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Form 990-PF

Return of Private Foundation

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

20091

OMB No. 1545-0052

2009

			he Treasury e Service	N	tote. The fou	ndation may l	ne abla to	use a copy of this			rting requirements.	2003	
For calendar year 2009, or tax year beginning									, and e				
_	G Check all that apply: Initial return						initial return of a fe	otwer bapye	charity	Final return			
_	Amended return					{	Address chan	ge		Name change			
U	se th	e IRS	Name of founda								A Employer identification number		
	lab		1				LTAB	LE TRUST	ı		65-6004239		
O.		wite, int	C/O FALO				livered to	(reet address)		Room/suita	B Telephone number		
	or ty	rpe.	3940 PR	-				,		102	239-649-66	33	
		pecific	City or town, sta			· -					C if exemption application is p		
in	iruc	tions.	NAPLES.	FI	ւ <u>341</u>	04					D 1. Foreign organizations	, check here	
H			e of organization:					rate foundation			Foreign organizations me check here and attach co	eting the 85% test, mputation	
L								able private found:			E If private foundation state	us was terminated	
			t value of all asset		end of year		-		X Acc	rual	under section 50/(b)(1)		
	iron ►\$		l II, col. (c), line 1	10) Rウロ	5 019.	(Part I. colu	her (sper mn (d) n	ust be on cash .	basis.)		F If the foundation is in a (under section 507(b)(1)		
			nalysis of Revent he total of amounts in cessarily equal the e				(a)	Revenue and enses per books	(b) Net is	ivesiment ome	(c) Adjusted net	(d) Disbursaments for charitable purposes	
	\neg		ntributions, gitts,				- 5,4.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• : •	5 1 A 1	N/A	(cesh basis only)	
		2 Chi	eck 🗪 🗶 Hibs for	ofiber	a is not required to			و در وی و در از در در	210 110 1	7, 7	1 / 25 / Fair 1 / 1 / 1 / 1	3.1. 7	
		3 Inte	rest on eavings and in investments	temp	orary							N 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
			dends and intere					20,360.	2	0,360.		STATEMENT 1	
	- [1	5a Gr	oss rents	.					·			1 : 55 5 1 1 1 1	
			rental income or (los				1,34	20 500		- 1, 1, et ,	1	the state of the same	
:	<u> </u>	Ba Nai Gro	gain or (loss) from a as sales price for all els on line 6a	ale of	austin not on i	ine 10		-30,592.		- t	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	. Ş	D 433 7 Cel	ets on line 6a pital gain net income		Part IV line 2)	, 104.				<u> </u>	5 10 hash 121g.		
å			t short-term capit				1		. 73. 1	13,35,35	 	120 C 102 C 1	
*		a Inc	ome modification	ıs				17 17 17) S 22 15	, ; ;		1 19 5 12	
₹	10	Oa and	es sales less jeturns l'allowances				, ,,	18.18.57.67	25	<u> </u>	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	1 2 2 2 1	
0			a; Coat of goods sol				-,		44.44"	1 0 1 1 1 X	111111111111		
7	1.		ese profit or (loss				<u> </u>			, ,,	- SIATU	TE UNIT	
			er Income fal, Add lines 1 th				 	-10,232.		0,360.	Phic	# 10 mm	
-	_		ripensation of officer					0.		0.	41 11	F 3040 0.	
	1		er employee sala								JUL	र देवीत	
- .	11		nsion plans, empl								Tair		
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₹ }	<u> </u>	b Ac	counting fees		FOR	WFD	$\vdash +$					DL14	
- u			ner professional fe erest	H	the lates		8		 -				
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) j	20		cupancy Li			1.17							
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į	22		uling and publica	tions	عصير		<u> </u>						
1	2:	-	er expenses						-				
	2		tal operating and penses. Add lines				j	0.		0.		0.	
δ	2		ntributions, gifts,			************	·	31,000.	•	· · · · · ·		31,000.	
			al expenses and					_					
_	_		d lines 24 and 25					31,000.		0.		31,000.	
	2		btract line 26 from			i	l	44 000					
		-	ass of revenue over	•				<u>-41,232.</u>	-	0,360.	11 7 1 2 1 2 7 5		
			t investment inco justed net incom:				1 1 2	111-13-1 101-13	· 12-7. N.S.		N/A	N. 857 N. 7 54	

02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

5 Mar mar

Form 990-PF (2009)

