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EXTENSION GRANTED TO 11/15/10

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 Department of the Treasury Internal Revenue Service •

Form 990-PF

OMB No 1545-0052

	Juici	uai yeai 2005, Ui tax ye	ar beginning		, and ending		
G C	heck	all thất apply	Initial return	,	ormer public charity	Final return	1
			Amended return_	Address chan	ge <u> </u>	Name change	
Use	the	IRS Name of foundation	1			A Employer identification	ı number
ı	abel						
Oth	erwi	se, THE WORKS	OF GRACE FO	UNDATION		75-2906814	:
	print	· ·	O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
	type		9050			(208)726-0	621
	Sper ructio	City or town, state, a				C If exemption application is p	pending, check here
111511	ucti	KETCHUM,	ID 83340			D 1. Foreign organizations	s, check here
H C	heck	type of organization	X Section 501(c)(3) ex	kempt private foundation		Foreign organizations me check here and attach or	eting the 85% test,
] Se	ction 4947(a)(1) nonexer	mpt charitable trust	Other taxable private founda	ition	E If private foundation sta	•
I Fa	ır ma	rket value of all assets at	end of year J Accounti	ng method X Cash	Accrual	under section 507(b)(1)(A), check here
(fr	om i	Part II, col. (c), line 16)	O	ther (specify)		F If the foundation is in a	60-month termination
				mn (d) must be on cash t	pasis.)	under section 507(b)(1)	
Pa	ırt l	Analysis of Revenue a	nd Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		" (The total of amounts in coli necessarily equal the amou	umns (b), (c), and (d) may not nts in column (a))	expenses per books	ıncome	income	for chantable purposes (cash basis only)
	1	Contributions, gifts, gran	nts, etc., received			N/A	
	2	Check X if the foundate			······································		
	3	Interest on savings and temp	oorary	5,634.	5,634.		STATEMENT 1
	4	Dividends and interest fr		3.	3.		STATEMENT 2
	5a	Gross rents				-	
		Net rental income or (loss)				(C)(C)(C)	
	_	Net gain or (loss) from sale of	f assets not on line 10	-1,469,215.		CONTROL	TAX .
Revenue	Ь	Gross sales price for all assets on line 6a	4,239,779.		50 V	LAW was Triavier.	RESERVICE -
	7	Capital gain net income (from		- 11	0.	· · ·········	
	8	Net short-term capital ga	,			i	
	9	Income modifications	4111		*, · -		
	10a	Gross sales less returns and allowances	1		······		
		Less Cost of goods sold				HH+11	
		Gross profit or (loss)				DEGEN	
	11	Other income				RECEIV	-0 ,,
	12	Total. Add lines 1 through	nh 11	-1,463,578.	5,637.		Ø
	13	Compensation of officers, dir		50,000.	0.		010 930,000.
	14	Other employee salaries	·	15,409.	7,705.	(O)	7,704.
	15	Pension plans, employee	•	13,103.	1,703.	000511	<u> </u>
es		Legal fees	STMT 3	11,711.	5,856.	OGDEN,	5,855.
penses		Accounting fees	STMT 4	3,242.	1,621.		1,621.
ďx		Other professional fees	01111	3,212.	1,021		1,021.
Je E	17	Interest	•				
aţi	18	Taxes	STMT 5	-4,929.	589.		4,415.
str	10	Depreciation and depletic		2,941.	0.		1,113.
띂	20	Occupancy		2,5110			
2	21	Travel, conferences, and	meetings				
σğ	22	Printing and publications	-				
c _B	23	Other expenses	STMT 6	9,754.	778.	<u> </u>	8,976.
1	24	Total operating and adn	•	<u> </u>	770.		0,570.
SH ₆	24	expenses. Add lines 13		88,128.	16,549.		78 571
ල්	25	Contributions, gifts, gran	-	455,285.	10,343.		78,571. 455,285.
Ш	2F	Total expenses and dist	· ·	433,203.	······		433,203.
Z	26		uursemenis.	543,413.	16,549.		522 056
T	27	Add lines 24 and 25		747,413.	10,347.		533,856.
SCANNE Copylyth gand Administrative Ex	27	Subtract line 26 from line		-2,006,991.			
7		Excess of revenue over exper		-2,000,331.	0.		
		Net investment income			<u>U.</u>	N/A	
92350)1	Adjusted net income (if r	negative, enter -0-)	<u> </u>		IN/A	Farm 000 PE (0000)

