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Department of the Treasury

## **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

יט וט	alen	enue Service Note. The foundation may be dar year 2009, or tax year beginning,	be able to use a copy of this	and ending	rung requirements.	
_		all that apply: Initial return	Initial return of a fo		Final retur	n
		Amended return	Address chang	· —	Name change	"
	45 A I	Name of foundation			A Employer identification	on number
	the l	HARLAN AND AMY KORENV	AES FAMILY		Campioyor roomanoani	
	erwis		B. KORENVAE	S	75-290269	1
-	rint	Number and street (or P O box number if mail is not de		Room/suite	B Telephone number	
	type	Daga I mul Dane		İ	214/219-0	522
	Spec	I CAV OF IOWA STATE AND ZIP COME			C If exemption application is	pending, check here
1511	uctio	DALLAS, TX 75220			D 1. Foreign organization	
CI	neck	type of organization: $X$ Section 501(c)(3) ex	empt private foundation		2 Foreign organizations in check here and attach of	neeting the 85% test, computation
_	Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	E If private foundation st	atus was terminated
Far	r ma	rket value of all assets at end of year   J   Accounti	-	Accrual	under section 507(b)(	1)(A), check here
		Part II, col (c), line 16)	her (specify)	<del></del>	F If the foundation is in a	a 60-month termination
▶		9,816,696. (Part I, colu	mn (d) must be on cash b	pasis)	under section 507(b)(	4.00
<sup>2</sup> а	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	9,000,000.		N/A	
	_	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	1,283.	1,261.		STATEMENT 1
		Dividends and interest from securities	9,133.	9,133.	ļ	STATEMENT 2
	5a	Gross rents				
	_	Net rental income or (loss)				
<u>a</u>	_	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				<del>-</del>
Hevenue	0	assets on line 6a		0.		
e		Capital gain net income (from Part IV, line 2)  Net short-term capital gain				<del> </del>
			<del></del>		<del>                                     </del>	<del> </del>
-{	40-	Gross sales less returns				<del> </del>
		and allowances Less Cost of goods sold	100			
		Gross profit or (1955) NOV 1 6 2010		<del></del>		
		Other income	35	····		
	12	Total Add lines I through 11 FAI 115	9,010,416.	10,394.		
Ţ	13	Compensation of officers, directors, trustees, etc.	0.	0.		0
		Other employee salaries and wages				
s		Pension plans, employee benefits				
OΙ		Legal fees				
be		Accounting fees				
וֹנ		Other professional fees		-		-
<u> </u>		Interest	411			<del> </del>
Administrative Expens		Taxes STMT 3	411.	0.		0
<u>ا</u>		Depreciation and depletion		····	-	
		Occupancy Travel, conferences, and meetings				
- 1		Printing and publications	<del>-</del>		<del> </del>	
ā		Other expenses			<u> </u>	+
ו⊇ו		Total operating and administrative				
ĕ		expenses Add lines 13 through 23	411.	0.		0
5		Contributions, gifts, grants paid	125,000.			125,000
- 1		Total expenses and disbursements				
		Add lines 24 and 25	125,411.	0.	,	125,000
		Subtract line 26 from line 12:				
١	a	Excess of revenue over expenses and disbursements	8,885,005.			
•	h	Net investment income (if negative, enter -0-)		10,394.		
		Adjusted net income (if negative, enter -0-)			N/A	

