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Form. 990-PF '

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury

Treated as a Private Foundation

2009

OMB No 1545-0052

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service , 2009, and ending 20 For calendar year 2009, or tax year beginning Initial return of a former public charity G Check all that apply. Initial return Final return Amended return Address change A Employer Identification number Name of foundation Use the IRS BARLOCKER FOUNDATION 74-2395114 label. VILLIAM A. Otherwise, Number and street (or PO box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite print (480) 969 - 0244 849 S. 54TH CIRCLE or type. City or town, state, and ZIP code C If exempt application is pending, check here See Specific Instructions. MESA AZ 85206 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization. If private foundation status was Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation terminated under section I Fair market value of all assets at end of Accounting method. X Cash 507(b)(1)(A), check here If the foundation is in a 60-month Other (specify) year (from Part II, col. (c), line 16) termination under section (Part I, column (d) must be on cash basis.) 507(b)(1)(B), check here ▶\$ 243,744 Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), for charitable expenses per purposes (cash basis only) (c), & (d) may not necessarily equal the income income books amounts in column (a) (see instructions)) 5 Interest on savings and temp cash investments Dividends and interest from securities 19., 549 19,549 19,549 5 a Gross rents b Net rental income or (loss) -3,260 6 a Net gain/(loss) from sale of assets not on line 10 Ε b Gross sales price for all assets on line 6a 20,996 ٧ E 0 Capital gain net income (from Part IV, line 2) . N Net short-term capital gain 0 0 Income modifications Ε 10 a Gross sales less rtns & allowances 0 c Gross profit or (loss) (attach schedule) 650 650 650 Other income (attach schedule) . . #.1 Total. Add lines 1 through 11 16,944 20,204 20,204 12 Compensation of officers, directors, trustees, etc 13 Other employee salaries and wages. Ε R 15 Pension plans, employee benefits. . 16 a Legal fees (attach schedule) 2,415 2,415 2,415 **b** Accounting fees (attach schedule) #2 Nº Go c Other professional fees (attach schedule) Interest ... ₹ OF Taxes (attach schedule) (see instructions) Deprecia () and depletion Occupancy ... Š Travel conferences and neelings Printing and publications Other expenses (attach schedule). . . To a operation and administrative ≪ÎN 2,415 expenses. Add lines 13 through 23 2,415 2,415 0 Contributions, gifts, grants paid . . . 10,734 10,734 13,149 2,415 2,415 10,734 26 Total exp & disbursements. Add lines 24 and 25 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 3,795 b Net Investment Income (if neg., enter -0-) 17,789 c Adjusted net income (if neg , enter -0-) 17,789

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

Form 990-PF (2009)

Balance Sheets description column should be for only description by (see series) Galactic Sheets	Do	et 16	Balance Sheets description column should be for	Beginning of year	End	of year
2 Saverings and temporary cash investments 2, 778 10,021 10,021 3 Accounts recovable Less: allowance for doubful accts. ▶ 4 Pledges receivable Less: allowance for doubful accts. ▶ 5 Grants receivable Less: allowance for doubful accts. ▶ 5 Grants receivable in the second of the se		11 1 11	end-of-year amounts only. (See inst)	(a) Book Value	(b) Book Value	(c) Fair Market Value
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Less: allowance for doubtful accis. P 6 Grants receivable 7 9 Prepared expenses and other of discussions (attach schedule) (see the instructions) 8 Inventiones for sale or use 9 Prepared expenses and oblered charges 10 Investments — u. Opporate stock (attach schedule) # 3. 10 Investments — u. Opporate stock (attach schedule) # 3. 10 Investments — opporate stock (attach schedule) # 3. 11 Investments — opporate stock (attach schedule) # 3. 12 Investments — opporate stock (attach schedule) # 3. 13 Investments — opporate bonds (attach schedule) # 3. 14 Lanc, business — other (attach schedule) # 3. 15 Investments — other (attach schedule) # 5. 16 Total assets (pote completed by all filers — see the instructions. Assets of the complete dispersation (attach schedule) # 5. 16 Total assets (pote completed by all filers — see the instructions. Assets, open seep and the schedule) # 5. 17 Accounts payable and accorded expenses # 5. 18 Total flabilities (adenine 17 through 21. 19 Defered evenue # 5. 10 Total transitions that 100 to SFAS 117, check here # 5. 21 Total flabilities (adenine 17 through 21. 22 Other liabilities (adenine 17 through 21. 23 Total flabilities (adenine 17 through 21. 24 Uncentical of the schedule schedule schedule) # 5. 25 Total flabilities (adenine 17 through 31. 26 Pard—in or capital surplus, or land, bidg, and equipment fund and complete lines 27 through 31. 25 Cap Pard—in or capital surplus, or land, bidg, and equipment fund and complete lines 27 through 31. 26 Total reassets or fund balances (see the instructions) 225, 553 229, 348. 27 Total liabilities and net assets/fund balances (see the instructions) 225, 553 229, 348. 28 Total net assets or fund balances (see the instructions) 225, 553 229, 348. 29 Total net assets or fund balances (see the instructions) 225, 553 229, 348. 20 Total net assets or fund balances at each of year (line 4 minus kine 5) — Part II, column (b), kine 30 (must agree wi		4				
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disqualified persons (affach schedule) (see the instructions) 7 Other nores and lease (see see see see see see see see see		6	Receivables due from officers, directors, trustees, and other			
Part						
Less allowance for	Δ	7	Other notes and loans		•••••••••••••••••••••••••••••••••••••••	
8 Inventiones for sale or use			Less allowance for			
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10a Investments U.S. and state govt. obligations (attach sch) b Investments corporate stock (attach schedule)	T	9	· · · · · · · · · · · · · · · · · · ·		 · · · · · · · -	
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Investments corporate bonots (attach schedule)				96,874	98,092	124,969
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13 Investments other (attach schedule)		12	Investments mortgage loans			
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Instructions. Also, see page 1, item 1) 225,553 229,348 243,744		l '				-
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	_		· · · · · · · · · · · · · · · · · · ·	- Part II column (h) line		229 349
			- 			