Page 2

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	40,342.	3,454,286.	3,454,286.
	2	Savings and temporary cash investments			
	3	Accounts receivable			,
		Less allowance for doubtful accounts			
	4	Pledges receivable ▶		// //// / // //	
		Less allowance for doubtful accounts ▶			
	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 ▶			·
ts	8	Inventories for sale or use .			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less. accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	4,294,230.	200,300.	200,300.
		Land, buildings, and equipment basis 43,653.			
		Less: accumulated depreciation STMT 9 40,746.	2,417. 251,321.	2,907. 512,569.	2,907. 512,569.
	15	Other assets (describe STATEMENT 10)	251,321.	512,569.	512,569.
			4 500 010	4 170 060	4 150 060
_	-	Total assets (to be completed by all filers)	4,588,310.	4,170,062.	4,170,062.
		Accounts payable and accrued expenses		_	
	18	Grants payable			
ies	19	Deferred revenue .			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here		•	
		and complete lines 24 through 26 and lines 30 and 31.			
ës	24	Unrestricted			
au	25	Temporarily restricted			
Bal	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here		_	
Ţ		and complete lines 27 through 31.			
õ	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	4,588,310.	4,170,062.	
š	30	Total net assets or fund balances	4,588,310.	4,170,062.	
_					
_	31	Total liabilities and net assets/fund balances	4,588,310.	4,170,062.	
þ	art	Analysis of Changes in Net Assets or Fund B	alances		
_			-		
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		4 500 210
_		t agree with end-of-year figure reported on prior year's return)		1	4,588,310.
		amount from Part I, line 27a	CA TNI /I OGG	2	-2,006,991.
		increases not included in line 2 (itemize) UNREALIZED	GWIN/ FORR	3	1,588,743.
		ines 1, 2, and 3		4	4,170,062.
		pases not included in line 2 (itemize)	olumn /h) line 20	5	$\frac{0.}{4,170,062.}$
0	rutal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numn (D), line 30	6	Form 990-PF (2009)
					rviiii 330-FF (2009)

P	art IV Capital Gains a	and Losses for Tax on I	nvestmen	t Income						
		ibe the kind(s) of property sold (e grehouse, or common stock, 200 sh			יא ו	low a - Purc - Don	mase i	(c) Date a (mo , d		(d) Date sold (mo , day, yr)
_		LEKTIKOS SERIES	INITIA	L			P	VARI	ous	01/01/09
_	39.6526 SHS EKI		INITIA	L				JARI	ous	04/01/09
_		KLEKTIKOS SERIES						JAR I	OUS	07/01/09
_		EKTIKOS SERIES J		07				JARI	ous	07/01/09
e	AUSTIN CAPITAL	SAFE-HARBOR OFF	SHORE				P '	JARI	ous	02/11/09
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss (f) minus	
а		•		414,08	9.					-114,089.
b			·	404,59	7.					-124,597.
				4,687,23						1,170,277.
<u>d</u>				176,75						-68,016.
e		· -		26,32	1.					7,764.
	Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69					ol (h) gain	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (I), if any			col		ot less tha (from col (
а										-114,089.
<u>b</u>										-124,597.
_ <u>C</u>									_	1,170,277.
d										-68,016.
e									-	7,764.
2	Capital gain net income or (net cap	oital loss) { If gain, also ente			}	2				1,469,215.
3	Net short-term capital gain or (loss	s) as defined in sections 1222(5) ar	nd (6)							
	If gain, also enter in Part I, line 8, o		,		1					
	If (loss), enter -0- in Part I, line 8				Л	3			N/A	·
P	art V Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inve	<u>estn</u>	nent Inco	me		
	r optional use by domestic private ection 4940(d)(2) applies, leave th	foundations subject to the section is part blank	4940(a) tax on	net investment ind	come)				
If "	Yes," the foundation does not quali	on 4942 tax on the distributable an fy under section 4940(e) Do not co	omplete this pa	ırt						Yes X No
<u>1</u>		ach column for each year, see instr	ructions before	making any entrie	S					- (3)
((a) Base period years Calendar year (or tax year beginnin			Net value of non					Distrib	(d) oution ratio vided by col (c))
	2008		4,220.		6,	<u>,77</u>	3,185	.		.065585
	2007		2,135.				7,584			.057857
	2006		1,471.				8, 026.			.033097
	2005		4,625.				0,193.			.088302
	2004	42	5,930.		7,	<u>, 31</u>	2,947	<u>. </u>		.058243
2	Total of line 1, column (d)							2		.303084
		-year base period - divide the total	on line 2 by 5,	or by the number of	of yea	ars				
	the foundation has been in existen	ce if less than 5 years			·			3		.060617
4	Enter the net value of noncharitable	e-use assets for 2009 from Part X,	line 5					4		3,724,493.
5	Multiply line 4 by line 3						••	5_		225,768.
6	Enter 1% of net investment income	e (1% of Part I, line 27b)						6		0.
7	Add lines 5 and 6		-					7		225,768.
8	Enter qualifying distributions from	Part XII, line 4						8		533,856.
	If line 8 is equal to or greater than	line 7, check the box in Part VI, line	1b, and comp	lete that part using	a 19	6 tax	rate			

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Pá	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
18	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%	·		0.
	of Part I, fine 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-)			0.
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,000.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		1,0	00.
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			
10			1,0	00.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 1,000 • Refunded ▶ 11			0.
Pá	art 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		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for 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.			
C	Did the foundation file Form 1120-POL for this year?	10		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 ▶ \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$0 .			
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	3		X
	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?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	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?	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	<u> </u>
	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)			
	ID			
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	ļ
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		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	_	X

