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Original Return Return of Private Foundation or Section 4947(a)(4) Nonemark Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052 2009

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For o	calend	ar year 2009, or tax year beginning , ;	and ending							
GC	Check a		turn of a former public o			Final return				
		Amended return Add	ress change	Name	change					
	the IR	S Name of foundation				loyer identification num -0965394	ber			
	nerwise	, SHIRLEY C. CARIS FAMILY FO	UNDATION) of the instructions)			
	print	Number and street (or P O box number if mail is not delivered		Room/suite	B Telephone number (see page 10 of the instructions) $480-451-9244$					
•	type.	P. O. BOX 14315		r to o i i i o di to	C If exemption application is pending, check here					
See	Specifi				1					
Instr	ruction		85267-4315		D 1. Foreign organizations, check here Sometime to the street organizations meeting the street organization between the street organizations are street organizations.					
H C	Check ty	ype of organization X Section 501(c)(3) exempt private								
			e private foundation		E If priv	vate foundation status was	terminated under			
I Fa	air marl	ket value of all assets at end J Accounting method	X Cash Accr	ual		on 507(b)(1)(A), check here				
of	year (f	from Part II, col (c), Other (specify)			F If the	foundation is in a 60-mont	h termination			
<u>lın</u>	ne 16) 🕽	\$ 13,376,469 (Part I, column (d) must I	ge on cash basis)		unde	r section 507(b)(1)(B), chec	ck here			
Pa	art I	Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disbursements			
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net	for charitable			
		the amounts in column (a) (see page 11 of the instructions))	books	inco		income	purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)								
	2	Check ► X if the foundation is not required to attach Sch B								
	3	Interest on savings and temporary cash investments	1,248		1,248	1,248				
	4	Dividends and interest from securities	15,796		15 , 796	15,796				
ca.	5a	Gross rents	3,200		3,200	3,200				
∞	b	Net rental income or (loss) 3,200								
DENNA SON Revenue	6a	Net gain or (loss) from sale of assets not on line 10								
	b	Gross sales price for all assets on line 6a								
	7	Capital gain net income (from Part IV, line 2)			0					
	8	Net short-term capital gain				0				
<u></u>	9	Income modifications			``					
•	10a	Gross sales less returns & allowances								
6 9	, p	Less Cost of goods sold								
≔ .	C	Gross profit or (loss) (attach schedule)								
2010	11	Other income (attach schedule) Stmt 1	78,719			78,719				
<u> </u>	12	Total. Add lines 1 through 11	98,963		20,244	98,963				
S	13	Compensation of officers, directors, trustees, etc	150,000							
JS(14	Other employee salaries and wages								
sesued	15	Pension plans, employee benefits	24 222	-		····-				
	16a	Legal fees (attach schedule) See Stmt 2	24,222		D = 0		_			
9	b	Accounting fees (attach schedule) Stmt 3	19,760		HEC	EIVED				
aţį	17	Other professional fees (attach schedule) Interest		8		100				
Operating and Administrative E)	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 4	999,746		1111	5 2010				
Ë	19	Depreciation (attach schedule) and depletion	999,140	 i 	11111					
Ē	20	Occupancy		 	7.7	= ;	<u></u>			
¥	21	Travel, conferences, and meetings			<u> </u>		·			
П	22	Printing and publications								
a	23	Other expenses (att sch) Stmt 5	261,205		49,987	-				
Ë	24	Total operating and administrative expenses.	202/200		15/301					
<u>a</u>		Add lines 13 through 23	1,454,933		49,987		0			
þe	25	Contributions, gifts, grants paid	137,800		13,30.		137,800			
0	26	Total expenses and disbursements. Add lines 24 and 25	1,592,733		49,987	0	137,800			
	27	Subtract line 26 from line 12	=, = = , = , = ,		,,	Ŭ.	201,000			
	а	Excess of revenue over expenses and disbursements	1,493,770							
	ь	Net investment income (if negative, enter -0-)			0					
	С	Adjusted net income (if negative, enter -0-)				98,963				