	art IV Capital Gains a	and Losses for Tax on Inv	estment Incom	e		
		e kınd(s) of property sold (e.g., rea		(b) How acquired	(c) Date acquired	(d) Date sold
		use, or common stock, 200 shs. Mi	LC Co.)	P Purchase D Donation	(mo , day, yr.)	(mo., day, yr)
	See attachment	#6				
<u> </u>	· · · · · · · · · · · · · · · · · · ·		-	ļ		
				 		
d e				 		
_		(f) Depreciation allowed	(g) Cost or o	ther hase	(h) Gau	n or (loss)
	(e) Gross sales price	(or allowable)	plus expens			f) minus (g)
a						-
b						
<u>c</u>						
<u>d</u>	· · · · · -					
<u>е</u>				10/01/02		
	(I) F.M.V. as of 12/31/69	wing gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(k) Excess over col (of col (ı)	col. (k), but not	. (h) gain minus less than -0-) or rom col (h))
		45 01 12/01/05	0701 001 (j), ii wiiy		(.,,,
b	<u> </u>	4			· · ·	
c						
d						
е						
2	Capital gain net income or (ne	it capital loss) . If gain, a	llso enter in Part I, lir enter -0- in Part I, li	ne 7]	2	-3,260
	If gain, also enter in Part I, line	(loss) as defined in sections 1222(e.8, column (c) (see the instructions		· · → أ		_
	If (loss), enter -0- in Part I, line art V Qualification U	e 8 nder Section 4940(e) for F	Poduood Toy or		3	0
		ate foundations subject to the sect				
Was		e this part blank. section 4942 tax on the distributable qualify under section 4940(e). Do n			od?	Yes 🏻 No
1	Enter the appropriate amount	in each column for each year, see		l .		
	(a) Base period years		the instructions bef		ntries.	
	Calendar year (or tax year beg in)	(b) Adjusted qualifying distribut	ions		Dis	(d) tribution ratio divided by col (c))
	Calendar year (or tax year beg in) 2008 2007	, , ,	ions	ore making any e	Dis	tribution ratio
	Calendar year (or tax year beg in) 2008	, , ,	ions	ore making any e	Dis	tribution ratio
	Calendar year (or tax year beg in) 2008 2007	, , ,	ions	ore making any e	Dis	tribution ratio
	Calendar year (or tax year beg in) 2008 2007 2006	, , ,	ions	ore making any e	Dis	tribution ratio
	2008 2007 2006 2005 2004 Total of line 1, column (d)	Adjusted qualifying distribut	ions noncha	ore making any e (c) Net value of aritable-use assets	Dis (col (b)	tribution ratio
2 3	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for	Adjusted qualifying distribut	noncha	ore making any e (c) Net value of aritable-use assets	Col (b)	tribution ratio divided by col (c))
	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for of years the foundation has be	Adjusted qualifying distribut	he total on line 2 by	(c) (c) Net value of aritable-use assets 5, or by the number of the second sec	Col (b)	0.00000
3	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for of years the foundation has b Enter the net value of nonchar	Adjusted qualifying distribut the 5-year base period divide ti een in existence if less than 5 year aritable-use assets for 2009 from P	he total on line 2 by	(c) (c) Net value of aritable-use assets 5, or by the number of the second sec	2 Dis (col (b))	0.00000
3 4 5	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for of years the foundation has b Enter the net value of nonchar	Adjusted qualifying distribut the 5-year base period divide the seen in existence if less than 5 year aritable-use assets for 2009 from P	he total on line 2 by	ore making any e (c) (c) Net value of aritable-use assets 5, or by the numi	2 Der 3 4	0.00000
3 4 5	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for of years the foundation has b Enter the net value of nonchar Multiply line 4 by line 3 Enter 1% of net investment in	Adjusted qualifying distribut the 5-year base period divide the sen in existence if less than 5 year aritable-use assets for 2009 from P	he total on line 2 by s	ore making any e (c) (c) Net value of aritable-use assets 5, or by the numl	2 Dis (col (b))	0.000000 0.000000
3 4 5 6	Calendar year (or tax year beg in) 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for of years the foundation has b Enter the net value of nonchar Multiply line 4 by line 3 Enter 1% of net investment in Add lines 5 and 6 Enter qualifying distributions	Adjusted qualifying distribut the 5-year base period divide the teen in existence if less than 5 year earitable-use assets for 2009 from P	he total on line 2 by	ore making any e (c) (c) Net value of antable-use assets 5, or by the numl	2 Dis (col (b)) 2 Der 3 4 5 6 7 8	0.000000 0.000000 236,521 178 178