Fo	rm 99	O-PF (2009) C/O FALCON CAPITAL					
Г	art	Balance Sheets Attribute sade amounts in the description columns should be for each entry account only	Beginning of year	End o			
-	Lai C		(a) Book Value	(b) Book Value	(c) Fair Market		
	1		132,345.	366,869.	366	<u>,869.</u>	
		Savings and lemporary cash investments	. 1 50.1				
	3	Accounts receivable	Ale a Maria	1. 15 17 18 18 18 18 18 18 18 18 18 18 18 18 18			
		Less: allowance for doubtful accounts	a jassaja rajoj i s	ATT A A STORE TO THE ATT A TOTAL OF	33 553	77.77	
	4	Pledges receivable >		The second of the second	17. 15.75	; .	
•	_	Less: allowance for doubtful accounts					
	6	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	١_	disqualified persons	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	the product of the			
	1	Other notes and leaves receivable	1 14 11 1				
	١.	Less: allowance for doubtful accounts					
Assets		Inventories for sale or use					
3	8	Prepald expenses and deferred charges	275,756.	0.		0.	
-			458,150.	458,150.	458	,150.	
		Investments - corporate stock STMT 3	430,1308	430,130.	430	, 1001	
		investments - corporate bonds		· · · · · · · · · · · · · · · · · · ·	, , , , ,	`	
	''	less; accumple ed depreciation	''	·	•		
	40	Investments - mortgage toans					
							
	13	Investments - other	2-1-1-1		N 1 .	· ', '	
	14	Less accomplised depiscuston	, , ,	Va.	•	1	
	1.5	Other assets (describe		····································			
	113	Outer assers (restribe					
	18	Total assets (to be completed by all filers)	866,251.	825,019.	825	019.	
		Accounts payable and accrued expenses			, ,-		
		Grants payable			Santa Company	, , , , ,	
w		Deferred revenue			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
÷		Loans from officers, directors, trustees, and other disqualified persons				5 da	
Liabilities		Mortgages and other notes payable			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Ë		Other liabilities (describe >)			1 - 2 - 1 - 1 - 1 - 1 - 1		
						- 312 - 1	
	23	Total Habilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
	l	and complete lines 24 through 26 and lines 30 and 31.			1 1	٠.,	
¥	24	· · · · · · · · · · · · · · · · · · ·				, ,	
Balances	25	Temporarily restricted				324 B	
8	28	Permanently restricted			") () ()	·	
P	İ	Foundations that do not follow SFAS 117, check here					
or Fu		and complete lines 27 through 31.					
δ.	27	Capital stock, trust principal, or current funds	0.	0.			
Ş	28	Pald-in or capital surplus, or land, bidg., and equipment fund	0.	0.			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	866,251.	825,019.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
₹	30	Total net assets or fund balances	866,251.	<u>825,019.</u>	(
_	31	Total liabilities and not assets/fund balances	866,251.	825,019.	<u> </u>		
F	art	III Analysis of Changes in Net Assets or Fund B	alances				
1		net assets or fund balances at beginning of year - Part II, column (a), line		1	056	251	
_	(must agree with end-of-year figure reported on prior year's return)					<u>,251.</u> ,232.	
2 Enter amount from Part I, line 27a					-41		
				3	925	$\frac{0.}{019.}$	
4	Add	lines 1, 2, and 3			845	0.	
5	nect	eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	okuma (h.) Iliaa 20	5	825	,019	
5	lota	i nei asseis of tunu darances at end of year (ima 4 minus line a) - Part II, C	DICTUIT (O.V. INTR. 20. **********************************	10	Form 990-F		