HARLAN AND AMY KORENVAES FAMILY

For	m 99	0-PF (2009) FOUNDATION C/O HARLAN B.	KORENVAES	75-2	2902691 Page 2
ГР	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
_		Column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	691,773.	9,570,009.	9,570,009.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable >			
	_	Less: allowance for doubtful accounts ▶			<del></del>
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable			
	_	Less: allowance for doubtful accounts			
ets		Inventories for sale or use		1 560	1 560
Assets	ľ	Prepaid expenses and deferred charges		1,769.	1,769.
_		Investments - U.S. and state government obligations	700 010	700 010	107 020
	l	Investments - corporate stock STMT 4	792,912.	792,912.	197,238.
	l	Investments - corporate bonds			<del>- ,</del>
	וו	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	١	Investments - mortgage loans	C4 400	C 4 400	47 600
	1	Investments - other STMT 5	64,490.	64,490.	47,680.
	14	Land, buildings, and equipment: basis	į		
	45	Less accumulated depreciation			
	13	Other assets (describe )			
	16	Total assets (to be completed by all filers)	1 5/19 175	10,429,180.	9,816,696.
_	-	Accounts payable and accrued expenses	1,545,175.	10,425,100.	2,010,030.
	18	Grants payable	5,000.		
to.	19	Deferred revenue	3,000.		
Liabilities	ı	Loans from officers, directors, trustees, and other disqualified persons			
ğ	21				
Ë		Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	5,000.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
çes	24	Unrestricted			
Fund Balances	25	Temporarily restricted			
Ba	26	Permanently restricted			
Pun		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0.	0.	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	1,544,175.	10,429,180.	
Š	30	Total net assets or fund balances	1,544,175.	10,429,180.	
			1 540 175	10 400 100	
_		Total liabilities and net assets/fund balances	1,549,175.	10,429,180.	
P	<u>art</u>	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
-		st agree with end-of-year figure reported on prior year's return)		1	1,544,175.
2	-	r amount from Part I, line 27a		2	8,885,005.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	10,429,180.
5	Decr	eases not included in line 2 (itemize)			0.
6	<u>Tota</u>	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	10,429,180.
					Form <b>990-PF</b> (2009)

Part IV Capital Gains ar	nd Losses for Tax on Ir	nvestment	Income					
(a) List and describ 2-story brick ware	e the kind(s) of property sold (e.g house; or common stock, 200 sh	., real estate, s. MLC Co.)		(b) P D	How acquired - Purchase - Donation	(c) Date ac (mo., day	cquired y, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NON	E			ļ				
<u>C</u>		_ <del></del>		-				<del></del>
d e				┼				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or ( (e) plus (f) mil  (l) Gains (Col. (h) col. (k), but not less Losses (from col. (k), but not less Losses (from col. (b) col. (b) col. (b) col. (col. (col. (b) col. (col.		
a								
b								
d						•		
e								
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69		(1)	Gains (Co	l. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			(k), but no	ot less thar	1 -0-) <b>or</b>
a								
b						<del></del>		
C	-341							
d								
e	(		~~	_				
2 Capital gain net income or (net capi	, (1.000), 0.110.	- ın Part İ, line		}	2			
3 Net short-term capital gain or (loss) if gain, also enter in Part I, line 8, co. If (loss), enter -0- in Part I, line 8	olumn (c).	.,		}	3			
Part V Qualification Un	der Section 4940(e) for	Reduced	l Tax on Net	lnv	estment Inc	ome		
(For optional use by domestic private for	oundations subject to the section	4940(a) tax on	net investment ir	ncom	e.)			
If section 4940(d)(2) applies, leave this	part blank.							
Was the foundation liable for the sectio	n 4942 tay on the distributable an	nount of any ve	ear in the hace ne	rınd?				Yes X No
If "Yes," the foundation does not qualify			=	i iou				
1 Enter the appropriate amount in each				ies.				
(a) Base period years	(b)			(c)			Distrib	(d) aution ratio
Calendar year (or tax year beginning				oncha	ritable-use assets		col. (b) dıv	ided by col (c))
2008		5,781.		$\frac{1}{1}$	,350,888 ,941,451			.189343
2007 2006		0,569.			,941,45 <u>1</u> 867,985	_		.273285 .142553
2005		8,184.			723,546			.190982
2004		6,580.			899,523			.251889
	•							
2 Total of line 1, column (d)						2		1.048052
3 Average distribution ratio for the 5-		on line 2 by 5,	or by the number	r of ye	ears			
the foundation has been in existenc	e if less than 5 years					3		.209610
4 Enter the net value of noncharitable	-use assets for 2009 from Part X,	line 5				4		1,768,844.
5 Multiply line 4 by line 3						5	······································	370,767.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		104.
7 Add lines 5 and 6						7		370,871
8 Enter qualifying distributions from F						8		125,000
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	e 1b, and comp	olete that part usir	ng a 1	% tax rate.			

