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50m 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009

or calendar	r year 2009, or ta	ax year beginning			and endin		, 20
G Check all	that apply.	Initial return	Initial return		ublic charit	-	Final return
	Nome of favor 111	Amended return	Addres	ss change		Name change	
	Name of foundat	ion				A Employer identif	ication number
Use the IRS	DETEMBTED.	CHARITABLE FO	IINDATTON			74.	-1902119
label. Otherwise.					Room/suit		
print	Number and sire	et (or PO box number ii)	mail is not delivered to street	address)	Koomsuit	C B Telephone number (se	e page 10 of the instructions)
or type.	16022 GORE	CDASS CT				(2)	31) 989-5764
See Specific	City or town, star				l	C If exemption applic	
Instructions.	City of town, sta	te, and zir code				pending, check hen	~
	SPRING. TX	77379-2931				D 1. Foreign organiza 2. Foreign organiza	_
- Chock two			c)(3) exempt private f	oundation		85% test, check	here and attach
	~	empt chantable trust	Other taxable pr		tion	computation .	
	et value of all ass		unting method X C				on status was terminated
	om Part II, col (c)		ther (specify)), GG!		b)(1)(A), check here . D
16) ▶ \$			column (d) must be or			L '	s in a 60-month termination (1)(1)(B), check here .
	lvsis of Revenue	and Expenses (The	<u>```</u>				(d) Disbursements
total	of amounts in colum	nns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c) Adjusted net	for charitable
	not necessanly equ nn (a) (see page 11	ıal the amounts in I of the instructions))	books	incon		income	purposes (cash basis only)
							, , , , , , , , , , , , , , , , , , , ,
2 Check	X if the found	received (attach schedule) . I dation is not required to B					
		porary cash investments	28.		28.		ATCH 1
l .		om secunties	1,216.		1,216.		ATCH 2
	ntal income or (loss)						
6a Netga	ain or (loss) from sale	of assets not on line 10					
	sales price for all on line 6a						
7 Capita		(from Part IV, line 2) .				·	
8 Net si	-	ıın					
	sales less returns lowances			1			
b Less (Cost of goods sold ,						_
		ach schedule)					
11 Other	r income (attach sc	hedule)	1,244		1 244		
		ah <u>11</u>	1,244	1	1,244.		·
1		rectors, trustees, etc	U	 			+
14 Other	remployee salaries	and wages		-			
15 Pensi	ion plans employee		· · · · · · · · · · · · · · · · · · ·				
16a Legal	kfees (attach sched		3,664		1,832.	0	. 1,8
b Acco	unling fees (attach professional fees	schedule) (10) (3,004	1	_,		+
c Othe	_	(attach schedule)		-			+
17 Intere		page 14 of the instructions)	14	<u> </u>	14.		
18 Taxes		reduie) and depletion.			1		
19 Depre	pancy						<u> </u>
20 Occu		I meetings					
22 Printi		s		<u> </u>			
23 Other	r expenses (attach	schedule) ATCH 5	38	-			
24 Total		ministrative expenses.					
Addı		3	3,716		1,846.	0	
)	•	nts paid	7,310				7,3
26 Total e		ents. Add lines 24 and 25	11,026		1,846.	0	. 9,1
_	ract line 26 from lin						
		es and disbursements	-9,782	<u> </u>			
1	•	(if negative, enter -0-)			-0-		
1		negative, enter -0-)				-0-	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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JSA ** ATCH 4

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CERTIFIED 7010 0780 0001 9279 9909