AMAZA FOUNDATION CHARITABLE TRUST C/O FALCON_CAPITAL

Form 990-PF (2009) C/O Part IV Capital Gains a	FALCON O		mont Inco	me			·	6	<u>5-600</u>	4239	Page 3
(a) List and descri	be the kind(s) of	property sold (a.g., real e	state.	ine	(b)	How ac - Purcl - Dona	quired	(c) Date	acquired	(d) Da	ta sold
	ehouse; or comm	on stock, 200 shs. MLC	Co.)		Ď	- Dona	tion	(mo., c	ay, yr.)	(mó., d	
18 VICTORY FUND		·- -			}—					VARI	ous_
<u>b</u>					-		 -				
<u>c</u>					1						
t					1						
(e) Gross sales price	(f) Depreciat (or allo		(g) Cost or oth plus expense						aln or (toss s (1) minus (
245,164.			2′	75,75	6.					-30	,592.
ь											
_C											
<u>d</u>											
Complete only for assets showing	nain in cohima (h) and owned by the four	rdation on 12/	31/60			///	Galan (C	ol (h) esia	mlaue	
(i) F.M.V. as of 12/31/69	(j) Adjust as of 12	ed basis	(k) Excess of over col. ()),	col (i)			col.	(k), but Losses	col. (h) gain not less tha (from col. (1 -0-) or h))	
1			·							-30	,592.
b	•										7.00.0.
C											
d											
<u>e</u>											
2 Capital gain net income or (net cap	ital loss) {	II gain, also enter in Part If (loss), enter -0- in Part	1, fine 7 11, line 7		.}	2				-30	,592.
3 Net short-term capital gain or (loss) as defined in se	ctions 1222(5) and (6):									
if gain, also enter in Part i, line 8, o	olumn (c).				}						
If (loss), enter -0- in Part 1, line 8 Part V Qualification Ur	der Section	4940/a) for Red	ICAN TOY	on Not	LIDY	3 (Act 17	ent Inc	-ma	N/A		
(For optional use by domestic private							ient me	JIIIO			
(For optional use by domestic private	iounuauons scop	et to me section 4940(4)	EGY ON HEL MA	estinent ii	IICUIIIC	G.)					
If section 4940(d)(2) applies, leave th	s part blank.										
Was the foundation liable for the secti	ол 4942 tax on th	e distributable amount of	any year in th	e base pe	riod?					Yes	X No
If "Yes," the foundation does not quali	y under section 4	940(a). Do not complete	this part.								
1 Enter the appropriate amount in ea	ach column for ea	ch year; see Instructions	before making	any enti	es.					 _	
Base period years Calandar year (or tax year beginnin	a io) Adhus	(b) ted qualifying distribution	ns Net v	alue of no	(c) nchai		use assets		Distrib	(d) utlon ratio ided by col.	(6))
2008	3 (11)	123,4					9,278		toor to) an		45346
2007		140,7					6,771				42650
2008		92,5			1		8,240				89093
2005		89,4			1	,09	1,119	•			81970
2004		159,9	36.		1	.22	7,520	•		1	30292
										_	
2 Total of line 1, column (d)								2		. 5	<u>89351</u>
3 Average distribution ratio for the 5										4	1 7 0 7 0
the foundation has been in existen-	ce it iess than 5 ye	ars				••••••	·····	3		<u>+</u> _+	<u>17870</u>
4 Enter the net value of noncharitable	a-use assets for 2	009 from Part X, line 5		······································			•••••••••••••••••••••••••••••••••••••••	4		832	.949.
5 Multiply line 4 by line 3					5		98	,180.			
8 Enter 1% of net investment income			•					1			204.
								7		9.R	,384.
											,000.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI Instructions.								_8_	L	31	, 000 .
									£.	orm 990-1	DE /2000
923521 02-02-10									r	"III 6907I	15002)

AMAZA FOUNDATION CHARITABLE TRUST Form 990-PF (2009) C/O FALCON CAPITAL Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) ta Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination latter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here
and enter 1% of Part I, line 27b e 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-) 9 Add lines 1 and 2 0. 4 Subutle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 407 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 500. 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 10 Overpayment, if line 7 is more than the total of lines 5 and 8, enter the amount overpaid 0. 1 Enter the amount of line 10 to be: Credited to 2010 estimated tax Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No Х 18 any political campaign? X 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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. c Dld the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0. (2) On foundation managers. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4b 6 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes." attach the statement required by General instruction T. 8 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year?

Form 990-PF (2009)

8b

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If "Yes." complete Part II, col. (c), and Part XV.

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

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)

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

of each state as required by General Instruction G? If "No," attach explanation

10 Did any persons become substantial contributors during the lax year? If Year attach a schedule fisting their names and addresses

	AMAZA FOUNDATION CHARITABLE TRUST			
	1990-PF (2009) <u>C/O FALCON CAPITAL</u> 65-60	04239	<u> </u>	Page 5
Pa	art 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		Γ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	j.,	_X_
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12	ł	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			X
	Website address NONE			
14	The books are in care of ▶ CHAD OTT Telephone no. ▶239-	403-7	335	
	Located at ≥ 555 ADMIRALITY PARADE WEST, NAPLES, FL ZIP+4 ≥			
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	Ŋ	I/A	
Pa	art 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
la	During the year did the foundation (either directly or indirectly);	4 -		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		100	· ·
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		-	
	a disqualified person?		[
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	. "	1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1.		1
	(5) Transfer any income or assets to a disquaiified person (or make any of either available	• •	10.	
	for the benefit or use of a disqualified person)?	. ():		l
	(6) Agree to pay money or property to a government official? (Exception, Check "No"		1	. :
	if the foundation agreed to make a grant to or to employ the official for a period after	2.5		-
	termination of government service, if terminating within 90 days.)	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		14, 1.,
	of It any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١ .		1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		' '	i '
	Organizations relying on a current notice regarding disaster assistance check here	7	1	
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	L	11.	1
·	before the first day of the tax year beginning in 2009?	10	'	x
•	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	··· ''	 	1
-			\ ·	1
	defined in section 4942(j)(3) or 4942(j)(5)): LAt the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning] ;; '
a			1	
	before 2009? Yes X No			
	If "Yes," list the years >,			
0	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, ensiver "No" and attach	1	1	1 - 1
	statement - see instructions.) N/A	<u>2b</u>	 	
C	if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	'		
_	<u> </u>	1] . `'
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1:	
	during the year?	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	'	:
Ь	H'Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after	1 :	,	
	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	1 :	.) 	٠,٠
	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.)	3b	 	<u></u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	, ,	' '	3 ~,
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	46		X
		Form 990)-PF ((2009)