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orm	990-PF(2009) THE WORKS OF GRACE FOUNDATION 75-2906	814		Page 5
Pa	rt 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	X	
	Website address ► WWW.WORKSOFGRACEFOUNDATION.ORG			
14	The books are in care of ► VICKI BROWNE Telephone no ► (208)	726 .	-06	21
	Located at ▶P. O. BOX 9050, KETCHUM, ID ZIP+4 ▶83	340		
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	
Pa	rt 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?			
	(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? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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 after termination of government service, if terminating within 90 days)			
			- 1	
U	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	45	- 1	Х
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
	Ciganizations tolying on a content notice regulating districts absolute to the notice	{		
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		1	v
_	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		1	
	defined in section 4942(j)(3) or 4942(j)(5))	{		
а	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 \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	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.		- 1	
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? $igsquare$ Yes $igsup X$ No	{		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after	[
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	[
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	3b]	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

4b X Form **990-PF** (2009)

orm 990-PF (2009) THE WORKS OF GRACE FOUND		-	75-29068	14	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	. L Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Yı	es 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)?		· —	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or		(V)		
the prevention of cruelty to children or animals?		•	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	N/A		
section 53 4945 or in a current notice regarding disaster assistance (see instru	•	•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check to if the answer is "Yes" to question 5a(4), does the foundation claim exemption for		unad			
expenditure responsibility for the grant?		- /	es 🗆 No		
If "Yes," attach the statement required by Regulations section 53.494		·/ · · · · · · · · · · · · · · · · · ·	3 NU		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				
a personal benefit contract?	pay promisino on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es X No		
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	y		
List all officers, directors, trustees, foundation managers and their	compensation.	·- ·-			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation		nt, other vances
			_		
				1	
SEE STATEMENT 11		50,000.	0.	<u> </u>	0.
	_			1	
				ĺ	
					
	-			ĺ	
				ĺ	
		 		<u> </u>	
				l	
	ł				
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(-) News and address of each analysis and each the office OCO	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Ex	kpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		nt, other vances
NONE					
			į		
				ļ	
					
Total number of other employees paid over \$50,000	L	<u>. </u>			0
OLD HUMBER OF OUTER CHIDIOVECS DAID OVER \$30,000					· ·

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 N/A		
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 line	s 1 and 2	Amount
1N/A		

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ightharpoons

All other program-related investments. See instructions

Total. Add lines 1 through 3

Part X Minimum Investment Return (All dome	estic foundations must complete this part. Forei	ign foundations, s	ee instructions.)
1 Fair market value of assets not used (or held for use) directly in o	carrying out charitable, etc., purposes		
a Average monthly fair market value of securities		. 1a	2,636,668.
b Average of monthly cash balances		1b	2,636,668. 1,144,543.
c Fair market value of all other assets		_1c	
d Total (add lines 1a, b, and c)		1d	3,781,211.
e Reduction claimed for blockage or other factors reported on lines	s 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	3,781,211.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3	(for greater amount, see instructions)	4	56,718.
5 Net value of noncharitable-use assets. Subtract line 4 from line	3 Enter here and on Part V, line 4	5	3,724,493.
6 Minimum investment return. Enter 5% of line 5		6	186,225.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating founda of complete this part)	tions and certain	
1 Minimum investment return from Part X, line 6		1	186,225.
2a Tax on investment income for 2009 from Part VI, line 5	2a		
b Income tax for 2009 (This does not include the tax from Part VI			
c Add lines 2a and 2b		2c	0.
3 Distributable amount before adjustments Subtract line 2c from li	ine 1	3	186,225.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	186,225.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 En	ter here and on Part XIII, line 1	7	186,225.
Part XII Qualifying Distributions (see Instructions	s)		
1 Amounts paid (including administrative expenses) to accomplish	charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d)	, line 26	_1a	533,856.
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	
b Cash distribution test (attach the required schedule)		3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and	d on Part V, line 8, and Part XIII, line 4	4	533,856.
5 Foundations that qualify under section 4940(e) for the reduced ra	ate 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	533,856.
Note. The amount on line 6 will be used in Part V, column (b), in	subsequent years when calculating whether the foun	dation qualifies for t	the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years

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				186,225
2 Undistributed income, if any, as of the end of 2009			······································	
a Enter amount for 2008 only			0.	
b Total for prior years.	,			
,,		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 63,591.				
b From 2005 295,523.				
c From 2006				
d From 2007 65,219.				
e From 2008 106, 422.				
f Total of lines 3a through e	530,755.	·····		
4 Qualifying distributions for 2009 from				
Part XII, line 4 ►\$ 533,856.			_	
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 .	245 621			186,225.
e Remaining amount distributed out of corpus	347,631.			
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	878,386.			
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				······
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				
be distributed in 2010				0.
7 Amounts treated as distributions out of		·**** ' '\i'	. '.h	1111 111 111 1111 1111 111
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	"			
not applied on line 5 or line 7	63,591.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	814,795.			
10 Analysis of line 9				
a Excess from 2005 295,523.				
b Excess from 2006				
c Excess from 2007 65,219.				
d Excess from 2008 106,422.				
e Excess from 2009 347,631.				
				Form QQA_DE (2000)

