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Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury  
Internal Revenue Service (77)**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 , 2009, and ending , 20

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 <b>HEFLIN FAMILY FOUNDATION</b>		<b>A Employer identification number</b> 71-6168230
	Number/street (or P O box no if mail is not delivered to street add ) PO BOX 8910	Room/suite	<b>B Telephone number (see the instructions)</b> 501-888-2345
	City or town, state, and ZIP code LITTLE ROCK AR 72219-8910		<b>C</b> If exemption application is pending check here <input type="checkbox"/>
	<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>D</b> 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B) check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,209,376.		<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), & (d) may not necessarily equal the amounts in column (a) (see instr.))		(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 (attach schedule)	104,200.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temp. cash investments	328.	328.		
	4 Dividends and interest from securities	70,268.	70,215.		
	5a Gross rents				
	b (Net rental income or (loss))				
	6a Net gain/(loss) from sale of assets not on line 10	7,584.			
	b Gross sales price for all assets on line 6a	361,969.			
	7 Capital gain net income (from Part IV line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less rns & allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	4,154.	9,106.			
12 Total. Add lines 1 through 11	186,534.	79,649.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	4,200.			
	c Other professional fees (attach schedule)	95.	95.		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,430.	874.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	878.	878.		
	24 Total operating and administrative expenses. Add lines 13 through 23	7,603.	1,847.		
	25 Contributions, gifts, grants paid	158,000.			158,000.
26 Total exp. & disbursements. Add lines 24 and 25	165,603.	1,847.		158,000.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	20,931.				
b Net investment income (if neg., enter -0-)		77,802.			
c Adjusted net income (if neg., enter -0-)					

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See inst.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash - non-interest-bearing			4,018.		
	2 Savings and temporary cash investments			46,662.	234,542.	234,542.
	3 Accounts receivable ▶					
	Less allowance for doubtful accts ▶					
	4 Pledges receivable ▶					
	Less allowance for doubtful accts ▶					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)					
	7 Other notes and loans receivable (attach schedule) ▶					
	Less allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges			4,447.	2,911.	2,911.
	10a Investments - U S and state govt obligations (attach schedule)					
	b Investments - corporate stock (attach schedule)			1,423,127.	1,518,288.	1,518,288.
	c Investments - corporate bonds (attach schedule)			90,130.	189,359.	189,359.
	11 Investments - land, buildings, and equipment basis (attach schedule) ▶					
Less accumulated depreciation ▶						
12 Investments - mortgage loans						
13 Investments - other (attach schedule)			244,175.	257,806.	257,806.	
14 Land, buildings, and equipment basis (attach schedule) ▶						
Less accumulated depreciation ▶						
15 Other assets (describe ▶ OTHER ASSETS )			7,178.	6,470.	6,470.	
16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)			1,819,737.	2,209,376.	2,209,376.	
Liabilities	17 Accounts payable and accrued expenses					
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ )					
23 Total liabilities (add lines 17 through 22)						
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24 Unrestricted			1,819,737.	2,209,376.	
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, ck. here ▶ <input type="checkbox"/> and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg, and equipment fund					
	29 Retained earnings accumulated income, endowment, or other funds					
	30 Total net assets or fund balances (see the instructions)			1,819,737.	2,209,376.	
	31 Total liabilities and net assets/fund balances (see the instructions)			1,819,737.	2,209,376.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,819,737.
2 Enter amount from Part I, line 27a	2	20,931.
3 Other increases not included in line 2 (itemize) ▶ MARKET VALUE INCREASE	3	368,708.
4 Add lines 1, 2, and 3	4	2,209,376.
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,209,376.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SCHEDULE ATTACHED		P	VA/RI/OUS	12/31/2009
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 361,969.		545,841.	(183,872.)
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			(183,872.)
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 2 (183,872.)

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  
If gain, also enter in Part I, line 8, column (c) (see the instructions) 3

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

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

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

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

☐ Yes ☐ No

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

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

(a) Base period years Calendar year (or tax year beg in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)

2

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

3

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

4

5 Multiply line 4 by line 3

5

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

7 Add lines 5 and 6

7

8 Enter qualifying distributions from Part XII, line 4

8

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 the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> & enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr )		1	1,556.
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			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3 Add lines 1 and 2		3	1,556.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	1,556.
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 4,467.		
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	4,467.
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	2,911.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 2,911. Refunded		11	

**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 the 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		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 (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 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		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? 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 • 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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? 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 the 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) 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 in instructions)? 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

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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? Website address ▶	13	X	
14	The books are in care of ▶ JAY M HEFLIN Located at ▶ 3524 TERMINIX DR AR LITTLE ROCK	Telephone no ▶ 501-888-2345 ZIP+4 ▶ 72206		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			

**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? <b>Exception.</b> 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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
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 the instructions)	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 ▶ 20____, 20____, 20____, 20____		
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)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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**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)? (see instructions)

☐ 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 the instructions)?

