |
| 750 shares Sanmina SCI Corp      | 7/11/2007  | 3/5/2009   | 155.24   | 2422 50  | -2267 26  |
| 135 shares Suntech Power         | 2/25/2008  | 4/30/2009  | 2101 98  | 5030.48  | -2928.50  |
| Target Corp Bond                 | 4/11/2007  | 6/15/2009  | 25000 00 | 25160.00 | -160 00   |
| 92 shares Texas Instruments      | 5/5/2008   | 7/29/2009  | 2213 46  | 2730 72  | -517 26   |
| 734 shares Time Warner Cable Inc | 7/12/2007  | 4/17/2009  | 21.34    | 45.05    | -23 71    |
| .667 shares Time Warner Inc      | 7/12/2007  | 3/27/2009  | 14 65    | 31 19    | -16 54    |
| 128 shares Vale SA               | 7/23/2008  | 8/3/2009   | 2852 14  | 3752 96  | -1100 82  |
| 150 shares Whole Foods Market    | 7/11/2007  | 3/18/2009  | 2350.71  | 5919.00  | -3568.29  |

TOTAL LONG TERM 175310 05 228531 79 -53221 74

415751 81 468865 75 -53113 94

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

| SOURCE                                         | AMOUNT |
|------------------------------------------------|--------|
| BANK OF AMERICA                                | 8.     |
| INVESTORS SECURITY TRUST                       | 9,364. |
| INVESTORS SECURITY TRUST                       | 530.   |
| TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A | 9,902. |

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE                           | GROSS AMOUNT | CAPITAL GAINS<br>DIVIDENDS | COLUMN (A)<br>AMOUNT |
|----------------------------------|--------------|----------------------------|----------------------|
| INVESTORS SECURITY TRUST         | 27.          | 27.                        | 0.                   |
| INVESTORS SECURITY TRUST         | 7,998.       | 0.                         | 7,998.               |
| INVESTORS SECURITY TRUST         | 982.         | 0.                         | 982.                 |
| INVESTORS SECURITY TRUST         | 1,307.       | 0.                         | 1,307.               |
| TOTAL TO FM 990-PF, PART I, LN 4 | 10,314.      | 27.                        | 10,287.              |

## FORM 990-PF OTHER INCOME STATEMENT 3

| DESCRIPTION                           | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
|---------------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| MISC                                  | 624.                        | 624.                              |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 624.                        | 624.                              |                               |

## FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| INVESTMENT MANAGEMENT FEES   | 3,224.                       | 3,224.                            |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16C | 3,224.                       | 3,224.                            |                               | 0.                            |

| FORM 990-PF                 | TAXES                        |                                   |                               | STATEMENT                     | 5  |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|----|
| DESCRIPTION                 | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |    |
| EMPLOYMENT TAXES            | 4,458.                       | 1,783.                            |                               |                               | 0. |
| FOREIGN TAXES PAID          | 203.                         | 203.                              |                               |                               | 0. |
| EXCISE TAXES                | 71.                          | 71.                               |                               |                               | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 4,732.                       | 2,057.                            |                               |                               | 0. |

| FORM 990-PF                           | OTHER EXPENSES               |                                   |                               | STATEMENT                     | 6  |
|---------------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|----|
| DESCRIPTION                           | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |    |
| OFFICE AND ADMINISTRATIVE<br>EXPENSES | 104.                         | 42.                               |                               |                               | 0. |
| PROGRAM SUPPLIES                      | 3,400.                       | 0.                                |                               |                               | 0. |
| TO FORM 990-PF, PG 1, LN 23           | 3,504.                       | 42.                               |                               |                               | 0. |

| FORM 990-PF                            | OTHER INVESTMENTS   |            | STATEMENT            | 7 |
|----------------------------------------|---------------------|------------|----------------------|---|
| DESCRIPTION                            | VALUATION<br>METHOD | BOOK VALUE | FAIR MARKET<br>VALUE |   |
| INVESTORS SECURITY TRUST NOMINEE       | COST                | 637,781.   | 649,677.             |   |
| TOTAL TO FORM 990-PF, PART II, LINE 13 |                     | 637,781.   | 649,677.             |   |