E	art li	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
_		<u> </u>	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing			
			cash investments	79,725.	73,192.	73,192.
	3	Accounts receivable -				
		Less allowance for dou	btful accounts			
	4	Pledges receivable ▶_				
		Less allowance for dou	btful accounts ▶			
			fficers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see page 16 of the instructions)			
			receivable (attach schedule)			
	}		btful accounts			
/A	8		se			
Assets	9	Prepaid expenses and d	leferred charges			
188			e government obligations (attach schedule)			
•			e stock (attach schedule) ATCH 6		52,318.	52,318.
	•		e bonds (attach schedule)			
	11	Investments - land, building	s, 🛌			
		and equipment basis Less accumulated deprecia	ation			
		(attach schedule)				
			loans			
	13 14	Land buildings and	ach schedule)			
	` `	equipment basis	etion >	•		
		(attach schedule)	ation			
	15	Other assets (describe				
	16		pleted by all filers - see the	120 016	105 510	105 510
_			age 1, item I)			125,510.
	17	Accounts payable and a	accrued expenses		3,702.	
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directo	ors, trustees, and other disqualified persons			
ab	21	Mortgages and other no	otes payable (attach schedule)			
ב	22	Other liabilities (describe	e ▶)			
_	23	Total liabilities (add line	es 17 through 22)		3,702.	
		Foundations that fol	low SFAS 117, check here ▶			
		and complete lines	24 through 26 and lines 30 and 31.			
ès	24	Unrestricted	not follow SFAS 117, uplete lines 27 through 31.			
anc	25	Temporarily restricted				
ğ	26	Permanently restricted				
2		Foundations that do	not follow SEAS 117			
۳		check here and com	plete lines 27 through 31.			
7	27	Capital stock trust prin	cipal, or current funds			
81	28	Paid in or capital sumble of	r land, bldg , and equipment fund			
Se	29		ulated income, endowment, or other funds	132,216.	121,808.	
Ą	30		d balances (see page 17 of the			
Net Assets	30		-	132,216.	121,808.	
_	31	Total liabilities and not	t assets/fund balances (see page 17	232,210.		
	"			132,216.	125,510.	
F:	ort li	Analysis of Cha	anges in Net Assets or Fund			
			alances at beginning of year - Part II		t agree with	
•						132,216.
_			d on prior year's return)		1	-9,782.
		r amount from Part I,				-9,102.
						122 424
4	Add	lines 1, 2, and 3	line 2 (itemize) ► ATTACH	······································		122,434.
						626.
<u>6</u>	Tota	net assets or fund ba	alances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	121,808.
						Form 990-PF (2009)

	s and Losses for Tax on Inv d describe the kind(s) of property sold ((b) How	(c) Date	(d) Date sold
	rick warehouse, or common stock, 200		acquired P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)
<u>1a`</u>					
_b			-		
<u>c</u>					
<u>d</u> e					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	res)
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) min	*.
a					
b					
<u>c</u>		_	ļ		
<u>d</u>					
Complete only for assets s	howing dain in column (h) and ow	ned by the foundation on 12/31/69		0-1	
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col (h) g (k), but not less Losses (from co	than -0-) or
a			<u> </u>		
b			<u> </u>		
С					
d			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
<u>e</u>		<u></u>	ļ <u>.</u>		
2 Capital gain net income or	' (net canital ince)	f gain, also enter in Part I, line 7			
	(II	f (loss), enter -0- in Part I, line 7	2		
_	n or (loss) as defined in sections 12 , line 8, column (c) (see pages 13				
•	line 8		3		
		uced Tax on Net Investment Inc	come		
	the section 4942 tax on the distrit	butable amount of any year in the b	ase peno	d?	Yes X No
	not qualify under section 4940(e).	r, see page 18 of the instructions b	efore mak	una any entries	
(a)	(b)	(c)	lore mar	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution r (col (b) divided by	atro y col (c))
2008	5,400.	110,818.		· · · · · ·	0.048729
2007	4,900.	108,676.			0.045088
2006	5,400.	106,787.			0.050568
2005	5,300. 6,100.	107,993. 107,315.	ļ		0.049077
2004	6,100.	107,313.	 	· · · · · · · · · · · · · · · · · · ·	0.036642
2 Total of line 1, column (d)	1		2		0.250304
Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5 or by the			
<u> </u>	•	s than 5 years	3		0.050061
•					
4 Enter the net value of nor	ncharitable-use assets for 2009 fro	om Part X, line 5	4		124,327.
5 Multiply line 4 by line 3	. 		5		6,224.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		6,224.
8 Enter qualifying distribution If line 8 is equal to or great VI instructions on page	eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% ta	9,180. x rate See th

	•			
orm	990-PF (2009) 74-1902119		Р	age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne ins	_	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	•		
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)		-	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ► X and enter 1% of Part I, line 27b	_		
С	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-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		_	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.			
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11		-	
Pa	rt VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		1	'
	(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	i		
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			ĺ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	Ì		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
4 a	• • • • • • • • • • • • • • • • • • • •	4 a	<u> </u>	Х
ı	2 1111111111111111111111111111111111111		ļ <u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_ 5	ļ	X
	If "Yes," attach the statement required by General Instruction T			l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	1		
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		<u> </u>	
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	<u> </u>
8 2	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	İ	[
	instructions) > TX,			1

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names and addresses

Χ

Х

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

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?