HARLAN AND AMY KORENVAES FAMILY Form 990-PF (2009) FOUNDATION C/O HARLAN B. KORENVAES 75-2902691 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here 
and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 208. 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-) 208. 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-208. 5 6 Credits/Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 1,769 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 1,769. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ 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 1,561 10 1,561. Refunded 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax 11 Part VII-A | Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? 1c X d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 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? Х X 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) TX 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) Х of each state as required by General Instruction G? If "No," attach explanation 8b 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

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

HARLAN AND AMY KORENVAES FAMILY Form 990-PF (2009) Page 5 FOUNDATION C/O HARLAN B. KORENVAES 75-2902691 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? X 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address N/A Telephone no.  $\triangleright 214.871.8616$ 14 The books are in care of ► HARLAN B. KORENVAES Located at ► 5423 PARK LANE, DALLAS, TX ZIP+4 ►75220 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 N/A Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (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 Yes X No 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 after Yes X No 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 N/A section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here 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? X 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? Yes X No If "Yes," list the years ▶, 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 N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2009) 3b

923541

X

4a

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

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

. HARLAN AND AMY KORENVAES				
Form 990:PF (2009) FOUNDATION C/O HARLAN B.			<u>75-290269</u>	<u> 1 Page 6</u>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:			_	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	14945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y.	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?	, , ,		s X No	[
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru		ŭ	N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?		/A □ Y€	s No	
If "Yes," attach the statement required by Regulations section 53.4945		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	· ·			
a personal benefit contract?	pay promiums on		s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?		6	b X
If "Yes" to 6b, file Form 8870.	ersonal Delicht contract.		<u>-</u>	- 20
•	haltar transaction?		X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L IX.6	N/A 7	
b If yes, did the foundation receive any proceeds or have any net income attribute Information About Officers, Directors, Trusto		nagore Highly		<u>u (                                   </u>
Part VIII Paid Employees, and Contractors	ees, roundation Ma	magers, riigin	<b>'</b>	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
HARLAN B. KORENVAES	CHAIRMAN & PR	ESIDENT		
5423 PARK LANE				
DALLAS, TX 75220	0.00	0.	0.	0.
AMY B. KORENVAES	DIRECTOR & SE	CRETARY		
5423 PARK LANE			}	
DALLAS, TX 75220	0.00	0.	0.	_0.
	DIRECTOR			
33 MACY AVENUE				
WHITE PLAINS, NE YORK 10605	0.00	0.	0.	0.
	0,00			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(-) Name and address of each accelerate and mark than 600 000	(b) Title, and average hours per week	( ) 00	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	nours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
			\	
		^***		
	-			
			1	
			<del></del>	
			]	
Total number of other employees paid over \$50,000	<u> </u>		<u></u>	0
			Form 9	90-PF (2009)

HARLAN AND AMY KORENVAES FAMILY FORM 990-PF (2009) FOUNDATION C/O HARLAN B. KORENVA	ES75-2902	691 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)		051
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	į
		<u> </u>
	-	
Total number of others receiving over \$50,000 for professional services	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist	tical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers prod	luced, etc.	
1 <u>N/A</u>		
^		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A	11103 1 4110 2.	/ induit
1		
2		