Form 990-PF (2009) C/O FALCON CAPITAL			<u>65-60042</u>	339	Page 6
Part VII-B Statements Regarding Activities for Which I	form 4720 May Be F	Required (contin	ved)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(8))?	Y	s X No		
(2) influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or Indire	ectly,		غ الله	
any voter registration drive?		Y	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	s X No		제
(4) Provide a grant to an organization other than a charitable, etc., organization			i	\	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	a X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational ourooses, or f	OF			
the prevention of cruetty to children or animals?			s X No	`:- ` '-	, }
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ier the excentions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru				5b	1
Organizations relying on a current notice regarding disaster assistance check h	ATA	***************************************	····· > (,
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned			
expenditure responsibility for the grant?	N	/A [] v		1 - 5	``\
If "Yes," attach the statement required by Regulations section 53.4945		./ ۸۸ ۱۱		1	1
			•	1	, · ·
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	□ v.	ا مالکام		
a personal benefit contract?		۱۱ لـــا ۱۱	ו מאובטו	6b	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denent contract?			00	 ^
If "Yes" to 6b, file Form 8870.	L. U A A AI O	۳.	. [2]		1, 11
7a At any time during the tax year, was the foundation a party to a prohibited tax s	neiter transaction?	L YO	3 LAI NO	76	1
b If yes, did the foundation receive any proceeds or have any net income attribute				7b	
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, roundation Ma	nagers, migni	,		
List all officers, directors, trustees, foundation managers and their					
1 Eist all difficers, directors, rustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) F	ynenge
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and defened compensation	accou	xpense int, other wances
LUCILLE W. DRACKETT	TRUSTEE/DIREC	TOR		ł	
555 ADMIRALITY PARADE WEST					
NAPLES, FL 34102	0.00	0.	0.	<u> </u>	0.
•]	
	11]	
				i	
				ļ	
	•			,	
				1	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	•		
2 hh	(b) Title, and average	4.3 Company	(d) Contribudons to employee benefit plans	(e) E	xoense
(a) Name and address of each employee pald more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred compensation		int, other wances
N/A				<u> </u>	
M/ M	0.00	0.	o.		0.
		į			
			 	 	
		}			
	<u> </u>	-	 	 	
		l		1	
	L	l		<u>. </u>	0
Total number of other employees paid over \$50,000				000-P	F (2009)
			n to in	320-6	120031

Form 990-PF (2009) C/O FALCON CAPITAL 6	55-60042	239 Page 7
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	e	(c) Compensation
N/A		
	1	0.
	. 1	
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
1N/A	-	
2		
3		
4		
D. LAV. P. L.		
Part IX-B Summary of Program-Related Investments		A
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	ŀ	
Total, Add lines 1 through 3	>	0,
	Form	990-PF (2009)

70	m 990-Pr (2009) C/O FALCON CAPITAL	65-6004239	Page 8
F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	[.; : <u>.</u>]	
٠,	Average monthly fair market value of securities	1 - 1	028.
	Average of monthly cash balances	1h 249	606.
	Fair market value of all other assets	10	<u> </u>
4	Total (add lines 1a, b, and c)		634.
	Reduction claimed for blockage or other factors reported on lines 1a and		
•	1c (attach detailed explanation) 1e 0.	··	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from fine 1d		634.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 12	685.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		949.
6	Minimum investment return. Enter 5% of line 5		647.
_	Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations ar		
=	foreign organizations check here and do not complete this part.)	1 41.	647.
1	Minimum investment return from Part X, line 6	1 41	04/.
26		{ . · }	
þ	Income tax for 2009. (This does not include the tax from Part VI.)		407
0		2c 4.1	407.
3	Distributable amount before adjustments. Subtract line 2c from line 1	$\begin{bmatrix} 3 & 41 \\ 4 & \end{bmatrix}$	0.
4	Recoveries of amounts treated as qualifying distributions		240.
5	Add lines 3 and 4		240.
8	Deduction from distributable amount (see instructions)	6 41	240.
7_	Dietributeble amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 41.	440.
P	art XII Qualifying Distributions (see instructions)	_	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	ta 31,	000.
b	Program-related investments - total from Part IX-B	10	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
1	Sullability test (prior IRS approval required)	3a ·	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines to through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 31,	000.
δ	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income. Enter 1% of Part I, line 27b		0.
8	•	8 31,	000.
	Hote. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the section	
	4940(e) reduction of tax in those years.		