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X

Х

3 b

4a

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Total number of other employees paid over \$50,000

٠,

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Part VIII Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid Emplo	
3 Five highest-paid independent contractors for professional services (s	ee page 23 of 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 .	<u> </u>	▶ NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant of organizations and other beneficianes served, conferences convened, research papers product		Expenses
1 N/A	· · · · · · · · · · · · · · · · · · ·	
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 2	23 of the instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax ye		Amount
1 NONE		
2		
All other program-related investments See page 24 of the instructions		
3 NONE		
Total. Add lines 1 through 3		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	n foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1	
а	Average monthly fair market value of securities	1a	49,378.
b	Average of monthly cash balances	1b	76,842.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1 d	126,220.
е	Reduction claimed for blockage or other factors reported on lines 1a and		_
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cubironi lina 7 from lina 4 d	3	126,220.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	a f Alica Admiration N	4	1,893.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	124,327.
6	Minimum investment return. Enter 5% of line 5	6	6,216.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival foundations and certain foreign organizations check here ▶ □ and do not complete this p	te operating eart)	
1	Minimum investment return from Part X, line 6	1	6,216.
2a			-
b			
С		2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,216.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,216.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	6,216.
			
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	9,180.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the.		
a		3a	0.
b	Cash distribution test (attach the required schedule)	3b	Ō.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	9,180.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		,
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,180.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years	nemer the loundar	

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Pa	rt XIII Undistributed Income (see page 2			: - -	
٠,		(a)	(b) Years prior to 2008	(c) 2008	(d) 2009
1		Corpus	rears prior to 2006	2008	6,216.
	line 7				0,210.
2	Undistributed income, if any, as of the end of 2009				
a	Enter amount for 2008 only Total for pnor years 20_07_,20_06_,20_05_				
D	Excess distributions carryover, if any, to 2009:				· · · · · · · · · · · · · · · · · · ·
3	i 1994				
a b	From 2004				
	From 2006				
4	F 2007	,			
- -	From 2008				
f	Total of lines 3a through e	966.			
4	Qualifying distributions for 2009 from Part XII,				
·	line 4: ▶ \$ 9,180.				
а	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior years (Election				
_	required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election				
-	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				6,216.
е	Remaining amount distributed out of corpus	2,964.			
5	Excess distributions carryover applied to 2009	· ····			
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	3,930.			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,930.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed	······································			
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2010.				
7	Amounts treated as distributions out of corpus	***			
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	784.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	3,146.			
10	Analysis of line 9				
а	Excess from 2005				
b	Excess from 2006				
c	Excess from 2007		1		
d	Excess from 2008				
е	Excess from 2009 2,964.		1		