| FORM 990-PF                        | DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT |                             | STATEMENT  | 8  |
|------------------------------------|------------------------------------------------|-----------------------------|------------|----|
| DESCRIPTION                        | COST OR<br>OTHER BASIS                         | ACCUMULATED<br>DEPRECIATION | BOOK VALUE |    |
| COMPUTER                           | 1,934.                                         | 1,934.                      |            | 0. |
| OFFICE FURNITURE                   | 2,639.                                         | 2,639.                      |            | 0. |
| TOTAL TO FM 990-PF, PART II, LN 14 | 4,573.                                         | 4,573.                      |            | 0. |

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|             |                                  |           |   |
|-------------|----------------------------------|-----------|---|
| FORM 990-PF | LIST OF SUBSTANTIAL CONTRIBUTORS | STATEMENT | 9 |
|             | PART VII-A, LINE 10              |           |   |

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| NAME OF CONTRIBUTOR       | ADDRESS                                     |
|---------------------------|---------------------------------------------|
| QUINTON AND BEVERLY MCNEW | 5571 HALIFAX AVENUE<br>FORT MYERS, FL 33912 |

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|             |                                                                             |           |    |
|-------------|-----------------------------------------------------------------------------|-----------|----|
| FORM 990-PF | PART VIII - LIST OF OFFICERS, DIRECTORS<br>TRUSTEES AND FOUNDATION MANAGERS | STATEMENT | 10 |
|-------------|-----------------------------------------------------------------------------|-----------|----|

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| NAME AND ADDRESS                                                   | TITLE AND<br>AVRG HRS/WK   | COMPEN-<br>SATION | EMPLOYEE<br>BEN PLAN CONTRIB | EXPENSE<br>ACCOUNT |
|--------------------------------------------------------------------|----------------------------|-------------------|------------------------------|--------------------|
| QUINTON B. MCNEW<br>5571 HALIFAX AVENUE<br>FORT MYERS, FL 33912    | DIR/TREASURER<br>0.00      | 0.                | 0.                           | 0.                 |
| BEVERLY H. MCNEW<br>5571 HALIFAX AVENUE<br>FORT MYERS, FL 33912    | DIR/SECRETARY<br>0.00      | 0.                | 0.                           | 0.                 |
| RONALD E. INGE<br>5571 HALIFAX AVENUE<br>FORT MYERS, FL 33912      | DIRECTOR<br>0.00           | 0.                | 0.                           | 0.                 |
| DORIS SWOR<br>16621 BOBCAT COURT SW<br>FORT MYERS, FL 33912        | DIRECTOR<br>0.00           | 0.                | 0.                           | 0.                 |
| PAULA EDENFIELD<br>3350 NORTH KEY DR A-804<br>N FT MYERS, FL 33903 | DIRECTOR<br>0.00           | 0.                | 0.                           | 0.                 |
| JOHN A. NOLAND<br>PO BOX 280<br>FORT MYERS, FL 33902               | DIRECTOR<br>0.00           | 0.                | 0.                           | 0.                 |
| ELIZABETH A. MCNEW<br>5571 HALIFAX AVENUE<br>FORT MYERS, FL 33912  | DIRECTOR/EXEC DIR<br>40.00 | 58,269.           | 0.                           | 0.                 |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII                       |                            | 58,269.           | 0.                           | 0.                 |

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 11

## NAME OF MANAGER

QUINTON B. MCNEW  
BEVERLY H. MCNEW

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 12

| RECIPIENT NAME AND ADDRESS                | RECIPIENT RELATIONSHIP<br>AND PURPOSE OF GRANT | RECIPIENT<br>STATUS | AMOUNT |
|-------------------------------------------|------------------------------------------------|---------------------|--------|
| SOUP KITCHEN                              | HOMELESS AND DISPLACED<br>CHILDREN             |                     | 2,000. |
| AGAPE MINISTRIES                          | CHRISTIAN EDUCATION                            |                     | 1,000. |
| LEE MEMORIAL HEALTH SYSTEMS<br>FOUNDATION | RESEARCH OF CHILDHOOD<br>DISEASES              |                     | 2,000. |
| COMMUNITY COPPERATIVE MINISTRIES          | HOMELESS AND DISPLACED                         |                     | 2,000. |
| YOUNG LIFE                                | CHRISTIAN EDUCATION                            |                     | 1,000. |
| CALEB'S CRUSADE                           | RESEARCH OF CHILDHOOD<br>DISEASES              |                     | 500.   |