Form 990-PF (2009)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				A1 240.
2 Undistributed income, if any, as of the end of 2009:	12.	The militage develop		41,240
a Enter amount for 2008 only		The state of the state of	0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2009:		0.		11.1. N -11. 2
A Com 2005 25 401				
e from 2006 92,500.				
d From 2007 141, 200.				
e From 2008 123,800.				
f Total of lines 3a through e	491,127.			
4 Qualifying distributions for 2009 from	hilly as the		- (14). (14). (
Part XII, line 4: ► \$ 31,000.		Mark Control		
a Applied to 2008, but not more than line 2a		The safe of the first section	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	333.42	0.	1	
c Treated as distributions out of corpus	04 000			11334
(Election required - see Instructions) **	31,000.	the large of the transfer of the	10.11, 5.13, 2.1	
d Applied to 2009 distributable amount	0.			0.
e Remaining amount distributed out of corpus	41,240.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		41.240
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	41,240.	"		41,440
must be shown in column (a)) 8 Enter the net lotal of each column as				
Indicated below:	J. W			
8 Corpus. Add lines 31, 4c, and 4s. Subtract line 5	480,887.	A Charles and the		Silvery also see
b Prior years' undistributed income. Subtract		_	أخذونا والمؤونية المرادا	
line 4b from line 2b	3, 4, 4	0.	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	1 - 1 - 1 - 1 - 1 - 1 - 1
e Enter the amount of prior years' undistributed income for which a notice of			10	
deficiency has been issued, or on which		,	The state of the state of	
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	All Care to the second			125 117
amount - see instructions	State of the	0.		
e Undistributed Income for 2008. Subtract line	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	Carlo San		
4a from line 2a. Taxable amount - see instr		100	0.	Entration of the second
f Undistributed Income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must			1, 1, 1, 4,	•
be distributed in 2010			3 24 1 2 2 3 3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	<u> </u>
corpus to satisfy requirements imposed by			and the same of th	
section 170(b)(1)(F) or 4942(g)(3)	0.		Section 1	Company of the state of the sta
B Excess distributions carryover from 2004	<u> </u>		1 100 1 100 100 100	
not applied on line 5 or line 7	56,986.			16.1
9 Excess distributions carryover to 2010.		THE REPORT OF		11 11 1
Subtract lines 7 and 8 from line 6a	423,901.		25	
O Analysis of line 9:				The second section of
a Excess from 2005 35,401.				• • • • • • • • • • • • • • • • • • • •
b Excess from 2006 92,500 .	•			
c Excess from 2007 141,200.				, · · · · · · · · · · · · · · · · · · ·
d Excess from 2008 123,800.				
e Excess from 2009 31,000.			The state of the s	

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Form 990-PF (2009) C/O FAL	CON CAPITAL	<u> </u>	 	65-600	4239 Page 10
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o foundation, and the ruling is effective to					
b Check box to Indicate whether the found				4942(J)(3) or 494	2()(5)
2 a Enter the lesser of the adjusted net	Tax year	ng roundation described	Prior 3 years	3 4042[]](0) 01 1 404	510107
Income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					_
each year listed					
b 85% of line 2a				<u></u>	
 Qualifying distributions from Part XII, 		<u> </u>			
line 4 for each year listed	<u> </u>			 	
d Amounts included in line 2c not		ļ			
used directly for active conduct of			1		
oxempt activities • Qualifying distributions made directly			 	· 	
for active conduct of exempt activities.		l	l	1	
Subtract line 2d from line 2c	•	1			
3 Complete 3a, b, or c for the			l		
alternative test relied upon: a "Assets" alternative test - enter:			j		
(1) Value of all assets			 		
(2) Value of assets qualifying	j	l	i		
under section 4942(I)(3)(B)(I) b "Endowment" alternative test - enter	 	ļ	}	-	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	1			}	
investment income (interest,		}			
dividends, cents, payments on securities loans (section	j -	Ì			
512(a)(5)), or royallies)	Í <u></u>				
(2) Support from general public and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)		}			
(3) Largest amount of support from				 	
an exempt organization		1			
(4) Gross investment income				 	
Part XV Supplementary Info			if the foundation	n had \$5,000 or moi	e in assets
at any time during t	he year-see the l	Instructions.)			
1 Information Regarding Foundation	•				
 List any managers of the foundation who year (but only if they have contributed in 			ributions received by the	e foundation before the close	of any tax
NONE	and and polocol, loca a	(d)(E).7			
b List any managers of the foundation who	o own 10% or more of th	e stock of a corneration (oc an equally large porti	ion of the ownership of a nar	inershin or
other entity) of which the foundation has			ar an adount miga para	on or are our or one par	
NONE					
2 Information Regarding Contributi					
Check here ► if the foundation o	nty makes contributions	to preselected charitable	organizations and does	not accept unsolicited reque	sts for funds, If
the foundation makes gifts, grants, etc.				omplem nems za, u, c, anu c	<u>. </u>
a The name, address, and telephone number LUCILLE W. DRACKETT,				LES. EL 34102	!
DOCTOR W. DRACKETT,	222 PRITTE	TITI EURUNC	HELL MAR	raci en latos	•
b The form in which applications should b	e submitted and informat	tion and materials they st	rould include;		
LETTER FORM, EXPLAIN	THE NEED F	OR AND USE	OF SAID FU	NDS	
c Any submission deadlines:		•			
NONE			4 4 41 27 27		
d Any restrictions or fimitations on awards	, such as by geographic	ai areas, charitable fields,	kinds of institutions, or	other factors;	
NONE					
923601 02-02-10				F	orm 990-PF (2009)