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Par	rt XIV Private Oper	ating Foundations (see page 27 of th	e instructions and Pa	art VII-A, question 9)	NOT APPLICAE
	If the foundation has i					
	foundation, and the ruling					
	Check box to indicate wh)(3) or 4942(j)(
٠.	Ondok box to maiodic wit	Tax year	private operating rour	Prior 3 years	1 43420	1 1 49420)(
	Enter the lesser of the ad-		(h) 2009		(4) 2006	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
	directly for active conduct of exempt activities. Subtract line					
	2d from lune 2c					
	Complete 3a, b, or c for the					
	"Assets" alternative test - enter					
	(1) Value of all assets					ĺ
	(2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-	1				
	ment return shown in Part X,					
	line 6 for each year listed			 		
	"Support" alternative test - enter (1) Total support other than					1
	gross investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),			1		
	or royalties)					
	(2) Support from general		-			
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(w)					
	port from an exempt					
	organization					
	```	ary Information (C	omplete this par	only if the found	lation had \$5,000	or more in ass
rai		during the year - se			iation nad \$5,000	or more in ass
	Information Regarding			1011 401101101,		
	List any managers of			ro than 20% of the total	al contributions receiv	od by the foundati
а	before the close of any	tax vear (but only if th	ev have contributed	more than \$5 000) (S	See section 507(d)(2))	ed by the loundati
	•		•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	R. THOMAS 8	GEORGAN W. RE	TIMETER			
	,					large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	on has a 10% or greate	r interest	
	N/A					
?	Information Regarding	g Contribution, Grant	Gift, Loan, Scholars	ship, etc., Programs:		
	Check here ► X If t	he foundation only r	nakes contributions	to preselected char	itable organizations a	nd does not acce
	unsolicited requests forganizations under oti	or funds If the foun	dation makes gifts,	grants, etc (see page	e 28 of the instruction	ns) to individuals
						
а	The name, address, a	na telephone number	or the person to who	m applications should b	oe addressed	
b	The form in which appl	lications should be sul	omitted and informati	ion and materials they	should include	
	Any automorphism des "		·			
C	Any submission deadlii	nes				

Part XV Supplementary Information (c 3 Grants and Contributions Paid Dur	ing the Year or App	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
A TITA CUMPNE O				
ATTACHMENT 9				
]	
			[ئى ،
			ļ	
		,		
Total	. <u> </u>		▶ 3a	7,310
b Approved for future payment				
		1		
		1		
Total			▶ 3b	

Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated.			Evaluded by	u contron 512 513 or 514	(e)
erner gross amounts unless otherwise indicated.	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	Related or exempt function income
1 Program service revenue	Business code		Exclusion code		(See page 28 of the instructions)
a					
b	<u> </u>			 	
d					
					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	28.	
Dividends and interest from securities			14	1,216.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory				<u> </u>	
Net income or (loss) from special events					
) Gross profit or (loss) from sales of inventory . $$.		<u> </u>			
Other revenue: a					
b	}				
c					
d					
e				1 244	
Subtotal Add columns (b), (d), and (e) B Total. Add line 12, columns (b), (d), and (e)				1,244.	
Line No. Explain below how each active the accomplishment of the for page 29 of the instructions.)					
			 	·	····
				·····	
			· · · · · · · · · · · · · · · · · · ·	····	
				·	· · · · · · · · · · · · · · · · · · ·
		NOT APPLICAE	BLE		
		<u></u>			
					
					
		······································			
					
	 -				
		· <u> </u>			
					
I					

Form	990-PF	(2009)				74-190	2119		Pa	ge 13
Ра	rt XVII	Information R Exempt Organ		fers To and	Transactions	s and Re	elationships With	Nonch	narit	able
1	ın se						organization described 27, relating to political		Yes	No
а	Trans	fers from the reporting for	undation to a nonchar	itable exempt organ	zation of					
	(1) C	ash						1a(1)		X
	(2) O	ther assets						1a(2)		X
b	Other	transactions								
										X
	(2) P	urchases of assets from a	nonchantable exempt	organization				1b(2)		X
	(3) R	ental of facilities, equipme	nt, or other assets					1b(3)		X
										<u>X</u>
										X
										X
C										X
d					-		(b) should always show			
			_		_		foundation received less			
	value	in any transaction or	sharing arrangemen	t, show in colur	nn (d) the valu	e of the	goods, other assets, or	services	s rec	:eived