Organizations relying on a current notice regarding disaster assistance check here

☐**5b****c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

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

**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?

If "Yes" to 6b, file Form 8870

**6b**

X

**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?**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 (see the instructions).

(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 comp	(e) Expense account, other allowances
BOO HEFLIN	CO TRUSTEE			
5 RIBERA PLACE	1	0		
SHARON K HEFLIN	CO TRUSTEE			
1 TERMINIX DR	1	0		
JAY M HEFLIN	CO TRUSTEE			
20 VALLEY CLUB CIRCLE	1	0		
MARC W HEFLIN	CO TRUSTEE			
33 VALLEY ESTATES	1	0		

**2** Compensation of five highest-paid employees (other than those included on line 1 - see the instructions).

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

▶

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see the instructions). 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

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see the instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
2	
All other program-related investments See instructions	
3	
<b>Total</b> Add lines 1 through 3	



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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see the 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>	1,586,905.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	135,980.
<b>c</b>	Fair market value of all other assets (see the instructions)	<b>1c</b>	45,317.
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	1,768,202.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,768,202.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see the instructions)	<b>4</b>	26,523.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,741,679.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	87,084.

**Part XI Distributable Amount** (see the 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>	87,084.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	1,556.
<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>	1,556.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	85,528.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	85,528.
<b>6</b>	Deduction from distributable amount (see the instructions)	<b>6</b>	
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	85,528.

**Part XII Qualifying Distributions** (see the 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>	158,000.
<b>b</b>	Program-related investments-total from Part IX-B	<b>1b</b>	
<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>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	158,000.
<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 (see the instructions)	<b>5</b>	
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	158,000.

**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.

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**Part XIII Undistributed Income** (see the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
<b>1</b> Distributable amount for 2009 from Part XI, line 7				85,528.
<b>2</b> Undistributed income if any, as of the end of 2009				
<b>a</b> Enter amount for 2008 only				
<b>b</b> Total for prior yrs 20__, 20__, 20__				
<b>3</b> Excess distribs carryover, if any, to 2009				
<b>a</b> From 2004	69,943.			
<b>b</b> From 2005	55,932.			
<b>c</b> From 2006	32,249.			
<b>d</b> From 2007	15,102.			
<b>e</b> From 2008	35,435.			
<b>f</b> Total of lines 3a through e	208,661.			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 158,000.				
<b>a</b> Applied to 2008, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required - see the instr.)				
<b>c</b> Treated as distributions out of corpus (Election required - see the instructions)				
<b>d</b> Applied to 2009 distributable amount				85,528.
<b>e</b> Remaining amt distributed out of corpus	72,472.			
<b>5</b> Excess distribs carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in col (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, & 4e Subtract line 5	281,133.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
<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				
<b>d</b> Subtract line 6c from line 6b Taxable amount - see the instructions				
<b>e</b> Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see the instructions				
<b>f</b> Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see the instructions)				
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7 (see the instructions)	69,943.			
<b>9</b> Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	211,190.			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2005	55,932.			
<b>b</b> Excess from 2006	32,249.			
<b>c</b> Excess from 2007	15,102.			
<b>d</b> Excess from 2008	35,435.			
<b>e</b> Excess from 2009	72,472.			

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

**1a** 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>2a</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) )  
 SHARON HEFLIN, JAY HEFLIN, MARC HEFLIN

**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 the 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

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

**c** Any submission deadlines

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

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> Paid during the year				
BAPTIST 9601 INT 72205	BD MEMBER	501C3	HEALTH & EDUCAT	45,000.
AMERICAN PO BOX 1 72203	BD MEMBER	501C3	EDUCATION	5,000.
EASTER S 3920 WOO 72212		501C3	HEALTH & EDUCAT	3,500.
TROJAN A 2801 S U 72204		501C3	HEALTH & EDUCAT	5,000.
ARKANSAS 8121 DIS 72209		501C3	PROGRAM SUPPORT	10,000.
OUCHITA BOX 3754 71998	BD MEMBER	5013C	EDUCATION	40,000.
POSITIVE 6915 GEY 72209	BD MEMBER	5013C	EDUCATION	10,000.
BETHANY 1100 N U 72207		501C3	PROGRAM SUPPORT	1,000.
COMMUNIT 2740 COL 72034		501C3	PROGRAM SUPPORT	5,000.
ARK SPOR 3 ALLTEL 72114		501C3	EDUCATION & REC	10,000.
JUST COM 1400 W M 72201		501C3	YOUTH PROGRAMS	5,000.
ARKANSAS 3801 W 6 72205		501C3	PROGRAM SUPPORT	6,000.
CENTRAL PO BOX 5 72215		501C3	HEALTH	10,000.
ARKANSAS PO BOX 3 72503		501C3	PROGRAM SUPPORT	2,500.
<b>Total</b>			▶ <b>3a</b>	158,000.
<b>b</b> Approved for future payment				
<b>Total</b>			▶ <b>3b</b>	



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


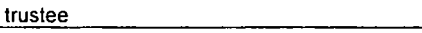
- |          |  | Yes | No |
|----------|--|-----|----|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |     |    |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of  |     |    |
|          | (1) Cash   |     | X  |
|          | (2) Other assets   |     | X  |
| <b>b</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  |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   |     | X  |
| <b>d</b> | 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

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.