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

Form **990-PF** (2009)

<u>F</u> (orm 990	-PF (2009) SHIRLEY C. CARIS FAMILY FOUNDATION	00-09653		Page 2
	Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	-	d of year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	10 252 247	0 000 17	6 0 000 154
	2	Savings and temporary cash investments	10,353,347	8,908,17	8,908,176
	3	Accounts receivable			1
	١.	Less allowance for doubtful accounts ▶			
	4	Pledges receivable >			-
	l _	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			1
		Less allowance for doubtful accounts ▶		· -	
캶	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			1
		Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) See Statement 6	1,317,848	1,269,60	7 1,428,293
	14	Land, buildings, and equipment basis ► 3, 040, 000			-
		Less accumulated depreciation (attach sch) ▶ Stmt 7		3,040,00	0 3,040,000
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
_		instructions Also, see page 1, item I)	11,671,195	13,217,78	3 13,376,469
	17	Accounts payable and accrued expenses			
Ś	18	Grants payable			_
Liabilities	19	Deferred revenue			_
₫	20	Loans from officers, directors, trustees, and other disqualified persons			╛
<u>a</u>	21	Mortgages and other notes payable (attach schedule)			_
_	22	Other liabilities (describe ▶)			_]
_	23	Total liabilities (add lines 17 through 22)	0		<u>o</u>
		Foundations that follow SFAS 117, check here ▶ X			
es		and complete lines 24 through 26 and lines 30 and 31.			
ဥ	24	Unrestricted	11,671,195	13,217,78	3
Net Assets or Fund Balances	25	Temporarily restricted			_
Ď	26	Permanently restricted			_]
힡		Foundations that do not follow SFAS 117, check here ▶			
교	ĺ	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg, and equipment fund			_
še	29	Retained earnings, accumulated income, endowment, or other funds			
Ą	30	Total net assets or fund balances (see page 17 of the			
<u>ㅎ</u>		instructions)	11,671,195	13,217,78	3
Z	31	Total liabilities and net assets/fund balances (see page 17			
	<u> </u>	of the instructions)	11,671,195	13,217,78	3
	Part I				
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	gree with		
		f-year figure reported on prior year's return)		1_1	11,671,195
		amount from Part I, line 27a		2	-1,493,770
		ıncreases not included in line 2 (itemize) ▶ See Statement 8		3	3,040,358
		nes 1, 2, and 3		4	13,217,783
		eases not included in line 2 (itemize)		5	<u> </u>
6	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	ine 30	6	13,217,783

Form 990-PF (2009)

Part VI instructions on page 18

************	990-PF (2009) SHIRLEY C. CARIS FAMILY FOUNDATION 86-0965394		Р	age 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ns)		
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)			ĺ
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶			
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			
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, 376			
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,	<u> 376</u>
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,	376
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 1,376 Refunded ▶ 11			
Pa	nt 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		Yes	No
	participate or intervene in any political campaign?	1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the 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?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
0	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		1	Х
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_ 	Х	
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	- 2 1	Х
•	If "Yes," attach the statement required by General Instruction T			广
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	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► AZ			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	L
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 on page			
	27)? 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
		Form 99 ()-PF	(2009)