		- FOUNDATION			700814 Page II
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		•	▶ ∟		
b Check box to indicate whether the found		ng foundation described		4942(J)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 0000	(-) Total
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed .	· · ·				
b 85% of line 2a					ļ
c Qualifying distributions from Part XII,					
line 4 for each year listed	·				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
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 "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	18111				
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundat	ion had \$5,000 or m	ore in assets
at any time during t				. ,	
1 Information Regarding Foundatio	n Managers:			-	
a List any managers of the foundation who	o have contributed more	than 2% of the total con	tributions received by	the foundation before the clo	se of any tax
year (but only if they have contributed m			•		
THERESA CASTELLANO					
b List any managers of the foundation who	o own 10% or more of th	ne stock of a corporation	or an equally large p	ortion of the ownership of a p	partnership or
other entity) of which the foundation has					·
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here 🕨 🗓 if the foundation o				es not accept unsolicited requ	uests for funds If
the foundation makes gifts, grants, etc. ((see instructions) to indiv	viduals or organizations i	ınder other condition	s, complete items 2a, b, c, an	d d
a The name, address, and telephone numl	per of the person to who	m applications should be	addressed:		
	•	••			
b The form in which applications should b	e submitted and informa	tion and materials they s	hould include		
c Any submission deadlines					
4.4					
d Any restrictions or limitations on awards	s, such as by geographic	ai areas, charitable fields	, kinds of institutions	, or other factors	

Page 11

<u> </u>	-`			
3 Grants and Contributions Paid During the Y Recipient	ear or Approved for Future	Payment	T	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a rad doming the year				
SEE STATEMENT 12				
Total b Approved for future payment			<u>▶ 3a</u>	455,285.
u Approved for future payment				
NONE				
Total .	_		▶ 3b	0.

Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated	Unrelated I	Unrelated business income Excluded			(e)
, , , , , , , , , , , , , , , , , , ,	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
Program service revenue	code	Alliount	code	Amount	function income
a	_		_		
b	_				·-
c	_				
d	_		_		
e	_		_		
f	_				
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	5,634.	
Dividends and interest from securities			14	3.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory .			18	-1,469,215.	
Net income or (loss) from special events		·			
Gross profit or (loss) from sales of inventory					
Other revenue					
a					
b					
C					
d					
e					
Subtotal Add columns (b), (d), and (e)			0.	-1,463,578.	
Total. Add line 12, columns (b), (d), and (e)				13	
ee worksheet in line 13 instructions to verify calculations)				
Part XVI-B Relationship of Activities		!:		N	

NO. 7	Explain below now each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
_	
\dashv	
-+	

		120 T	ORKS OF GRACE			906814	Page 13
P	art X	Information Re Exempt Organ		o and Transactions a	and Relationships With Non-	charitable	
1	Did ti	ne organizatįon directly or indi	rectly engage in any of the follo	wing with any other organization	on described in section 501(c) of	Ye	s No
	the C	ode (other than section 501(c)(3) organizations) or in section	527, relating to political organ	izations?		
ä	a Trans	fers from the reporting found	ation to a noncharitable exempt	organization of			
	(1) (Cash	•			1a(1)	X
	(2)	Other assets	•			1a(2)	X
ı	Othe i	transactions					
	(1) 5	Sales of assets to a noncharita	ble exempt organization			1b(1)	<u> </u>
	(2) I	Purchases of assets from a no	ncharitable exempt organizatior	1		1b(2)	X
	(3) I	Rental of facilities, equipment,	or other assets			1b(3)	X
	(4) i	Reimbursement arrangements	•			1b(4)	X
	(5) l	oans or loan guarantees				1b(5)	X
			mbership or fundraising solicita			1b(6)	X
			iling lists, other assets, or paid			10	X
(1 If the	answer to any of the above is	"Yes," complete the following so	chedule Column (b) should alv	vays show the fair market value of the go	ods, other assets,	,
					e in any transaction or sharing arrangem	ent, show in	
	colun		other assets, or services receive				
(a)	Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transactions	, and sharing arrange	ements
			N/A	<u> </u>			
					_		
_							
_							
22			tly affiliated with, or related to, o	· -	zations described		30
			rthan section 501(c)(3)) or in s	ection 52/7		Yes [X No
) IT Ye	s," complete the following scho (a) Name of org		(h) Tune of organization	(a) Description of rela	honohin	
		N/A	anization	(b) Type of organization	(c) Description of rela	lousilib	
		N/A					
				_			
	Under	enalties of penury. I declare that I h	ave examined this return, including a	ccompanying schedules and statem	ents, and to the best of my knowledge and belie	it is true correct	
			r than taxesyer or ideciary) is based			, 11 13 11 10, 0011 100,	
		$\mathcal{M}_{\mathcal{I}}$		1, 11.18.10	PRESIDENT	•	
စ	S	gnature of officer or trustee			Title		
Ë				Date		reparer's identifying i	number
sign Here	r's V	Preparer's Brew	tal Durch COA		o/a/ self-		
מ	Paid Preparer's Use Only	ממנות	IN BENNETT PET	ERSON TAX ADV	T00D0		
	P P	Trainia neare (or yours —	CONGRESS AVENU		1SORS EIN ►		
	حة		IN, TX 78701	P' POTTE 1000	_{Dharra} 51	2-439-48	100
		L AUDI	TH TY 10101		Phone no 51	<u> 407-40</u>	<u> </u>