Paid Preparer's Use Only	Signature of officer or trustee 		Date <u>09/13/2010</u>		Title <u>CO-TRUSTEE</u>	
	Preparer's signature 		Date <u>09/13/2010</u>		Check if self-employed <input checked="" type="checkbox"/>	
Firm's name (or yours if self-employed), address, and ZIP code <u>ROBERT L TRAMMEL CPA</u> <u>21 AVIGNON COURT</u> <u>LITTLE ROCK AR 72223-</u>		Preparer's ID number (see <b>Signature</b> in the instructions ) <u>P01014043</u>				
		EIN <u>71-0639136</u>			Phone no <u>501-821-6222</u>	

## Schedule of Contributors

OMB No 1545-0047

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

**2009**

Name of the organization

HEFLIN FAMILY FOUNDATION

Employer identification number

71-6168230

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 Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/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 Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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.** Organization that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

These instructions will be issued separately.

Name of organization

HEFLIN FAMILY FOUNDATION

Employer identification number

71-6168230

**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SHARON HEFLIN 1 TERMINIX DR LITTLE ROCK AR 72206-	\$ 104,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



HEFLIN FAMILY FOUNDATION  
2009  
CONTRIBUTIONS RECEIVED

DONOR	DATE	CASH	NO SHARES	INVESTMENTS OR STOCK VALUE	TOTAL
SHARON HEFLIN	1/14/2009	100,000			100,000
SHARON HEFLIN	9/3/2009	4,200			4,200
		<u>104,200</u>		<u>-</u>	<u>104,200</u>

## Detail Sheet

2009

**Name:** HEFLIN FAMILY FOUNDATION

ID: 71-6168230

**Description.** INCOME FROM PARTNERSHIPS[illegible]

**US 990****Other Income****2009**

Description	Revenue and expenses per books	Investment income	Adjusted net income
LOSS FROM PARTNERSHIP K-1	(4,952.)		
FROM 20-3929653	9,106.	9,106.	
	4,154.	9,106.	

US 990	Other Assets		2009
Description	Beginning of year book value	End of year book value	FMV
INTANGIBLE DRILLING EXPENSE	9,835.	11,409.	11,409.
AMORTIZATION OF INTANGIBLE DREILLIN	(2,657.)	(4,939.)	(4,939.)
	7,178.	6,470.	6,470.

**US 990****Other Professional Fees****2009**

Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
PROFESSIONAL FEES -20-3929653	95 .	95 .		
	95 .	95 .		



## 2009

US990ST5

**US 990****Investments - Other**  
**990-PF: Page 2, Line 13****2009**

Description	Basis of valuation	Book value	FMV
RODGEWOOD ENERGY P FUND, LLC	TAX BASIS	42,568.	42,568.
AIP ABSRT INVESTMENT	TAX	215,238.	215,238.
		257,806.	257,806.



# Gain or Loss from Sales of Assets Other than Inventory

US 990-PF/EZ

990-EZ: Page 1, Line 5; 990PF: Page 12, Line 8

2009

Description	PUBLIC TRADED SECURITIES	
Date acquired		
How acquired	PURCHASED	
Date sold		
Purchaser name		
Sales price		361,969.
Basis method	TAX	
Basis		354,385.
Selling expense		
Accumulated depreciation		

HEFLIN FAMILY FOUNDATION  
2009  
CONTRIBUTIONS MADE

DONEE	DATE	AMOUNT
BAPTIST HEALTH FOUNDATION	9/15/2009	35,000
AMERICAN HEART ASSOCIATION	1/13/2009	5,000
EASTER SEALS OF ARKANSAS	1/20/2009	3,500
TROJAN ATHLETIC FOUNDATION	7/10/2009	5,000
ARKANSAS FOOD BANK	9/15/2009	10,000
BAPTIST HEALTH FOUNDATION	3/17/2009	10,000
OUACHITA BAPTIST UNIVERSITY	9/15/2009	40,000
PARK	9/15/2009	10,000
BETHANY CHRISTIAN	12/17/2009	1,000
COMMUNITY CONNECTION	9/15/2009	5,000
ARK SPORTS HALL OF FAME	9/15/2009	10,000
JCCA	2/23/2009	5,000
ARKANSAS RICE DEPOT	7/10/2009	6,000
CARTI	9/15/2009	10,000
ARKANSAS SHERIFF BOYS & GIRLS	9/15/2009	2,500
		<u>158,000</u>