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

Р	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
$\frac{-}{1}$	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	Γ Τ	
a	Average monthly fair market value of securities	1a	267.264.
b	Average of monthly cash balances	1b	267,264. 1,528,517.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,795,781.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,795,781.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,937.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,768,844.
6	Minimum investment return. Enter 5% of line 5	6	88,442.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	d certaii	1
1	Minimum investment return from Part X, line 6	1	88,442.
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.)		
C	Add lines 2a and 2b	2c	208.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	88,234.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	88,234.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	88,234.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	7,,	1a	125,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	··
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	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	125,000.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	125,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies	for the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				88,234.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
ь Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2009:		· <del>-</del>		
a From 2004 104,341.				
b From 2005 138,377.				
c From 2006 80,867.				
dFrom 2007 434,358.	,		Ti.	1
e From 2008 188,675.				
f Total of lines 3a through e	946,618.			
4 Qualifying distributions for 2009 from	ł			
Part XII, line 4: $\blacktriangleright$ \$ 125,000.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				88,234.
e Remaining amount distributed out of corpus	36,766.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
	983,384.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	303,304.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
· · · · · · · · · · · · · · · · · · ·				
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line		0.		_
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				İ
be distributed in 2010				0.
7 Amounts treated as distributions out of		· -		-
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004		<del></del>		
not applied on line 5 or line 7	104,341.			
9 Excess distributions carryover to 2010.		,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Subtract lines 7 and 8 from line 6a	879,043.			
10 Analysis of line 9.				·
a Excess from 2005138,377.				
b Excess from 2006 80,867.				
c Excess from 2007 434,358.				
d Excess from 2008 188,675.				
e Excess from 2009 36,766.				
				Form <b>990-PF</b> (2009)

HARLAN AND AMY KORENVAES FAMILY

Form 990-PF (2009) FOUNDAT:	ION C/O HAR	LAN B. KOR	ENVAES	75-29	902691 Page 10
Part XIV Private Operating Fo				N/A	<del></del>
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		•	▶ └	<del>-</del>	<del></del>
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years	(4) 2006	/a) Tatal
income from Part I or the minimum	(a) 2009	(D) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,					
line 4 for each year listed			<u> </u>		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	<del></del>	·			
e Qualifying distributions made directly		•			
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	· · · · · · · · · · · · · · · · · · ·				
(2) 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					
c "Support" alternative test - enter:	•				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during the	ne year-see the	instructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed m			itributions received by th	ne foundation before the ci	ose of any tax
SEE STATEMENT 6	, ,				
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large por	tion of the ownership of a	partnership or
NONE	a . o .v o. groutor mitoro	<del></del>			
2 Information Regarding Contribution	on, Grant, Gift Loan	Scholarship etc. I	Programs		
Check here ► X if the foundation or the foundation makes gifts, grants, etc. (	nly makes contributions	to preselected charitable	e organizations and does	s not accept unsolicited rec	quests for funds. If
a The name, address, and telephone numb			<u>-</u>	complete items Za, D, G, al	10 d.
a The hame, address, and telephone humb	er of the person to who	n applications should b	c auui csscu.		
b The form in which applications should be	e submitted and informa	tion and materials they	should include;		
c Any submission deadlines:			<u>-</u>		
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable field	s, kınds of ınstıtutıons, o	r other factors	
	<del>-</del> -		ŕ		
923601 02-02-10		_			Form 990- DE (2000)

923611 02-02-10

75-2902691 Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution **Amount** Name and address (home or business) recipient a Paid during the year SEE STATEMENT 7 125,000. **▶** 3a Total b Approved for future payment NONE 0. Total

Form 990-PF (2009) Part XVI-A

923621 02-02-10

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		business income		by section 512, 513, or 514	(e)
1 Program service revenue:	Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c				,	
d					
e	_				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,261. 9,133.	22
4 Dividends and interest from securities			14	9,133.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		····			
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	1 1			,	
b	1				
c	1	· · · · · · · · · · · · · · · · · · ·	+ +		
d	_				
e	_		+ +-	10 204	
2 Subtotal Add columns (b), (d), and (e)		0	•	10,394.	22
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	. 1			13	10,416
Part XVI-B Relationship of Activitie	·	mplishment of E	vomnt F	)urnana	
		-	<u>-</u>		
Explain below how each activity for which in the foundation's exempt purposes (other the	income is reported in han by providing fun	column (e) of Part XVI-	A contribute	d importantly to the accomp	lishment of
• The restriction of the reperpendent of the restriction of the restri	nan by providing tan	do for odon purposasj.			
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Page 13