orm	990-PF'(2009) ' WILLIAM A. BARLOCKER FOUND 74-2395114			age 4
Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see the ins	struction	ons)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of ruling letter if necessary see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	.78
	here ▶ X and enter 1% of Part i, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)2			0
3	Add lines 1 and 2		1	.78
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		1	.78
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b	Exempt foreign organizations tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
đ	Backup withholding erroneously withheld			
	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		1	.78
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		Х
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for	1		3,7
	definition)?	1b		X
	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		:	v
	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation > \$ 0 (2) On foundation managers > \$ 0			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		:	
	on foundation managers \blacktriangleright \$ 0			
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	1	Х
	If "Yes," attach a detailed description of the activities.	-		1
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	1	Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	⊢—	N/A	$\overline{}$
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T			
	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?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the yr.? If "Yes," complete Part II, col. (c), & Part XV.	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	▶AZ			
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	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9	l	Ιx

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Did any persons become substantial contributors during tax year? If "Yes," attach a schedule listing their names

10

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Parl	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?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶See attachment #7 Telephone no ▶			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			ightharpoonup
	and enter the amount of tax-exempt interest received or accrued during the year			
Parl	t 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? Yes X No			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period		i	
	after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? N/A.	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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?			
	If "Yes," list the years . ▶ 20 , 20 , 20 , 20			
ь	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?			
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	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х
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		-PF(2009)WILLIAM A. BARLOCKE						Page 6			
Par	(VI	I–B Statements Regarding Activ	vities for Which	Form 4720 May Be	Required (continu	ıed)					
5 a	Dur	ring the year did the foundation pay or incur	any amount to			_					
	(1)	Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes	No		I			
	(2)	Influence the outcome of any specific pub	lic election (see sectio	n 4955); or to carry		_		I			
	on, directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No										
	(4)					-		1			
	` '	in section 509(a)(1), (2), or (3), or section			Yes 🛚	No		1			
	(5)	Provide for any purpose other than religion						I			
	educational purposes, or for the prevention of cruelty to children or animals?.										
b											
_		gulations section 53 4945 or in a current not				I/.A.	5b	Ť			
		ganizations relying on a current notice regard			•	·	55				
_	•		•		• • • • • • • • • • • • • • • • • • • •			ł			
C		ne answer is "Yes" to question 5a(4), does the			M / A D v ==	٦.,,		1			
		cause it maintained expenditure responsibilit			. N/A Yes	No		1			
		Yes," attach the statement required by Regu		• •				-			
6a		the foundation, during the year, receive an	•			a					
						No		 			
Ь	Did	the foundation, during the year, pay premit	ams, directly or indirec	ctly, on a personal benefi	t contract?		6b	X			
	If "	Yes" to 6b, file Form 8870.				_		1			
7a	At a	any time during the tax year, was the founda	ation a party to a prohi	ibited tax shelter transact	tion? Yes 🔀	No					
b	If y	es, did the foundation receive any proceeds	or have any net incoi	me attributable to the trai	nsaction?		7b	X			
Pa	rt V	III Information About Officers, and Contractors	Directors, Truste	es, Foundation Ma	anagers, Highly I	Paid E	mploy	ees,			
1	LIs	t all officers, directors, trustees, foundati	on managers and the	elr compensation (see t	he Instructions).						
		(a) Name and address	(b) Title, and avg hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit pla	ns ``'_	•	account,			
<u>C</u>		ttochmont #0	devoted to position	(ii not paid, citter o)	and deferred comp	. 01	ilei allo	Walles			
see	. c	attachment #8									
						-					
						İ					
2	Co If n	mpensation of five highest-paid employe	es (other than those	Included on line 1 s	ee the instructions).						
			(b) Title, and avg.	T	(d) Contributions to	, [
(6	a) Na	ame and address of each employee paid	hours per week	(c) Compensation	employee benefit			account,			
		more than \$50,000	devoted to position	(e) componsulation	plans and deferred compensation	ot	her allo	wances			
NOI	άĐ		<u> </u>		Compensation						
1401	.V 1										
				L		İ					
Tota	l nu	mber of other employees paid over \$50,000		.,			. >				