(a)	Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organiz	ation (d) D	escription of	transfers, transactions, and sha	anng arran	geme	nts
		N/A			N/A	,				
									_	
	sectio	foundation directly or in 501(c) of the Code (others, complete the following	er than section 501(c)(x-exempt or	ganizations described in	Yes	s 🔼	No
		(a) Name of organization		(b) Type of orga	nızatıon		(c) Description of relation	ship		
						ļ				
				 		<u> </u>				
	Under belæf,	penalties of perjury, I declar it is true, correct, and compl	e that I have examined lete Declaration of prepa	this return, including arer (other than taxpi	j accompanying sci ayer or fiduciary) is	hedules and based on all	statements, and to the best information of which prepare	of my kn er has an	owled y knov	ge and wiedge
					1					
	_						- 			
er	- Si	gnature of officer or trustee			Date		Title Preparer's	idont-6	ınc	
Sign Here	Paid Preparer's Use Only	Preparer's signature	Puto E	Sac	Date // 0/	Check self-en	nployed ► page 30 of P00025	the instru	ture o	
1	Pa repa	Firm's name (or yours if	WERLEIN &				EIN ▶ 74-1907	314		
	₫ ⊃	self-employed), address,	3355 WEST	ALABAMA, S	UITE 900					
		and ZIP code	HOUSTON,	TX	7	7098	Phone no 713-9	961-55	544	

Form 990-PF (2009)

Phone no 713-961-5544

Form 8868

(Rev. April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

<u>ntemai Revenue Se</u>	rice rie a separate application for each feutifi.	
-	ling for an Automatic 3-Month Extension, complete only Part I and check this box ling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page	2 of this form)
Do not complet	e Part II unless you have already been granted an automatic 3-month extension on a previ	
	matic 3-Month Extension of Time. Only submit original (no copies needed).	
•	required to file Form 990-T and requesting an automatic 6-month extension - check this bo	ox and complete
	prations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 nme tax returns.	04 to request an extension of
one of the rel electronically i returns, or a co	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month autocurns noted below (6 months for a corporation required to file Form 990-T). However f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms to proposite or consolidated From 990-T. Instead, you must submit the fully completed and be details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Click	er, you cannot file Form 8868 990-BL, 6069, or 8870, group signed page 2 (Part II) of Form
Туре ог	Name of Exempt Organization	Employer Identification number
print	REITMEIER CHARITABLE FOUNDATION	74-1902119
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions. 16022 GORE GRASS CT	
filing your retum. See Instructions.	City, town or post office, state, and ZiP code. For a foreign address, see instructions. SPRING, TX 77379-2931	
Form 990 Form 990 Form 990 X Form 990	-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above) Form	n 4720 n 5227 n 6069 n 8870
Telephone If the organ If this is for for the whole of	are in the care of R. THOMAS REITMEIER No. 281 989-5764 FAX No. nization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN) aroup, check this box. If it is for part of the group, check this box.	
until	st an automatic 3-month (6 months for a corporation required to file Form 08/15, 2010, to file the exempt organization return for the organization return for. calendar year 2009 or	n 990-T) extension of time named above. The extension is
>	tax year beginning, and ending	· · · · · · · · · · · · · · · · · · ·
2 If this tax	year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any
	dable credits. See instructions.	3a \$ NONFE
•	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax policions and estimated tax policions.	ayments 3b \$ NONE
c Balance	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syste	
Caution. If you	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-E0	
for payment in	structions.	
For Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.	Farm 8868 (Rev. 4-2009)

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mn	RARR	flev.	4-2009)
01111		11104.	7-20031

Page 2

Note. O	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II annly complete Part II if you have already been granted an automatic 3-month extension on a previous	d check th ously filed F	s box orm 8868.	▶ 🗓
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Part II		no copies	needed).	
Type or print		Employer id $4-1902$	entification 119	number
File by the extended due date	16022 COPE CRASS COURT	For IRS use	only	
filing the return. Se instruction	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