10

Grants and Contributions Paid During th Recipient	If reclarent is an inchidual			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation slatus of reciplent	Purposa of grant or contribution	Amount
Paid during the year	OL SUDSKIMAL COMMUNICI	recipion		
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SEE STATEMENT 5				
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Approved for future payment			İ	
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NONE				
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65-6004239 Page 12

Form 990-PF	(2009)	<u>C/0</u>	FALCON	CAPIT

ter gross amounts unless otherwise indicated.	Universited	usiness income		ded by section 512, 513, or 514	(a)
Program service revenue:	Business code	(b) Amount	SOC EXPO.	(d) Amount	Related or exempt function income
a	1 2000				
b	-			·	
c	- - -		 -		
d					
_		 ·			
e	-				
g Fees and contracts from government agencies	-				
Membership dues and assessments					
interest on savings and temporary cash					
Investments			i i		
Dividends and interest from securities	···		14	20,360.	
Net rental income or (loss) from real estate:		1.12	_	55556 1 12 (\$475)	
Debt-financed property				<u> </u>	
b Not debt-financed property	··· } 				
Vet rental income or (loss) from personal			\vdash		
property			1 1		
Other investment Income	··· -				
Gain or (loss) from sales of assets other	··· -		 		
han inventory			18	~30,592.	
Net income or (loss) from special events	··· -		1-4	- 10, 1540	
Gross profit or (loss) from sales of inventory					
Other revenue:	·· -				
	i l				
<u> </u>					
			 		
				_ ·	
d	-				
·	13.77		Ţ.:	-10,232.	
Publish Add ashumna (h) (d) and (a)					
Subtotal, Add columns (b), (d), and (e)					
fotal. Add line 12, columns (b), (d), and (8)					
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.))			t Purposes	2078.
e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which in	to the Accom	iplishment of Exolumn (e) of Part XVI-A	emp		
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities	to the Accom	iplishment of Exolumn (e) of Part XVI-A	emp		
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			ALCON CAPITAL	·		-6004239		ge 13
<u></u>	art X	Information Re Exempt Organ		and Transactions ar	nd Relationships With N	loncharitable		
1	Did th	e organization directly or Indi	rectly engage in any of the follow	ing with any other organization	described in section 501(c) of	ا ين ا	Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?					4.25 3.33 3.33		i de la constante de la consta	
Į			ation to a noncharitable exempt o	-			[X. (2)
	(1) (ash	***************************************		* *************************************	1 <u>1a(1</u>)		<u>X</u>
					·····	18(2)	ļ	X
- 1		transactions;					1	·
	(1) 8	iales of assets to a noncharita	ble exempt organization			<u>1b(1)</u>		X
	(2) }	urchases of assets from a no	ncharitable exempt organization		**************************************	1 <u>15(2)</u>		X
	(3) F	ientai or tacilities, equipment,	or other assets	,	***************************************	16(3)	<u> </u>	X
								X
	(0) L	oans of ioan guarantees	embarchia az fundzalejan entisitat			19(9)		X
	ι (U) - Shaτƙ	to of facilibes, equipment, ma	illion lists. Ather assets or naid a	milovaec		10	H	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
					ays show the fair market value of th		ate	<u> </u>
					in any transaction or sharing arran		.013,	
			other assets, or services received					
(a)	Line no.	(b) Amount involved	(c) Name of noncharitab	is exempt organization	(d) Description of transfers, transa	ctions, and sharing ar	engeme	nta
_			N/A					
_								
_			<u> </u>					
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_					ļ <u>.</u>			
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•				- 	<u> </u>			
_								
2	ls the	foundation directly or indirec	tly affiliated with, or related to, on	e or more tax-exempt organiza	ations described			
					***************************************	Yes	LX.] No
		complete the following sch	edule.					
_		(a) Name of org	janization	(b) Type of organization	(c) Description o	f relationship		
_		N/A						
				ļ				
				 		·		
_								
	Linder o	enalties of perium I declare that it	neve examined this return including an	ompanying schedules and stateme	nts, and to the bast of my knowledge and	ballet it is true corre	c1.	
			or then expayered flotoclary) in this ed o				,	
	١.	VV_{Λ}	120	1 10/26/11	Pres.ser			
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Sign Here	-	Preparer's		Date		Preparer's Identify	nun gah	ib er
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(J)	Paid Preparers Use Only	First's rame (or yours HILL			EIN >			
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ÐĊN	DATE	TYPE OF ACTIVITY	UPDATED BY
	05/10/2010	Upload Started	
	05/10/2010	Ready to Release by Customer	
	05/11/2010	Released for Transmission - Validation in Progress	hbkddesruisseaux
	05/11/2010	Ready to transmit - Validation Complete	
	05/11/2010	Transmitted to FD	
	05/11/2010	Accepted by FD	