$\overline{}$	990-PF (2009) SHIRLEY C. CARIS FAMILY FOUNDATION 86-09653	394		 	F	age 5
<u>P</u> a	art 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 page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					ļ
	August 17, 2008?			12	<u> </u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	<u> </u>
	Website address ► N/A					
14		elephone no	•			
	P. O. BOX 14315					
	Located at ► SCOTTSDALE, AZ	ZIP+4	▶ 8526	57		_
15	Section 4947(a)(1) nonexempt chantable 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	<u> </u>	15			
<u>P</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	Dunng the year did the foundation (either directly or indirectly)	_	_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Ye	s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					1
	disqualified person?	Ye	s X No s X No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	s X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	s 🛚 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)?	Ye	s 🛚 No			
	(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					1
	termination of government service, if terminating within 90 days)	Ye	s 🛚 No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	/-	-		1
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b	ļ	ļ
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		/-	Ī		1
	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					l
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					I
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	G.	П.			1
	6e, Part XIII) for tax year(s) beginning before 2009?	X Ye	s U No			1
_	If "Yes," list the years ▶ 20 08 , 20 , 20 , 20					Í
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			١	.,	1
	all years listed, answer "No" and attach statement—see page 20 of the instructions)			2b	X	╁──
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
2-	Did the foundation hald more than a 20% direct or indirect interest in any hydrogen anterior.					1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	X Ye	s No			1
h	at any time during the year? If "Yes," did it have exceen his more heldings in 2000 as a result of (1) any purchase by the foundation or	<u> </u>	s 🔲 110			1
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or					1
	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					1
	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.)			25	İ	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	.2		3b 4a	 	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			- 	\vdash	1
~	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2			4b	ĺ	X
_	The state of the s			Form 99	0-PF	

		CARIS FAMILI FOUNDA		965394			Pa	ige o
Pa	irt VII-B Statements Regard	ling Activities for Which For	<u>m 4720 May Be Re</u>	equired (conti	nued)	······································		
5a	During the year did the foundation pay o	-					I	
	(1) Carry on propaganda, or otherwise			U \	′es 🗓 No		ı	
	(2) Influence the outcome of any specific		r to carry on,				I	
	directly or indirectly, any voter regist			\vdash	res X No		I	
	(3) Provide a grant to an individual for to	•		∐ \	′es 🏻 No		I	
	(4) Provide a grant to an organization o						1	
	section 509(a)(1), (2), or (3), or sect	tion 4940(d)(2)? (see page 22 of the in	structions)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	′es ⊠ No		ı	
	(5) Provide for any purpose other than i	eligious, charitable, scientific, literary,	or educational				I	
	purposes, or for the prevention of cr	uelty to children or animals?		\ \ \	′es 🏻 No		Ī	
b	If any answer is "Yes" to 5a(1)-(5), did a		· · · · · · · · · · · · · · · · · · ·		/-		#	
	Regulations section 53 4945 or in a curr	ent notice regarding disaster assistance	ce (see page 22 of the in	structions)?	N/A	5b		
	Organizations relying on a current notice	regarding disaster assistance check h	here		▶ ⊔		I	
C	If the answer is "Yes" to question 5a(4),	does the foundation claim exemption f	rom the tax	/- 🖂			1	
	because it maintained expenditure response	onsibility for the grant?		N/A 📙 ነ	∕es ∐ No			
	If "Yes," attach the statement required b	y Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, rece	eive any funds, directly or indirectly, to p	pay premiums		E21		I	
	on a personal benefit contract?			□ '	∕es 🏻 No		ŧ	
b	Did the foundation, during the year, pay	premiums, directly or indirectly, on a po	ersonal benefit contract?	?	ļ	6b		<u>X</u>
	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?	□ ,	res 🗓 No	_		
	If yes, did the foundation receive any pro-				N/A	7b		
Pa		Officers, Directors, Trustees,	Foundation Manage	gers, Highly F	Paid Employee	es,		
	and Contractors				<u></u>			
1 L	ist all officers, directors, trustees, fou	ndation managers and their comper	nsation (see page 22 of	the instructions	1 -			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Exc	ense ac	count.
	(a) Name an	d address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowan	
					compensation			
CA	ATHERINE ANN HART	SCOTTSDALE	PRESIDENT					
Ρ.	O BOX 14315	AZ 85267	3.00	100,000	0		-	0
	HERRY LYNN COWAN	PAYSON	SECR/TREAS.					
Ρ.	O. Box 639	AZ 85547	3.00	50,000	_0	 		0
					<u> </u>			
2	Compensation of five highest-paid e	nployees (other than those included	d on line 1—see page 2	23 of the instructi	ions).			
	If none, enter "NONE."		·		I 48 0. 4 5 4	ι		—
	(a) No	days and man than 650 000	(b) Title, and average	(a) Componenting	(d) Contributions to employee benefit	(e) Exp	ense ac	count,
	(a) Name and address of each emp	ployee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	othe	allowan	ices
					Сотпрепзацол	 		
NC	ONE							
					-			—
					1			
					 	 		—
	· · · · · · · · · · · · · · · · · · ·				 	 		
				-	 -			
					1			
·ot-	at number of other employees paid over \$	50,000		L	L		1	
ota	Turnber of other employees paid over \$	30,000				m 990)-DE	(2000)
					FO	1111 JJ	J-1-1-	(∠∪U∀)