Form **990-PF** (2009)

Asset					Description (of property		
Number	Date placed in service	Method/ IRC sec	Life or rate	Line No	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
1	ORGANIZA							
1000000000000000000000000000000000000	110300		60M	43	2,277.		2,277.	0.
2	DELL DIM			~~~~~				\$
	112303			17	1,120.	560.	560.	0.
3	DELL INS				PUTER			
	112303			17	1,768.	884.	884.	0.
4	SONY LAP							······
	042803	てれれかな	5.00	17	1,948.	584.	1,364.	0.
5	WEBSITE		2614	4.2	00 222		00 777	
	063003 FILING C		36M	43	22,777.	<u></u>	22,777.	0.
Ų	033004			17	1,295.	648.	503.	# 6
7	HP PRINT		7,00	14. 1	£,433.	040*	703 ↔	58.
,	060804		5 00	17	741.	371.	349.	21.
<u>8</u>	WEBSITE	R O O D D	 	1	/ 41 • j	3/1.	347.	<u>Z1•</u>
**	060105	1	36M	43	3,420.		3,420.	O.
9	PRINTER	<u></u>	<u>~~**</u>	34.7	37 140 4	<u>1</u>	**************************************	
_	07,11,07	200DB	5.00	17	794.		389.	162.
10	PHONE HE			./				
	110107			17	778.		335.	177.
11	OFFICE C			*************		L		
	070108	200DB	5.00	17	3,304.	1,652.	248.	562.
12	FIREPROC	F FIL	Ē					
	054409			·		1,716.		1,961.
	* TOTAL	990-P	F PG	1 D	EPR & AMORT		. 	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	لبيا	43,653.	6,415.	33,106.	2,941.
				3	······································		······	
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	í							
04055:								
916261 04-24-09				#	- Current year section 179	(D) · Asset dispos	ed	

FORM 990-PF INTEREST ON SAV	INGS A	AND TEM	PORARY CA	ASH II	NVESTMENTS	STATEMENT	1
SOURCE .						AMOUNT	
CS #4103 INTEREST INCOME - NOTE TO GITINGENAL REVENUE SERVICE	LDA'S	CLUB					5. 062. 567.
TOTAL TO FORM 990-PF, PART I	, LINE	E 3, CO	LUMN A			5,6	534.
FORM 990-PF DIVIDENT	DS ANI	OINTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS	COLUMN (A	A)
CS #4103			3.		0.		3.
TOTAL TO FM 990-PF, PART I,	LN 4		3.		0.		3.
FORM 990-PF		LEGAL	FEES	<u></u>		STATEMENT	3
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
LEGAL FEES	1	11,711.	5,	,856.		5,855	
TO FM 990-PF, PG 1, LN 16A]	11,711.	5 ,	856.		5,855.	
FORM 990-PF	AC	COUNTI	NG FEES		-	STATEMENT	4
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		3,242.	1,	,621.		1,6	21.
TO FORM 990-PF, PG 1, LN 16B		3,242.	1,	621.		1,6	21.

FORM 990-PF	TAX	ES	S	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES			
FEDERAL TAXES PAYROLL TAXES	-9,933. 5,004.	0. 589.		0. 4,415.			
TO FORM 990-PF, PG 1, LN 18	-4,929.	589.		4,415.			
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES			
BANK CHARGES POSTAGE & DELIVERY COMPUTER EXPENSE LIABILITY INSURANCE MARKETING OTHER DEDUCTIONS PAYROLL SERVICE FEE WORKERS COMP OFFICE SUPPLIES INVESTMENT ADVISORY FEES	50. 90. 1,452. 3,618. 264. 1,331. 2,419. 236. 291. 3.	50. 0. 0. 0. 266. 285. 28. 146.		0. 90. 1,452. 3,618. 264. 1,065. 2,134. 208. 145. 0.			
TO FORM 990-PF, PG 1, LN 23	9,754.	778.		8,976.			