Form 990-PF'(2009) ' WILLIAM A. BARLOCKER FOUND '	74-2395114	Page 7
Part VIII Information About Officers, Directors, Trustees, Fo	oundation Managers, High	ly Paid Employees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see t		
(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		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1See attachment #9		
		10,734
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see the	instructions)	
Describe the two largest program-related investments made by the foundation du	ring the tax year on lines 1 and 2	Amount
1		
2		

▶

Form **990-PF** (2009)

All other program-related investments. See the instructions

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3

Total. Add lines 1 through 3

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign found see the instructions.)	dations,	ı
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes:		
а	Average monthly fair market value of securities	1a	124,969
b	Average of monthly cash balances	1b	6,400
c	Fair market value of all other assets (see the instructions)	1c	108,754
d	Total (add lines 1a, b, and c)	1d	240,123
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	240,123
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	the instructions)	4	3,602
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	236,521
6	Minimum investment return. Enter 5% of line 5	6	11,826
Pa	Ti XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating	<u> </u>	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	11,826
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	178
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,648
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	11,648
6	Deduction from distributable amount (see the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	11,648
Do	+ VII Qualifying Diatributions (see the methods)		
ra	rt XII Qualifying Distributions (see the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,734
b	Program-related investments total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	10,734
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see the instructions)	5	178_
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,556
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t	he four	ndation
	qualifies for the section 4940(e) reduction of tax in those years.		
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Pai	t XIII Undistributed Income (see	the instructions)		·	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				11,648
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005				
C	From 2006				
d	From 2007				
е	From 2008				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 10,734				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required see the instructions)				
c	Treated as distributions out of corpus				
	(Election required see the instructions)				
d	Applied to 2009 distributable amount				10,734
е	Remaining amount distributed out of corpus	1,059			
5	Excess distributions carryover applied to 2009	-			
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	1,059			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
c	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				
c	Subtract line 6c from line 6b Taxable				
	amount see the instructions				
e	Undistributed income for 2008. Subtract				
	line 4a from line 2a Taxable amount				
	see the instructions				
f	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2010				914
7	Amounts treated as distributions out of		· · · · · · · · · · · · · · · · · · ·		
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2004				
	not applied on line 5 or line 7 (see the				
	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	1,059			
10	Analysis of line 9	······································			
a	Excess from 2005				
t	Excess from 2006	1			
	Excess from 2007	1			
c	Excess from 2008	1			
	Excess from 2009	1	1		

See attachment 10 b The form in which applications should be submitted and information and materials they should include: See attachment 10 c Any submission deadlines: See attachment 10 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: See attachment TWF 33156 990PF10 Copyright Forms (Software Only) - 2009 TW Form 990-PF (2009)

Fart Av Supplementary information	(conunuea)			
3 Grants and Contributions Paid Dur	ing the Year or Ap	proved f	or Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
See attachment #11				
				i
	:			
		1		
Total	I	l	▶ 3a	10,734
b Approved for future payment	T			
		1		
	1			
	1			
Total			> 3b	