Form	990-PF (20)	9) SHIRLEY C. CARIS FAMILY FOUNDATION	86-0965394	Page 7
	rt VIII	Information About Officers, Directors, Trustees, Foundation		
		and Contractors (continued)		
3	Five highe	st-paid independent contractors for professional services (see page 23 of the	instructions). If none, enter "NO	NE."
		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NC	NE			
				
Total	number of o	others receiving over \$50,000 for professional services		
Pa	rt IX-A	Summary of Direct Charitable Activities		
		o's four largest direct charitable activities during the tax year. Include relevant statistical information other beneficiaries served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1	N/A			
		•		
_				
2				
_				
3				
4				
Pa	rt IX-B	Summary of Program-Related Investments (see page 24 of	the instructions)	
		argest program-related investments made by the foundation during the tax year on lines 1 and 2	·	Amount
1	N/A			
		·		
_				·
2				
•				
	ther program-	related investments. See page 24 of the instructions		
3				

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

P	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fou	undations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0
þ	Average of monthly cash balances	1b	9,565,812
C	Fair market value of all other assets (see page 24 of the instructions)	1c	1,428,293
d	Total (add lines 1a, b, and c)	1d	10,994,105
θ	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	10,994,105
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	164,912
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,829,193
6	Minimum investment return. Enter 5% of line 5	6	541,460
P	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	erating	
	foundations and certain foreign organizations check here	_	
1	Mınımum investment return from Part X, line 6	1	541,460
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)	1 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	541,460
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	541,460
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	541,460
D.	Qualifying Distributions (see page 25 of the instructions)		
	Att All Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	137,800
b	Program-related investments—total from Part IX-B	1b	·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	137,800
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	137,800
	Note: The execution line 6 will be used in Dott V ashumn (b) in subsequent uses when as leading in both a discount of the state of the	_	

Form **990-PF** (2009)

1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7				541,460
2	Undistributed income, if any, as of the end of 2009:				
а	Enter amount for 2008 only			151,139	
b	Total for pnor years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004			1	
b	From 2005			1	
С	From 2006	7		1	
d	From 2007			1	
	From 2008	1		1	
	Total of lines 3a through e	1		İ	
4	Qualifying distributions for 2009 from Part XII,	·			***************
•	line 4 ▶ \$137,800			1	
а	Applied to 2008, but not more than line 2a			137,800	
	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election	-			
٠	required—see page 26 of the instructions)			İ	
4	Applied to 2009 distributable amount				
	• •				
	Remaining amount distributed out of corpus				··· <u> </u>
5	Excess distributions carryover applied to 2009		•		
	(If an amount appears in column (d), the same			1	
_	amount must be shown in column (a))			1	
6	Enter the net total of each column as			1	
	indicated below:			1	
	Corpus Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income Subtract			1	
	line 4b from line 2b	·····			
C	Enter the amount of prior years' undistributed			1	
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				
0	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions			13,339	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be		1		
	distributed in 2010		<u> </u>		541,460
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the			1	
	instructions)				
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2005		1		
b	Excess from 2006	1	1		
	Excess from 2007	-			
G		-	1		
d	Excess from 2008 Excess from 2009				
0	EXCESS HUIH ZUUS	Ī	+	, <u> </u>	

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 Foundation Recipient Purpose of grant or status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year See Statement 9 137,800 137,800 **▶** 3a Total **b** Approved for future payment N/A Total **▶** 3b