FOOTNOTES

STATEMENT

7

<u> </u>	HER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
THE VANISHING EXHIBIT EKLEKTIKOS A1 EKLEKTIKOS JUNE 2007	COST FMV FMV	200,300.	200,300.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	200,300.	200,300.
FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	R INVESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
ORGANIZATIONAL COSTS DELL DIMENSION 2400 COMPUTER DELL INSPIRON 600 COMPUTER SONY LAPTOP COMPUTER WEBSITE FILING CABINETS HP PRINTER WEBSITE PRINTER PHONE HEADSETS OFFICE COMPUTERS FIREPROOF FILE TOTAL TO FM 990-PF, PART II, LN 1	2,277. 1,120. 1,768. 1,948. 22,777. 1,295. 741. 3,420. 794. 778. 3,304. 3,431.	2,277. 1,120. 1,768. 1,948. 22,777. 1,209. 741. 3,420. 551. 512. 2,462. 1,961.	0. 0. 0. 0. 86. 0. 0. 243. 266. 842. 1,470.
FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
N/R - GILDA'S CLUB NORTH TEXAS AUSTIN CAPITAL SAFE HARBOR	225,000.	150,000.	150,000.
OFFSHORE A/R BEACON HILL N/R-EKLEKTIKOS	26,321.	0. 362,569.	0. 362,569.
TO FORM 990-PF, PART II, LINE 15	251,321.	512,569.	512,569.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI	STATEMENT 11			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
THERESA CASTELLANO P. O. BOX 9050 KETCHUM, ID 83340	VICE-PRESIDENT 20.00	0.	0.	0.	
BENJAMIN DAVID WOOD P. O. BOX 9050 KETCHUM, ID 83340	PRESIDENT 35.00	50,000.	0.	0.	
ELIZABETH SCHURIG 100 CONGRESS AVENUE, SUITE 2200 AUSTIN, TX 78701	SECRETARY 1.00	0.	0.	0.	
CAROLYN BECKETT 100 CONGRESS AVENUE, SUITE 2200 AUSTIN, TX 78701	TREASURER 1.00	0.	0.	0.	
VICKI BROWNE 100 CONGRESS AVENUE, SUITE 2200 AUSTIN, TX 78701	SECRETARY/TREAS	SURER 0.	0.	. 0.	
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	50,000.	0.	0.	

FORM 990-PF

12

STATEMENT

	DOKING THE TEAK		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ANIMAL SHELTER OF WOOD RIVER VALLEY P.O. BOX 1496 HAILEY, ID 83333	NONE TO SUPPORT ORGANIZATION	501(C)3	1,500.
BLAINE COUNTY RECREATION DISTRICT 1050 FOX ACRES ROAD, #107 HAILEY, ID 83333	NONE TO SUPPORT ORGANIZATION	501(C)3	100.
COLLEGES - CHILDREN OF BLAINE CO TEACHERS 100 CONGRESS STE 2200 AUSTIN, TX 78701	TO SUPPORT SCHOLARSHIP	IRC. SEC. 4945(G)	66,515.
COMPANY OF FOOLS P.O.BOX 329 HAILEY, ID 83333	NONE TO SUPPORT ORGANIZATION	501(C)3	1,300.
ENVIRONMENTAL RESOURCE CENTER P.O. BOX 819 KETCHUM, ID 83340	NONE TO SUPPORT ORGANIZATION	501(C)3	1,585.
GILDA'S CLUB NORTH TEXAS, ONE WORKS OF GRACE PLAZA 2710 OAK LAWN DALLAS, TX 75219	NONE TO SUPPORT ORGANIZATION	501(C)3	75,000.
SAWTOOTH BOTANICAL GARDEN 3 GIMLET RD., P.O. BOX 928 SUN VALLEY, ID 83353	NONE TO SUPPORT ORGANIZATION	501(C)3	100.
SPECIAL OLYMPICS 1133 19TH ST, N.W. WASHINGTON, DC 20036	NONE TO SUPPORT ORGANIZATION	501(C)3	25,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

 THE WORKS OF GRACE FOUNDATION		•	75-2906814
ST. LUKE'S WOOD RIVER FOUNDATION P.O. BOX 7005 KETCHUM, ID 83340		501(C)3	1,000.
SUN VALLEY CENTER FOR THE ARTS P.O. BOX 656 SUN VALLEY, ID 83353	NONE TO SUPPORT ORGANIZATION	501(C)3	15,000.
SUN VALLEY SUMMER SYMPHONY P.O. BOX 1914 SUN VALLEY, ID 83353	NONE TO SUPPORT ORGANIZATION	501(C)3	1,000.
WOOD RIVER LAND TRUST P.O.BOX 6376 HAILEY, ID 83333	NONE TO SUPPORT ORGANIZATION	501(C)3	1,000.
WOOD RIVER WOMEN'S CHARITABLE FOUNDATION P.O. BOX 3686 KETCHUM, ID 83340	NONE TO SUPPORT ORGANIZATION	501(C)3	1,050.
WOOD RIVER YMCA P.O. BOX 6801 KETCHUM, ID 83340	NONE TO SUPPORT ORGANIZATION	501(C)3	263,000.
	NONE TO SUPPORT ORGANIZATION	501(C)3	212.
NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD, STE.150 JENKINTOWN, PA 19046	NONE TO SUPPORT ORGANIZATION	501(C)3	38.
BLAINE COUNTY HUNGER COALITION 121 HONEYSUCKLE STREET BELLEVUE, ID 83313	NONE TO SUPPORT ORGANIZATION	501(C)3	100.
CARITAS CHORALE P.O. BOX 164 KETCHUM, ID 83340	NONE TO SUPPORT ORGANIZATION	501(C)3	100.