EVANGELICAL CHRISTIAN SCHOOL

CHRISTIAN EDUCATION

500.

FIRST CHOICE PREGNANCY CENTER

PROVIDE NEEDS FOR  
CHRISTIAN MATERNITY  
HOME FOR TEENA

2,500.

MAKE A WISH FOUNDATION

PROVIDE NEEDS OF  
TERMINALLY ILL  
CHILDREN

500.

GABRIEL HOUSE

HOMELESS AND DISPLACED

3,000.

INTERVARSITY

PROVIDE CARE AND  
SUPPORT

1,000.

EASTER SEALS

RESEARCH OF CHILDHOOD  
DISEASES

1,100.

LIFELINE FAMILY CENTER

PROVIDE NEEDS OF THE  
HOMELESS AND DISPLACED

2,500.

AUTISM FUND

RESEARCH OF CHILDHOOD  
DISEASES

500.

NAPLES SHELTER

HOMELESS AND DISPLACED  
CHILDREN

750.

CYPRESS LAKE PRESBYTERIAN FOOD  
BANKPROVIDE NEEDS OF  
HOMELESS & DISPLACED  
CHILDREN

1,500.

CHILD EVANGELISM FELLOWSHIP

CHRISTIAN EDUCATION

500.

SUMMIT CHRISTIAN SCHOOL

PROVIDE CHRISTIAN  
EDUCATION

1,000.

SW FLORIDA OUTREACH

PROVIDE NEEDS OF THE  
HOMELESS AND DISPLACED

4,000.

GUADALUPE CENTER

PROVIDE NEEDS FOR  
HOMELESS, DISPLACED  
CHILDREN

1,500.

HARRY CHAPIN FOOD BANK

PROVIDE NEEDS OF  
HOMELESS, DISPLACED  
CHILDREN

2,000.

CAFE OF LIFE

HOMELESS AND DISPLACED

500.

NATIONS ASSOCIATION

PROVIDE NEEDS OF  
HOMELESS & DISPLACED  
CHILDREN

1,000.

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

32,850.

**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check 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 have already been granted an automatic 3-month extension on a previously filed Form 8868****Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for *Charities & Nonprofits*.

|                                                                                     |                                                                                                                        |                                                     |
|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Type or print<br><br>File by the due date for filing your return. See instructions. | Name of Exempt Organization<br><b>THE QUINTON B. &amp; BEVERLY H. MCNEW FOUNDATION, INC.</b>                           | Employer identification number<br><b>65-0568022</b> |
|                                                                                     | Number, street, and room or suite no. If a P O box, see instructions<br><b>5571 HALIFAX AVENUE</b>                     |                                                     |
|                                                                                     | City, town or post office, state, and ZIP code. For a foreign address, see instructions<br><b>FORT MYERS, FL 33912</b> |                                                     |

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

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

**RONALD E. INGE**

- The books are in the care of ►
- 5571 HALIFAX AVENUE, FORT MYERS, FL - 33912**

Telephone No ► **239-454-4999**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 will cover

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for ☒ calendar year **2009** or ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

|                                                                                                                                                                                                                               |           |    |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|-------------|
| <b>3a</b> 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.                                                                    | <b>3a</b> | \$ | <b>0.</b>   |
| <b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.                                               | <b>3b</b> | \$ | <b>769.</b> |
| <b>c Balance Due.</b> Subtract line 3b from line 3a. 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. | <b>3c</b> | \$ | <b>0.</b>   |

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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

Form **8868** (Rev. 4-2009)