FORM 990-PF DIVIDENDS	AND	INTERES	T FROM	SECURITIES	STATEMENT	1
SOURCE		GROSS A	MOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A))
VARIOUS	•	2	20,360.	0.	20,360	
TOTAL TO FM 990-PF, PART I, LN	4	2	20,360.	0.	20,30	60.
FORM 990-PF U.S. AND STA	ATE/O	CITY GOV	ernmen'	r obligations	STATEMENT	2
DESCRIPTION		U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	r
VICTORY FUND FOR INCOME		х	<u></u>	0.		0.
TOTAL U.S. GOVERNMENT OBLIGATION	ONS					 -
TOTAL STATE AND MUNICIPAL GOVER	RNME	NT OBLIG	ROITA			
TOTAL TO FORM 990-PF, PART II,	LIN	E 10A		0.		0.
FORM 990-PF	CO	RPORATE	STOCK		STATEMENT	3
DESCRIPTION				BOOK VALUE	FAIR MARKET	r
BRISTOL MYERS SQUIBB AND ZIMMER	R HO	LDINGS		458,150.	458,1	50.
TOTAL TO FORM 990-PF, PART II,	T T371	7 1 AD		458,150.	458,15	<u> </u>

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

-

PURSUANT TO CODE SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), AMAZA FOUNDATION CHARITABLE TRUST ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS COMING FROM PRIOR YEAR'S UNDISTRIBUTED INCOME AS FOLLOWS:

YEAR END 2003 AMOUNT \$41,151

\$952

2004

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 5		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP - AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
BOYS AND GIRLS CLUB, INC., NAPLES, FL	CHARITABLE	PUBLIC	1,000.	
CONSERVANCY OF SW FLORIDA, NAPLES, FL	CHARITABLE	PUBLIC	2,500.	
DAVID LAWRENCE CENTER, NAPLES, FL	CHARITABLE	PUBLIC	2,000.	
EDISON COLLEGE FOUNDATION FUND, NAPLES, FL	EDUCATION	PUBLIC	3,000.	
NATIONAL D DAY MEMORIAL FOUNDATION, NAPLES, FL	CHARITABLE	PUBLIC	2,000.	
NEIGHBORHOOD HEALTH CLINIC, NAPLES, FL	CHARITABLE	PUBLIC	1,000.	
SHELTER FOR ABUSED WOMEN AND CHILDREN, NAPLES, FL	CHARITABLE	PUBLIC	2,500.	
THE COMMUNITY FOUNDATION OF COLLIER COUNTY, NAPLES, FL	CHARITABLE	PUBLIC	1,000.	

AMAZA FOUNDATION CHARITABLE TRUST C/O FA		65-6004239
THE COMMUNITY SCHOOL, NAPLES, FL EDUCATION	PUBLIC	10,000.
TRINITY-BY-THE-COVE, EPISCOPAL CHURCH, NAPLES, FL CHARITABLE	PUBLIC .	5,000.
YMCA OF COLLIER COUNTY, NAPLES, FL CHARITABLE	PUBLIC	1,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A		31,000.