Check	type of return to be filed (File a separate application for each return):			
☐ Form	n 990 🛛 Form 990-PF 🔲 Form 1041-A		Form 6069	
Form	n 990-BL	_	Form 8870	
-	n 990-EZ Form 990-T (trust other than above) Form 5227		0,,,,	
=	Do not complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly filed For	m 8868
		a provious	iy med rom	11 0000.
■ Ine b	ooks are in the care of ► TOM REITMEIER none No. ► 281-989-5764 FAX No. ► 281-251-9689	•		
•	organization does not have an office or place of business in the United States, check this b	OY		▶ □
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)			_
	whole group, check this box ▶ □ . If it is for part of the group, check this box			
	the names and EINs of all members the extension is for.	🗀	and attack	
		2010.		
4 Ir				
5 Fc	r calendar year 2009, or other tax year beginning, 20, and ending	<u> </u>	,	20
6 If	this tax year is for less than 12 months, check reason: Initial return Final return	Change in	n accounting	g period
7 St	ate in detail why you need the extension PERTINENT INFORMATION IN THE	CONTRO	TO OT	
	JTSIDE THIRD PARTIES HAS NOT BEEN RECEIVED TO DATE.			
A.	DDITIONAL EXTENSION OF TIME TO FILE IS RESPECTFULLY	REQUES'	ED.	
		·		
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,			MONT
_	ss any nonrefundable credits. See Instructions.	8a	\$	NONE
	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	timated tax payments made. Include any prior year overpayment allowed as a credit and any		•	
an	nount paid previously with Form 8868.	8b	\$	NONE
	tlance Due. Subtract line 8b from line 8a. include your payment with this form, or, if required, deposit th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.		\$	NONE
	Signature and Verification		· · · · · · · · · · · · · · · · · · ·	
Under pe	naities of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to	the best of m	y knowledge a	nd belief.
It is true,	correct, and complete, and that I am authorized to prepare this form.		-	
	$\mathcal{A} \sim 1$			
Signature	- Mayss THIB > CPA	Date ► (8/15/2	010
	, , ,	For	m 8868 (Re	v. 4-2009)

7010 0290 0000 0385 6618

CASH INVESTMENTS
CASH
EMPORARY
ON
INTEREST
1
, PART I
90PF
FORM 9

NET INVESTMENT INCOME	28.	28.
REVENUE AND EXPENSES PER BOOKS	28.	28.
		TOTAL
DESCRIPTION	FIDELITY	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	1,216.	1,216.
REVENUE AND EXPENSES PER BOOKS	1,216.	1,216.
		TOTAL
DESCRIPTION	FIDELITY DIVIDENDS	

.

FFFS
ACCOUNTING
ı
Н
PART
990PF,
FORM

CHARITABLE PURPOSES	1,832.	1,832.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME	1,832.	1,832.
REVENUE AND EXPENSES PER BOOKS	3,664.	3,664.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

TAXES	
l	
Н	
PART	
990PF,	
FORM	

NET TAVESTMENT	INCOME	14.	14.
REVENUE AND EXPENSES	PER BOOKS	14.	14.
	DESCRIPTION	FOREIGN INCOME TAX WITHELD	TOTALS

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- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

EXPENSES
PER BOOKS
38.

DESCRIPTION PUBLIC NOTICE

. 38 31 CHARITABLE PURPOSES

TOTALS

38.

ATTACHMENT 5

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PAGE 19

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REITMEIER CHARITABLE FOUNDATION FORM

ATTACHMENT 6	ENDING BOOK VALUE FMV	5,129. 4,624. 100. 1,722. 4,492. 5,497. 5,497.
FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION	RUSSELL EQUITY I CLASS I RUSSELL INTL FD CLASS I RUSSELL MONEY MARKET CLASS S RUSSELL EMERGING MARKETS S RUSSELL REAL ESTATE SECURITIES RUSSELL EQUITY Q CLASS I

52,318.

TOTALS

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

FAIR MARKET VALUE ADJUSTMENT

626.

TOTAL

626.

74-1902119

3 130

S EXPENSE ACCT AND OTHER ALLOWANCES	Ö	.0	.0	.0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS		.0	o	.0	0.
COMPENSATION	.0	.0	.0	Ö	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE PART-TIME	TRUSTEE PART-TIME	TRUSTEE PART-TIME	TRUSTEE PART-TIME	GRAND TOTALS
NAME AND ADDRESS	R. THOMAS REITMEIER 16022 GORE GRASS CT SPRING, TX 77379-2931	GEORGAN REITMEIER 16022 GORE GRASS CT SPRING, TX 77379-2931	R. TYLER REITMEIER 16022 GORE GRASS CT SPRING, TX 77379-2931	W. TRAYNOR REITMEIER 16022 GORE GRASS CT SPRING, TX 77379-2931	

74-1902119

ATTACHMENT 9

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BREAKAWAY MINISTRIES P.O. BOX 9727 COLLEGE STATION, TX 77842	NONE PUBLIC	GENERAL SUPPORT	500.
VARIOUS ORGANIZATIONS 21 GIFTS OF \$100 EACH DETAILS AVAILABLE UPON REQUEST	NONE PUBLIC	GENERAL SUPPORT	2,100
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DRIVE, #2400 ORLANDO, FL 32832-0100	NONE	GENERAL SUPPORT	4,710.

TOTAL CONTRIBUTIONS PAID

PAGE 23 ATTACHMENT 9

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