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Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by	section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income
	Business	Amount	Excl	Amount	(See the
Program service revenue:	code		code		instructions)
a					
b					
с					
d					
е				_	
1					
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments , ,			14	5	
4 Dividends and interest from securities			14	19,549	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	650	
8 Gain or (loss) from sales of assets other than inventory			14	-3,260	
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
С					
d					
е					
12 Subtotal Add columns (b), (d), and (e)		0		16,944	0
13 Total. Add line 12, columns (b), (d), and (e)				13	16,944
(See worksheet in line 13 instructions to verify calcula	tions.)				
Part XVI-B Relationship of Activities t	o the Accom	plishment of I	Exempt Pu	rposes	
Line No. Explain below how each activity for w					antly to the

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		Exempt Organi	zations					•				
1	Did th	he organization directly or	indirectly eng	age in any of the follow	wing with any	other org	anization o	described in s	ection		Yes	No
	501(0	c) of the Code (other than	section 501(c)(3) organizations) or i	n section 527	, relating 1	to political	organizations'	?			
а	Trans	sfers from the reporting for	undation to a	nonchantable exempt	organization	of						ĺ
	(1)	Cash							18	a(1)		X
	(2)	Other assets							18	1(2)		X
b	Other	r transactions:							ļ			
	(1)	Sales of assets to a nonch	arıtable exem	pt organization					11	o(1)		X
	(2) F	Purchases of assets from a	a noncharitab	le exempt organization	1				11	o(2)		X
	(3) F	Rental of facilities, equipme	ent, or other a	assets					<u>1</u> 1	o(3)		X
	(4) F	Reimbursement arrangeme	ents						1t	o(4)		Χ
		Loans or loan guarantees								o(5)		X
	(6) F	Performance of services or	r membership	or fundraising solicita	tions				1k	o(6)		X
c	Sharı	ng of facilities, equipment,	, mailing lists,	other assets, or paid e	employees					1c		Х
d		answer to any of the above										
		s, other assets, or services							value in a	ny trar	nsactio	n
	or sn	aring arrangement, show i	n column (a)	the value of the goods	s, otner asset	s, or servi	ces receive	ea.				
(a) L	ine no	(b) Amount involved (c) Name of no	ncharitable exempt or	ganızatıon (d	i) Descript	ion of transfe	ers, transactions	, and sharing	arrang	ements	
					1							
					1							
2 a	Is the	foundation directly or ind	rectly affiliate	d with, or related to, or	ne or more ta	x-exempt	organizati	ons described	d in			
		on 501(c) of the Code (oth					_		r	Yes	: X	No
b		es," complete the following		· // //								1
		(a) Name of organization	· · · · · · · · · · · · · · · · · · ·	(b) Type of o	rganization			(c) Description	n of relation	nship		
		,,						` <u>´</u>				
			ĺ									
			ĺ									
			ĺ									
	Under p	enalties of perjury, I declare th	at I have examin	ed this return, including ac	companying sch	hedules and	statements,	and to the best	of my knowle	dge an	d belief	f, it is
	true, co	rrect, and complete Declaratio	n or preparer (or	ner than taxpayer or tiduci	ary) is based on	1 all intormat	tion of which	n preparer has an	iy knowledge	ł .		
s	*	/ lust Sall	_		1 1	0-11-20	A Oh	TRUSTE	Е			
		nature of officer or trustee	<u></u>			Date	" —	Title				
G	, 5.9	7			Date		′		reparer's i	dentify	/ına	
·	Pald		,	$ \Lambda$ I	/	,	Check if	. □ l.	umber (se		•	ın.
н	Pre-	Preparer's 1	- / -	7 () A	11/0	/2010	self-empl	loyed -	he instructi	_		
E	par-	Preparer's signature	vry 7	13 Cayra	/// 4/	20/0		["		Jilaj		
RE	er's Use		STANL	EY F CARPEN	TER, PO	Ċ	' 	EIN ▶				
-	Only	Firm's name (or yours if self-employed),	<u> </u>	SO HIGLEY R	<u> </u>	100		Phone no.				
		address, and ZIP code	MESA,	AZ 85206				(480)39	6-242	8		
JVA	09	990PF13 TWF 33159		orms (Software Only) - 200	9 TW		1	, 100/00			·PF (20091
				.,								

SCHEDULE OF OTHER INCOME

Attachment 1: page 1 - 990-PF Page 1, Part I, Line 11 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** WILLIAM A. BARLOCKER FOUNDATION 74-2395114 Revenue Net Investment Adjusted Description of Other Income and Expenses Income Net Income RETURN OF PRIOR YEAR SCHOLARSHIP 650 650 650