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

1	Did th	ie organization directly or indir	ectly engage in any of the following	n with any c	ther organiza	tion described in	cartin	n 501/c\ of	F		Yes	No
•			(3) organizations) or in section 52				JUULIO	11 30 1(0) 01		-		
а			ation to a noncharitable exempt or	_		amzanons.						
Ī	(1) (		and to a nonenanable exempt of	gamzation o	•					1a(1)		X
		Other assets								1a(1)		X
ь		transactions:								10(2)		
Ī	-	Sales of assets to a noncharitat	ble exempt organization							1b(1)	1	<u>X</u>
			ncharitable exempt organization							1b(2)		X
		Rental of facilities, equipment, o	• •							1b(3)		<u>x</u>
		Reimbursement arrangements								1b(4)		X
		oans or loan guarantees								1b(5)		X
		_	mbership or fundraising solicitatio	กร						1b(6)		X
c			iling lists, other assets, or paid em							1c		X X X
d			"Yes," complete the following sche		n (b) should	alwavs show the	fair ma	rket value	of the o		ets.	
			oundation. If the foundation receiv								,	
			other assets, or services received.			ŕ		Ū	Ū	ŕ		
a):	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt org	janization	(d) Desc	ription o	f transfers, tr	ansaction	ons, and sharing ar	rangeme	nts
			N/A									
				•								
											-	
					-							
										·		
					, ,						·	
						<u> </u>						
2a	Is the	foundation directly or indirect	lly affiliated with, or related to, one	e or more tax	-exempt orga	nizations describ	oed					
	ın sed	ction 501(c) of the Code (other	than section 501(c)(3)) or in sec	tion 527?						Yes	X	No
b	If "Ye	s," complete the following sche	edule.	<del>,</del> .								
	_	(a) Name of org	anization	<b>(b)</b> Type o	f organization	1	(0	) Descripti	on of r	elationship		
		N/A										
		· · · · · · · · · · · · · · · · · · ·							<u> </u>	<del></del>		
		<del></del>										
_												
_												
			ave examined this return, including according the return taxpayer or fiduciary) is based on					ny knowledg	e and b	elief, it is true, corr	ect,	
				1	/ 1	1/	-	7 -				
, l	<b>_</b>				10 29 10		rec	tor				
<u>.</u>	<b>y</b> Si	gnature of officer or trustee		Da	te	Title	10-	ale of		Description 1		
	o _	Preparer's	16			Date	Che   self-			Preparer's identi		
5	Paid Preparer's Use Only	signature	es 3. Bus			6 asy 10		loyed 🕨	<u> </u>	463-23	-07	81_
-	Paid epare se On	Firm's name (or yours CAIN		OCIAT		ь.ь.€.		EIN ▶	75-	2389867	·	
	žž	if self-employed),	PETERSON LANE,		E 250				_	<b>5</b> 0 000		_
		address, and ZIP code DALL	AS, TEXAS 75240	)				Phone no.	. 9	72.233.		
										Form <b>99</b> (	)-PF	(2009)

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization Employer identification number HARLAN AND AMY KORENVAES FAMILY FOUNDATION C/O HARLAN B. KORENVAES 75-2902691 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation J 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990 EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