HEFLIN FAMILY FOUNDATION  
INVESTMENT BALANCES AT YEAR END  
12/31/2009

**INVESTMENTS**

**PREFERRED STOCK:**

	2,009 BOOK & MARKET VALUE	2008 BOOK & MARKET VALUE
ABN AMRO CAP VII 6 08%	-	9,980
AEGON NV 7 25%	-	22,880
CITIGROUP INC 8 125%	-	31,900
DEUTSCHE BANK CAP 6 6250 SER	-	30,380
HSBC HLDGS PLC 6 2%	-	37,160
MERRILL LYNCH CO 8 625%	-	39,560
ROYAL BK SCOTLAND GP 6 35%	-	9,100
ROYAL BK SCOTLAND GP 6 4PFD	-	8,860
ROYAL BK SCOTLAND SER Q 6 75	-	8,790
WELLS FARGO 8%	51,400	43,920
	<u>51,400</u>	<u>242,530</u>

**COMMON STOCKS:**

ALTRIA GROUP INC	-	30,120
AMERICAN EUROPEAN GROWTH A	-	-
BLACK ROCK LTD DURATION	29,320	21,460
CITIZENS COMMUNICATIONS CO	-	-
DUKE ENERGY CORP	17,210	15,010
FAIRPOINT COMMUNICATIONS	-	-
GROWTH FUND OF AMERICA	-	-
MERCK & CO	36,540	30,400
MFS MULTIMARKET INC TR SBI	-	28,860
MS/STRS (MBJ) 8%	30,627	28,400
NEW PERSPECTIVES	-	-
NUVEEN GBL VLE OPPORT UFND	-	-
PUTNAM MASTER INT INC TR	37,989	25,515
PUTNAM PREMIER INCOME TR	44,136	27,864
SPECTRA ENERGY CORP	-	-
WALMART STORES, INC	117,590	123,332
WASHINGTON MUTAL FUND	-	-
	<u>313,412</u>	<u>330,961</u>
TOTAL CORPORATE STOCK	<u>364,812</u>	<u>573,491</u>

**CORPORATE BONDS:**

MORGAN STANLEY	29,167	
VERIZON COMMUNICATIONS	26,089	
ALTRIA GROUP INC	30,904	
CATERPILLAR INC	28,059	
BAC CAPITAL TR 5 63%	48,300	
CITIGROUP CAP IX, DUE 02/14/33		14,540
GENERAL MOTORS, DUE 05/15/48	5,100	3,410
SATURNS 6 000%, DUE 02/15/33	21,740	14,950
REGIONS ASSET MANAGEMENT III		41,680
NATL CITY CAPT TR, DUE 05/25/47		-
MERRILL CAPT TR II, DUE 06/15/87		15,550
	<u>189,359</u>	<u>90,130</u>

**MUTUAL FUNDS:**

AMERICAN EUROPACIFIC GRW A	34,788	25,010
AMERICAN FUNDAMENTAL INV A	108,561	81,406
AMERICAN GR FD OF AMERICA A	515,389	383,236
AMERICAN NEW PERSPECTIVE A	494,738	359,984
	<u>1,153,476</u>	<u>849,636</u>

**OTHER INVESTMENTS:**

AIP ABSRT	<u>215,238</u>	<u>196,109</u>
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**TOTAL AT MORGAN STANLEY**

<u>1,922,885</u>	<u>1,709,366</u>
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RIDGEWOOD ENERGY - P FUND

42,568	48,066
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**GRAND TOTAL**

<u>1,965,453</u>	<u>1,757,432</u>
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- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed)

Type or print  File by the extended due date for filing the return. See instructions	Name of Exempt Organization <b>HEFLIN FAMILY FOUNDATION</b>	Employer identification number <b>71-6168230</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>PO BOX 8910</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>LITTLE ROCK AR 72219-8910</b>	

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

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

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

- The books are in the care of **JAY M HEFLIN**  
Telephone No **501-888-2345** FAX No **501-888-2349**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOV 15**, 20 **10**

5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_

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

7 State in detail why you need the extension **HAVE NOT RECEIVED FORM K-1 FROM ALTERNATIVE INVESTMENT PARTNERS ABSOLUTE RETURN FUND UNABLE TO HAVE COMPLETE INFORMATION TO FILE RETURN EXPECT K-1 IN NEAR FUTURE**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	4,467.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$	4,467.
c <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c \$	

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *Sharon Heplin* Title *Co-Trustee* Date *08/02/2010*