· Form 8868 (Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service	File a separate application for each return.	
If you are filling for an Aut	omatic 3-Month Extension, complete only Part I and check this box	▶ 🗓
•	litional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	
Do not complete Part II un	iless you have already been granted an automatic 3 month extension on a previously fi	led Form 8868.
Part I Automatic	c 3-Month Extension of Time. Only submit original (no copies needed).	-
	e Form 990-T and requesting an automatic 6-month extension - check this box and con	
to file income tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	
noted below (6 months for a (not automatic) 3 month extension you must submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronic ension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file of the file for Chantles & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,
Type or Name of Exemp	·	Employer identification number
• • • • • •	UNDATION CHARITABLE TRUST ON CAPITAL	65-6004239
	and room or suite no. If a P.O. box, see instructions.	05-0004237
Ming your 3940 PRO	SPECT AVENUE, NO. 102	· · · · · · · · · · · · · · · · · · ·
instructions. City, town or por	st office, state, and ZIP code. For a foreign address, see instructions. FL 34104	
Check type of return to be	filed (file a separate application for each return):	
Form 990	Form 980 T (corporation)	20
Form 980-BL	Form 990 T (aec. 401(a) or 408(a) trust)	 -
Form 980 EZ	Form 990-T (trust other than above) Form 60	==
X Form 990-PF	Form 1041-A Form 88	70
• If the organization does n • If this is for a Group Petus	CHAD OTT of > 555 ADMIRALITY PARADE WEST - NAPLES, FL -403-7335 FAX No. > oth have an office or place of business in the United States, check this box on, onter the organization's four digit Group Exemption Number (GEN)	s is for the whole group, check this
AUGUST 15 Is for the organization's X calendar year	<u>2009</u> ar	
tax year begin	ning, and ending	 ·
2 If this tax year is for les	ss than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this application is for	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits.		3a \$ 0.
	Form 990-PF or 990-T, enter any refundable credits and estimated	0.
	nclude any prior year overpayment allowed as a credit. It line 3b from line 3a, include your payment with this form, or, it required,	RECEIVED
c Balance Due, Subtrac deposit with FTD coup	on or, if required, by using EFTPS (Electronic Federal Tax Payment System)	၂၂၂၂၂၂၂၂၂၂
See instructions.	9	18g 6 9 2013 3 0.
Caution, if you are going to	make an electronic fund withdrawal with this Form 8868, see Form 8453 EO	
LHA For Privacy Act and	Paperwork Reduction Act Notice, see Instructions.	GDENorm 8868 (Rev. 4-2009)

Form 8868 (Nov. 4-2009)			Pa Pa	ge 2
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and				
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a p	previously filed	Form 8868.		
hi you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	-1-1-1	-100-00-01-		
Part II Additional (Not Automatic) 3-Month Extension of Time, Only file the	original (no co		d). Identification numb	
Yype or AMAZA FOUNDATION CHARITABLE TRUST	14.5	Employer	identification numb	367
print C/O FALCON CAPITAL		65-6	004239	
File by the artended Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS us		
due date for 3940 PROSPECT AVENUE, NO. 102				
interaction of the latter of the control of the con	: :			
MAPLES, FL 34104	L			<u> </u>
Check type of return to be filled (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (sec. 401(a) or 408(a) trust)	n 1041-A	Form 62	227 Form 86	87 0
	n 4720 E	Form 60		210
STOP! Do not complete Part II If you were not already granted an automatic 3-month extension	on a previous	ily illed Por	M 8008.	
CHAD OTT				
• The books are in the care of > 555 ADMIRALITY PARADE WEST - NAP				
Telephone No. ► 239-403-7335 FAX No. ►				
• if the organization does not have an office or place of business in the United States, check this business in the United States in th				hla
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	nd FINe of all a	s is io; the s nambare th	moie group, chuck i e extension le for	.1113
4 request an additional 3-month extension of time until NOVEMBER 15, 2010.	HO CHIS OF BUIL	rigitiooia (i)	5 OKONSION IS IOI.	
	and anding			. •
	i return	Chang	e in accounting per	lod
7 State in detail why you need the extension				
ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER TH	e infor	MOITAN	NECESSARY	<u></u>
TO FILE A COMPLETE AND ACCURATE RETURN.				
8a if this application is for Form 990 BL, 990 FF, 990 T, 4720, or 6069, enter the tentative tex, less	any			^
nonrefundable credits. See Instructions.		<u>0a \$</u>		0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es		_		
tax payments made. Include any prior year overpayment allowed as a credit and any amount p previously with Form 8868.	ako	8b \$		0.
c Balance Due. Subtract line 8b from line 8a, Include your payment with this form, or, if required	. deposit	90 8		٠.
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System), Ber		80 8		0.
Signature and Verification				
Under penallies of perjury, I doclare that I have examined this form, including accompanying schedules and statem It is true, correct, and complete, and that I am authorized to prepare this form.	ionis, and to the	best of my ki	rowledge and belief,	
·) \ // /) \ \ / (=======			8-9-10	
Signature CPA		Dato 🕨	<u> </u>	
i e e e e e e e e e e e e e e e e e e e			Form 8888 (Rev. 4-2)	(900)