Name of organization

HARLAN AND AMY KORENVAES FAMILY FOUNDATION C/O HARLAN B. KORENVAES

Employer identification number

75-2902691

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HARLAN KORENVAES & AMY KORENVAES  5423 PARK LANE  DALLAS, TX 75220	\$9,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Omnicash Omnicash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY C	ASH IN	IVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
GOLDMAN SACHS JP MORGAN JP MORGAN						1,2	11. 50. 22.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMIN A			1,2	83.
FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
JP MORGAN NYSE PETROBAS	,		721. 7,602. 810.		0. 0. 0.	7,6	21. 02. 10.
TOTAL TO FM 990-PF, PART I, I	LN 4		9,133.		0.	9,1	33.
FORM 990-PF		TAX	ES	·		STATEMENT	3
DEGGETDUTON	( EXPE	A)	(B)		(C) ADJUSTED	(D)	
DESCRIPTION	PER	NSES BOOKS	NET INV MENT IN		NET INCOM		
EXCISE TAX FOREIGN TAXES	PER						
EXCISE TAX	PER	BOOKS 231.		COME 0.			ES 0.
EXCISE TAX FOREIGN TAXES		231. 180. 411.		0. 0.			0. 0.
EXCISE TAX FOREIGN TAXES  TO FORM 990-PF, PG 1, LN 18		231. 180. 411.	MENT IN	0. 0.		IE PURPOS	0. 0. 0.
EXCISE TAX FOREIGN TAXES  TO FORM 990-PF, PG 1, LN 18  FORM 990-PF		231. 180. 411.	MENT IN	0. 0.	NET INCOM	STATEMENT FAIR MARKE	0. 0. 0.

FORM 990-PF OTHER	OTHER INVESTMENTS		STATEMENT 5		
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	r	
PETROLEO BRASILEIRO S.A.	COST	64,490.	47,68	30.	
TOTAL TO FORM 990-PF, PART II, LINE	13	64,490.	47,68	30.	
	V - LINE 1A NDATION MANAGE	RS	STATEMENT	6	

NAME OF MANAGER

HARLAN B. KORENVAES AMY B. KORENVAES

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 7		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
DALLAS SYMPHONY ORCHESTRA 2301 FLORA STREET DALLAS, TX 75201	N/A	PUBLIC	5,000.	
CAPIAL FOR KIDS 2807 ALLEN STREET, STE 816 DALLAS, TX 75204	N/A	PUBLIC	25,000.	
CHILDRENS MEDICAL CENTER PO BOX 650473 DALLAS, TX 75265	N/A	PUBLIC	20,000.	
GREENHILL SCHOOL 4141 SPRING VALLEY RD ADDISON, TX 75001	N/A	PUBLIC	10,000.	
TEACH FOR AMERICA 315 WEST 36TH STREET NEW YORK, NY 10018	N/A	PUBLIC	10,000.	
THE BIG APPLE CIRCUS 505 EIGHTH AVE., 19TH FLOOR NEW YORK, NY 10018-6505	N/A	PUBLIC	15,000.	
NO GREATER SCRIFICE 1101 PENNSYLVANIA AVE NW 6TH FLR WASHINGTON, DC 20004	N/A	PUBLIC	5,000.	
NY SOCIETY FOR RELIEF OF RUPTURED & CRIPPLED 535 E 70TH STREET NEW YORK, NY 10021-4823	N/A	PUBLIC	25,000.	

HARLAN AND AMY KORENVAES FAM	ILY FOUNDATI		75-2902691	
INVESTIGATIVE PROJECT ON TERRORISM 5505 CONNECTICUT AVE NW #341 WASHINGTON, DC 20015	N/A	PUBLIC	10,000.	
TOTAL TO FORM 990-PF, PART XV,	LINE 3A		125,000.	