Totals

650

650

650

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SCHEDULE OF ACCOUNTING FEES

Attachment 2: page 1 - 990-PF Page 1, Part I, Line 16b								
Open to Public								
Inspection	For calendar year 2009, or tax p	period beginning	, and (ending Employer Idea	Aldienties Number			
		TION						
		1	Net Investment					
		Amount	Income	Net Income	Charity			
Name of Organizat WILLIAM A.	ION BARLOCKER FOUNDA counting Category		Net Investment	Employer Ider 74-23951 Adjusted	Disbursements for			
	Total	2,415	2,415	2,415				

SCHEDULE OF INVESTMENTS - CORPORATE STOCKS

Attachment 3: page 1 - 990-PF Page 2, Part II, Line 10b Open to Public Inspection For calendar year 2009, or tax period beginning , and ending **Employer Identification Number** Name of Organization WILLIAM A. BARLOCKER FOUNDATION 74-2395114 FMV at Fair Market Value Cost Book Value **Description of Property** Year End X MUTUAL FUNDS-EDWARD JONES 88,120 98,047 US BANK STOCK Х 36,849 45 Total 98,092 124,969

SCHEDULE OF INVESTMENTS - CORPORATE BONDS

Attachment	t 4: page 1 - 990-PF Page 2,	Part II	[, Line	10c	
Open to Public		-			
Inspection	For calendar year 2009, or tax period beginning		, and er	nding	
Name of Organiza				Employer Iden	tification Number
WILLIAM A	. BARLOCKER FOUNDATION			74-23951	14
	Description of Property	Cost	FMV at Year End	Book Value	Fair Market Value
CORP BONDS	S - EDWARD JONES	X	7.500	83,573	70,556
		1			
		<u> </u>			
			Total	02 572	70 556

Total

83,573

SCHEDULE OF INVESTMENTS - OTHERS

Attachment 5: page 1 - 990-PF Page 2, Part II, Line 13 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending **Employer Identification Number** Name of Organization WILLIAM A. BARLOCKER FOUNDATION 74-2395114 FMV at Cost Book Value Fair Market Value Description Year End FNMA/FHLM-EDWARD JONES X 37,662 38,198 Total 37,662 38,198

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PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Attachment 6: page 1 - 990-PF Page 3, Part IV, line 1 Open to Public Inspection For calendar year 2009 or tax period beginning , and ending Name of Organization **Employer Identification Number** WILLIAM A. BARLOCKER FOUNDATION 74-2395114 (a) List and describe the kind(s) of property sold (e.g., real estate, (b) How acquired (c) Date acquired (d) Date sold P -- Purchase D -- Donation 2-story brick warehouse, or common stock, 200 shs MLC Co.) (mo., day, yr.) (mo, day, yr.) 1 CITIGROUP Ρ 06-15-2004|10-07-2009 2 WASH MUTUAL MTG Ρ 07-14-2008|12-01-2009 3 FNMA/FHLM P 06-15-2006|12-31-2009 (g) Cost or other basis (e) Gross sales price (f) Depreciation allowed (h) Gain or (loss) (or allowable) plus expense of sale (e) plus (f) minus (g) $\overline{1}$ 4,775 8,057 -3,282 2 5,000 4,878 122 3 11,221 11,321 -100 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus (i) F.M V. as of 12/31/69 (j) Adjusted basis (k) Excess if col. (i) col (k), but not less than -0-) or as of 12/31/69 over col (j), if any Losses (from col (h)) $\overline{1}$ -3,282 2 122 3 -100

BOOKS ARE IN CARE OF

Attachment	7 - 990-PF Page 5, Part VII-A	, Line 14	
Open to Public			
Inspection	For calendar year 2009, or tax period beginning	, and ending	·
Name of Organizati WILLIAM A.	on BARLOCKER FOUNDATION		yer Identification Number 395114
Part VII-A - Line 14			
Individual Name . or Business Name.		JUSTIN SMITH	
Street Address .		849 S. 54TH CIRCLE	
U S Address: Zip code	85206 City MESA	State AZ	
or Foreign Address	Oly PLOA	State A2	
City			
Province or	State		
Country .			<u> </u>
Postal code			
Phone Num	ber		(480)641-1276
Fax Numbe	r		
			