THE WORKS OF GRACE FOUNDATION		·	75-2906814
CASA P.O. BOX 2918, 716 BRIDGE ST. TWIN FALLS, ID 83303	NONE TO SUPPORT ORGANIZATION	501(C)3	250.
COMMUNITY LIBRARY 415 SPRUCE AVENUE N KETCHUM, ID 83340	NONE TO SUPPORT ORGANIZATION	501(C)3	250.
GIRL SCOUTS OF AMERICA P.O. BOX 19611A NEWARK, NJ 07195	NONE TO SUPPORT ORGANIZATION	501(C)3	185.
AMERICAN JEWISH JOINT DISTRIBUTION COMMITTEE/JDC-IDP.ASYV RWANDA - 132 EAST 43RD STREET, P.O. BOX 530 NEW YORK, NY 10017	NONE TO SUPPORT ORGANIZATION	501(C)3	1,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		455,285.

Form 4562

Department of the Treasury Internal Revenue Service (99

Name(s) shown on return

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return

Attach to your tax return.

Business or activity to which this form relates

2009
Attachment
Sequence No. 67

Identifying number

WORKS OF GRACE FOUNDATION FORM 990-PF PAGE 1 75-2906814 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 250,000. Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see instructions) 3 800,000. Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property. Enter the amount from line 29 7 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 1,716. the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 980 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property ear placed in service (business/investment use only - see instructions) (e) Convention (f) Method (g) Depreciation deduction 19a 3-year property 5-year property b 1,715 YRS. HY 200DB 245 7-year property c 10-year property d 15-year property 20-year property f 25-year property 25 yrs. S/L g 27.5 yrs. MM S/L h Residential rental property ММ S/L 27.5 yrs. 39 yrs. MM S/L Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L 40-year 40 yrs ММ S/L C Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.

22

2,941.

23

Part V Listed Prope		utomobiles, ce				_			comput	ers, and		v used fo		<u>_</u> _
recreation, or	amusement.)				•		•		•			•		
Note: For any through (c) of	vehicle for w Section A. al	hich you are u Lof Section R	sing the	standar etion C if	d mileag fannina	ge rate o	r dedu	cting lease	e expen	se, comp	pleteoni	y 24a, 24	1b, colui	mns (a)
		ion and Other					ınstruc	tions for l	ımıts for	passen	per auto	mobiles)		
24a Do you have evidence to					_	es .		24b lf "Y] Yes [No
	(b)	(c)	1		<u>一丁:</u>	(e)		(f)	T .	(g)	1	(h)	<u> </u>	(i)
(a) Type of property	Date	Business/		(d) Cost or		sis for depi		Recovery	1	thod/		eciation		ected
(list vehicles first)	placed in service	investment use percenta		her basis	(bu	siness/inv use onl		penod		vention		uction	1	on 179 ost
25 Special depreciation al		1		, placed	In servi	ce durin	a the to	y vear an	<u>. </u>					,031
used more than 50% in		•	property	placed	III SCIVI	ce dumin	y ine i	ax year an	u	25				
26 Property used more that			ess lise.								1		<u>t., ,,,,,,,</u>	
20 Troporty dodd more til	1		%						r				T	
		•	%		-						 			
		İ	%		-									
27 Property used 50% or	loce in a gual								l		.l]	
21 Floperty used 30 % of	less III a quai		1		ī				S/L -		Τ΄		<u> </u>	
 	 • • •		% %						S/L -		 		1	
	+ • •		% %						S/L -		 		1	
OO Add amounts in column		1			01	1			19/L-		 -		-	
28 Add amounts in column						, page 1				28	L	- 00		
29 Add amounts in colum	n (i), iine ∠6. t			7, page B - Infor		H	af Val	ialaa				29	<u> </u>	
Camplete this section for i	abialaa iiaaal	_						··			_			
Complete this section for v If you provided vehicles to												ına this e	section f	for
those vehicles.	your omploys	oo, mor anom	or the qu	300110110	0001		JJO 11 ,	ou moor (arr 0,000 ₁	31.01, 10	complet	ing tino t		01
						/L\		(2)	1 ,		T	/ _~)	Ι,	
20 Total huginass (investment	milaa dewaa d	urna tha	1	a)	1	(b)		(c)	1	d)	1	(e) buolo	l .	(f)
30 Total business/investment		uring the	Vei	nicle	Vei	hicle	- v	ehicle	Vei	hicle	ve	hicle	vei	hicle
year (do not include com	• ,				-				-					
31 Total commuting miles	_	-	·											
32 Total other personal (no	oncommuting)) miles			l									
driven	- 4b						 							
33 Total miles driven durin														
Add lines 30 through 3		-1			V	1	V	T	V	l		T	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T
34 Was the vehicle availab	ole for person	iai use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No_	Yes	No
during off-duty hours?						· 	-					<u> </u>		
35 Was the vehicle used p		more			ļ			ļ						
than 5% owner or relat	-	•				-			ļ			-	-	
36 Is another vehicle avail	able for perso	onai						j						
use?	0	0	<u> </u>	1	() - D			<u> </u>			L	<u> </u>	l	
A		- Questions 1												50 /
Answer these questions to	determine it	you meet an e	xceptior	i to com	pleting	Section	B tor v	enicies us	ea by e	mpioyee	s wno a	re not m	ore than	15%
owners or related persons.			-11			- 6 l l								Τ
37 Do you maintain a writt	en policy stat	tement that pr	onibits a	ui persor	nai use d	ot venici	es, inci	uaing cor	nmuting	, by you	r		Yes	No
employees?													-	+
38 Do you maintain a writt		•	-				•			our/				
employees? See the in					ticers, c	directors	, or 1%	or more	owners					
39 Do you treat all use of	•				_								-	
40 Do you provide more th					informat	tion fron	1 your e	employees	about				İ	
the use of the vehicles,														
41 Do you meet the requir													ļ	
Note: If your answer to	<i>37, 38, 39, 4</i>	<u>0, or 41 is "Ye</u>	<u>s," do no</u>	ot compi	ete Sec	tion B fo	or the c	overed ve	hicles.					┸
Part VI Amortization												_	- 10	
(a) Description	of costs	Cate	(b) amortization		(c) Amortizal	hle		(d) Code		(e) Amortiza	tion	Δ,	(f) mortization	
			begins		amoun			section		penod or per			r this year	
42 Amortization of costs to	hat begins du	ırıng your 2009	tax yea	ar:										
		:												
43 Amortization of costs to	hat began be	fore your 2009	tax yea	ď							43			
44 Total. Add amounts in	<u>column (f).</u> Se	ee the instruct	ions for	where to	report						44			