'est via certified real 8/16/10

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

The contract of the contract o			
<ul><li>If you are</li></ul>	filing for an Automatic 3-Month Extension, complete only Part I and check this bo filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II	(on page 2 of this form).	
Part I	blete Part II unless you have already been granted an automatic 3-month extension on a Automatic 3-Month Extension of Time. Only submit original (no copies need)	eded).	
A corporation	on required to file Form 990-T and requesting an automatic 6-month extension—chec	k this box and complete	
	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form noome tax returns.	7004 to request an extension of	
one of the relectronically returns, or a	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month at eturns noted below (6 months for a corporation required to file Form 990-T). However if (1) you want the additional (not automatic) 3-month extension or (2) you file Form composite or consolidated Form 990-T. Instead, you must submit the fully completed at one details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file	ever, you cannot file Form 8868 as 990-BL, 6069, or 8870, group and signed page 2 (Part II) of Form	
Type or print	Name of Exempt Organization	Employer identification number	
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.	L	
return See instructions.	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 99		☐ Form 4720	
[] Form 996	' ' '	☐ Form 5227	
☐ Form 99		☐ Form 6069	
☐ Form 99		☐ Form 8870	
<ul><li>If the orga</li><li>If this is for the whole</li></ul>	No. ► ( ) FAX No. ► ( ) Initial does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN) are group, check this box ► □ . If it is for part of the group, check this box are names and EINs of all members the extension will cover.	s box ▶ □	
1 I requuntil for the	est an automatic 3-month (6 months for a corporation required to file Formont 1, 20,, to file the exempt organization return for the organization organization's return for:  calendar year 20,or  tax year beginning, 20,, and ending	n named above. The extension is	
2 If this t	ax year is for less than 12 months, check reason:   Initial return  Final return	Change in accounting period	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta y nonrefundable credits. See instructions.	3a \$	
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated that made. Include any prior year overpayment allowed as a credit.	ax 3b \$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.			
Caution. If y for payment	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8 instructions	453-EO and Form 8879-EO	
For Privacy A	act and Paperwork Reduction Act Notice, see Instructions. Cat No 27916D	Form 8868 (Rev. 4-2009)	



Ī						
Form	8868 (Rev	/ 4-2009)				Page 2
Note ● If y	. Only c you are	filing for an Additional (Not Automatic) 3-Month Extension, complete omplete Part II if you have already been granted an automatic 3-month extension, complete only Part I (on part I)	nsion on a pre age 1).	viously filed F	orm 8868.	<b>Z</b>
Par	t II	Additional (Not Automatic) 3-Month Extension of Time. Only file	e the origina	I (no copies	needed).	
Type print		Name of Exempt Organization HARLAN AND AMY KORENVAES FAMILY FOUNDATION		Employer id	entification no	umber
File by extend	y the	Number, street, and room or suite no. If a P.O. box, see instructions. 5423 PARK LANE		For IRS use		<del></del>
filing t return instruc	See	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DALLAS, TX 75220				
Chec	ck type	of return to be filed (File a separate application for each return):				
□ F	orm 99	0	orm 1041-A		Form 6069	
□ F	orm 990	0-BL	orm 4720		Form 8870	
	orm 99	0-EZ Form 990-T (trust other than above)	orm 5227			
STO	P! Do no	ot complete Part II if you were not already granted an automatic 3-mont	h extension o	n a previous	ly filed Form	8868.
• The	e books ephone	are in the care of ► HARLAN B. KORENVAES  No. ► ( 214 ) 871-8616	871-86	26		
		nization does not have an office or place of business in the United State				▶ □
• If ti	his is fo	r a Group Return, enter the organization's four digit Group Exemption N	umber (GEN)		If this i	is
for th	he whole	e group, check this box ▶ □ . If it is for part of the group, ch	eck this box.	▶ 🔲	and attach	а
		names and EINs of all members the extension is for.				
		st an additional 3-month extension of time until OCTOBER 1				
5	For cale	endar year 2009, or other tax year beginning, 20, 20	, and endin	<u>g</u>	, 2	20
	If this t	ax year is for less than 12 months, check reason:   Initial return	Final return [	Change in	n accounting	period
7	State in file a c	n detail why you need the extension Taxpayer requests additional time complete and accurate tax return.				
		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the y nonrefundable credits. See instructions.	e tentative ta	x, 8a	\$	0
b		application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundal ted tax payments made. Include any prior year overpayment allowed as a				

c Balance Due. 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.

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 I

amount paid previously with Form 8868.

Title ▶

CFC

Date > 8/16/20

8b \$

8c |\$

Form 8868 (Rev. 4-2009)

1769

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