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

	8: page 1 -	990-PF Page 6,	Part VIII				
Open to Public			<u> </u>				
Inspection		, or tax period beginning	, and	ending	<u> </u>		
Name of Organizat					Employer Identification Number		
	BARLOCKER FO	(B) Title and Average	(C) Compensation (If	74 - 23 9 5 1 (D) Cont to Employee	(E) Expense Account		
(A) N	ame and Address	Hrs. per Week	not paid, enter 0)	Ben Plans & Def Comp			
JUSTIN SMI	TH	CHAIRMAN	not paid, circo o	Bon Figure & Bon Comp	a outor / movarious		
849 S. 54T		0.25					
MESA, AZ 8	35206		0	0	0		
				1			
				1			
				[

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

Attachment 9: page 1 - 990-PF Page 7, Part IX-A, Line 1

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

Name of Organization Employer Identification Number 74-2395114

Charitable Activity

SCHOOL SCHOLARSHIPS AWARDED TO STUDENTS MEETING PRE-DETERMINED QUALIFICATIONS. SEE ATTACHED LISTING OF STUDENT RECIPIENTS.

APPLICATION SUBMISSION INFORMATION

	. Gu	Employer Identification Number $4-2395114$	Restrictions on Awards	NONE	09_EOPFGR01L
	and ending	Employer identifi 74 - 2395114	Submission Deadlines	AUGUST 1ST AND DECEMBER 1ST	
10, Part XV, Line 2	For Calendar year 2009, or tax year period beginning		Info and Materials Included	GRADES, FINANCIAL AUGUST 1ST AL ABILITY, YEAR IN SCHOOLDECEMBER 1ST	
990-PF Page	For Calendar year 20	FOUNDATION	Phone Number	480-969-0244	09 TW L0819F
Attachment 10: page 1	oi ldr	Name of Organization WILLIAM A. BARLOCKER	Name	JUSTIN SMITH 849 S. 54TH CIRCLE Mesa AZ 85206	JVA Copyright Forms (Software Only) - 2009 TW

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 11: page 1 990-PF Page 11, Part XV Line 3a Open to Pu

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

Name of Organization

Employer Identification Number

WILLIAM A. BARLOCKER FOU	NDATION			74-2395114		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient				
JARED B. MUSSER	2ND COUSIN		COLLEGE TUITION			
1063 NORTH 100 WEST	ONCE REMOVED			600		
Farmington UT 84025				600		
C.J. SMITH	1ST COUSIN		COLLEGE TUITION			
1123 NORTH MIRAMAR				200		
Mesa AZ 85213	1 CT COLICIA			200		
TRAVIS KAY	1ST COUSIN		COLLEGE TUITION			
4008 E GLADE CIRCLE				600		
Mesa AZ 85206	OND COLICEN		COLLEGE WILLIAM	600		
CIARA WILLIAMS	2ND COUSIN		COLLEGE TUITION			
21073 SE LANSING LANE				600		
Damascus OR 97089	C T CERTIFIC		COLLEGE WHITELON			
CHANDA SMITH	SISTER		COLLEGE TUITION			
841 S 54TH CIRCLE	1			600		
Mesa AZ 85206	2ND COUSIN		COLLEGE TUITION			
JOSHUA KREITZER	ONCE REMOVED		COLLEGE TOTTION			
174 EAST 300 NORTH	DINCE REMOVED	1		400		
Washington UT 84780	1ST COUSIN		COLLEGE TUITION	,		
LENA NOBLE 1053 E 9TH AVE	ISI COUSIN		COLLEGE TOTTION	'		
				600		
Mesa AZ 85204	2ND COUSIN		COLLEGE TUITION			
MARILLA LEISHMAN	ZND COUSIN		COLLEGE TOTTION	'		
3025 NORTH 250 EAST Provo UT 84604				600		
TERRY DILLON	2ND COUSIN		COLLEGE TUITION)		
1378 WEST 1170 NORTH	ZND COUSIN		CODDEGE TOTTION	'		
Farmington UT 84025				600		
DAVIN SMITH	BROTHER		COLLEGE TUITION			
841 S 54TH CIRCLE	BROTTIBLE					
Mesa AZ 85206				600		
NATHAN SMITH	BROTHER		COLLEGE TUITION	l l		
841 S 54TH CIRCLE	BROTTIER					
Mesa AZ 85206				400		
NICOLE KELLOGG	2ND COUSIN		COLLEGE TUITION	l l		
308 WEST JORDAN	END COODIN		0022202 1011101			
Clovis CA 93611				600		
JAMES KREITZER	2ND COUSIN		COLLEGE TUITION			
174 EAST 300 NORTH	ONCE REMOVED			1		
Washington UT 84780	01102 112110 1 2			600		
KACEE DILLON	2ND COUSIN		COLLEGE TUITION			
1378 WEST 1170 NORTH						
Farmington UT 84025				600		
TAV TERRY	2ND COUSIN		COLLEGE TUITION	i i		
646 NORTH 1050 WEST						
St. George UT 84770				400		
BRADY MORONEZ	2ND COUSIN		COLLEGE TUITION	•		
39583 NORTH LUKE LANE						
Queen Creek AZ 85242		<u></u>		150		
		· · · · ·		8,150		