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

lf yo	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ 🗓
-	u are filing for an <mark>Additional (Not Automatic) 3-Month Extension, complete only Part II</mark> (on page 2 of this		
Do₁not	complete Part II unless you have already been granted an automatic 3-month extension on a previously f	iled For	n 8868.
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corp Part I c	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and coronly	nplete	▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a ncome tax returns.	n extens	sion of time
noted (not au you mi	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or court submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic first gov/efile and click on e-file for Chanties & Nonprofits.	ically if	(1) you want the additional ted Form 990-T. Instead,
Type o	Name of Exempt Organization	Empl	oyer identification number
Pillit	THE WORKS OF GRACE FOUNDATION	7!	5-2906814
File by the due date filing you	for Number, street, and room or suite no. If a P.O. box, see instructions.		
return, S instruction			
Check	t type of return to be filed (file a separate application for each return):		
	Form 990	227 069	
Tel • Ifti • Ifti	VICKI BROWNE be books are in the care of ▶ P · O · BOX 9050 - KETCHUM, ID 83340 be books are in the care of ▶ P · O · BOX 9050 - KETCHUM, ID 83340 be phone No. ▶ (208) 726-0621 be organization does not have an office or place of business in the United States, check this box consists for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all organizations.	nis Is foi	the whole group, check this
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 16, 2010 , to file the exempt organization return for the organization named is for the organization's return for: X Calendar year 2009 or tax year beginning , and ending		The extension
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	За	s 1,000.
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		1 000
	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 1,000.
С	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.	3c	s 0.
	Oce manufactions.	1 00	<u> </u>

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form 8868 (Rev. 4-2009)

Form 8	3868 (Rev. 4-2009)			Page 2
● If v	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	s box		▶ X
•	Only complete Part II if you have already been granted an automatic 3-month extension on a previously fi			
) If y	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (n	o copies	s needed).	
Time	Name of Exempt Organization	1	Employer identification number	
Type print	□ 1	٠٠.١		
	THE WORKS OF GRACE FOUNDATION		75-290	6814
File by extended due data filing the	Number, street, and room or suite no. If a P.O. box, see instructions.	For	r IRS use or	ily
return :	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
Chec	k type of return to be filed (File a separate application for each return):			
	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		Form 5227 Form 6069	Form 8870
STOF	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a prev	iously f	iled Form 8	868.
Te	I request an additional 3-month extension of time until For calendar year 2009, or other tax year beginning If this tax year is for less than 12 months, check reason: State in detail why you need the extension THE TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME T	fall men	Change	n accounting period
	GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE	AND	ACCUR!	TE RETURN.
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	88	a \$	1,000.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868.	81	b \$	1,000.
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 instruction	ons. 8	: \$	0.
	Signature and Verification			
Under it is tr	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and t ue, correct, and complete, and that I am authorized to prepare this form	o the bes	t of my know	ledge and belief,
Signa	ture > CPA	Da	ate 🕨 🖇	5/2010
			Fo	rm 8868 (Rev. 4-2009)

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