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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

Open to Pu

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

Name of Organization
WILLIAM A. BARLOCKER FOUNDATION

Employer Identification Number

74-2395114

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
HUNTER SMITH	1ST COUSIN		COLLEGE TUITION	
1123 N MIRAMAR				250
Mesa AZ 85213	1 CT COLLOTN		COLUMN THE TON	352
HAYDEN SMITH	1ST COUSIN		COLLEGE TUITION	
1123 N MIRAMAR Mesa AZ 85213				352
BARRETT SMITH	BROTHER		COLLEGE TUITION	332
841 S 54TH CIRCLE				
Mesa AZ 85206				200
CJ SMITH	1ST COUSIN		COLLEGE TUITION	
1123 N MIRAMAR				4.0.0
Mesa AZ 85213	OND COLLECTIVE		COLLEGE WILLETON	400
JOSHUA BARLOCKER	2ND COUSIN		COLLEGE TUITION	
308 WEST JORDAN Clovis CA 93611				280
JEFFREY TERRY	2ND COUSIN		COLLEGE TUITION	200
1242 EAST 800 NORTH				
Spanish Fork UT 84660				400
ADAM MUSSER	2ND COUSIN		COLLEGE TUITION	
1063 NORTH 1100 WEST	ONCE REMOVED			
Farmington UT 84025				600
		L		2 584

2009 DETAIL STATEMENTS

	WILLIAM A. BARLOCKER FOUNDATIO 74-2395114		Page 1
-	STATEMENT #1 - Dividends (990-PF PG 1 Line 4(b))	-	
	EDWARD JONES - DIV	3,121 7,637 8,791	
	TOTAL CARRIED TO 990-PF PG 1 Line 4(b)		19,549

Form 8868 (F	Rev 4-2009)			Page 2	
 If you are 	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	юх		. ▶ X	
Note. Only c	omplete 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 co	opies r	needed)		
Type or	Name of Exempt Organization En	ployer Identification number			
print	WILLIAM A. BARLOCKER FOUNDATION 74	-23	-2395114 r IRS use only		
File by the extended due date for	Number, street, and room or suite no. If a PO box, see instructions. 841 S. 54TH CIRCLE	r IRS ı			
filing the return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see inst. MESA AZ 85206				
	of return to be filed (File a separate application for each return)			······································	
Form 990	☑ Form 990-PF ☐ Form 1041-A			Form 6069	
Form 990-	-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720			Form 8870	
Form 990			'		
	ot complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form	8868.	
	are in the care of ▶ See attachment #1		-		
Telephone			_		
•	inization does not have an office or place of business in the United States, check this box			▶∏	
_	r a Group Return, enter the organization's four digit Group Exemption Number (GEN)			If this is	
	group, check this box ▶ If it is for part of the group, check this box ▶ an	d attac			
	ilNs of all members the extension is for.				
	est an additional 3-month extension of time until NOVEMBER 15 , 201	0.			
	endar year 2009, or other tax year beginning, 20, and ending			. 20 .	
	ax year is for less than 12 months, check reason: Initial return Final return Change	in acco	ounting s	·	
				RMATION	
	· ·				
8a If this a	upplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	undable credits. See instructions.	8a	\$	0	
b If this a	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				
tax pay	rments made. Include any prior year overpayment allowed as a credit and any amount paid		}		
previou	usly with Form 8868.	8b	\$	0	
c Balanc	e Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit				
with FT	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0	
	Signature and Verification	•			
	ies of perjury, I declare that I have examined this form, including accompanying schedules and statem nd belief, it is true, correct, and complete, and that I am authorized to prepare this form.	ents, a	and to th	e best of my	
	AL O A			0/. 1	
Signature >	Starts 7. (au Title DCPA	C	ate ►	94/2011	
	BBS82 TWE 21328 Converted Forms (Sol			8 (Rev 4-2009)	