DAA

Ī	Part XVI-A	Analysis of Income-Producing Acti	vities				
		unts unless otherwise indicated		d business income	Exclude	d by section 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1	Program serv		ļ				the instructions)
			<u> </u>				
							<u> </u>
					<u> </u>		
		 					
	f				 		
	g Fees and	contracts from government agencies			 		
2	-	dues and assessments					
		avings and temporary cash investments					1,248
4		d interest from secunties					15,796
5	Net rental inc	come or (loss) from real estate					
	a Debt-fina	inced property					
	b Not debt-	-financed property					
6	Net rental inc	come or (loss) from personal property					3,200
7	Other investr	ment income	541900	78,719			
8	Gain or (loss)) from sales of assets other than inventory					
9	Net income o	or (loss) from special events					
	•	or (loss) from sales of inventory					
11	Other revenu	ie a					
					ļ		
	d				!		
	е			70 710		0	20 244
		d columns (b), (d), and (e)	L	78,719	L	··	20,244 98,963
		ne 12, columns (b), (d), and (e)				13 _	90,903
	Part XVI-B	n line 13 instructions on page 28 to verify calculations Relationship of Activities to the Ac		ent of Evernt Pu	ITNOSA	<u> </u>	
	Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpos instructions)	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	the
_	N/A	1.00					· .
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	1 330-1 1 12											Га	ye is
P	art XVII	Information Regardate	_	nsfers To	and Tra	nsactior	ns an	d Relations	hips With N	oncharit	able		
1	Did the o	Exempt Organization directly or indirectly		in any of the f	following w	th any othe	er orga	nization descri				Yes	No
•		501(c) of the Code (other		•	_	•						.03	110
	organizat			001(0)(0) 019	a	, 0 0000	0	, rolating to po					ĺ
а	-	from the reporting founds	ation to a non	chantable exe	mpt organi	zation of							Ĺ
	(1) Cash	· •									1a(1)		Х
	(2) Othe	r assets									1a(2)		X
b	Other tra	nsactions											
	(1) Sales	s of assets to a noncharita	ble exempt o	rganization							1b(1)		Х
	(2) Purc	hases of assets from a no	nchantable ex	empt organiz	ation						1b(2)		X
	(3) Rent	al of facilities, equipment,	or other asse	ts					·		1b(3)	_	Χ
	(4) Reim	bursement arrangements									1b(4)		X
		s or loan guarantees									1b(5)		X
	(6) Perfo	rmance of services or me	mbership or f	undraising so	licitations						1b(6)		X
	-	of facilities, equipment, ma	-	•		-					1c		X
d		wer to any of the above is	•		-			-					
		he goods, other assets, or	-		-								
	value in a	(b) Amount involved		show in colur of noncharitable			e good T		, or services rece of transfers, transac			monte	
1/		(b) Amount involved	(C) Name	DI HORCHARIADIO	exempt orga	anization	 	(d) Description (or dansiers, dansac	atoris, and si	taining arrange		
<u> </u>	<u> </u>	 				· · · · · · · · · · · · · · · · · · ·	 	 .					
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2a		indation directly or indirect	•		•		•	organizations			П.,	ſ.	a
		d in section 501(c) of the C	•	ian section 50	1(c)(3)) or	in section	5277				U ¥	es <u>[X</u>	No
	if Yes,"	complete the following sch (a) Name of organization	eaule	(b) Tuo	o of organiz	ation	Γ		(c) Description (of relationship			
	N/A	(a) Name of Organization		(0) 1 <u>yp</u>	e of organiza		<u> </u>		(c) Description	or relationship	Р		
	11/ A						\vdash				-		
													
							 				···········		
					_					-			
	Under per	alties of perjury, I declare that	I have examine	ed this return, in	cluding acco	mpanying so	hedules	and statements.	and to the best of r	ny knowleda	e and		
	belief, it is	true correct, and complete D	eglaration of pr	eparer (other th	an taxpayer	or fiduciary)	ıs based	on all information	n of which preparer	has any kno	owledge		
	L (IUHIDUM (XI	"UNDH!	Yill		17110	10		MISIDOR	T			
<u>e</u>	Signa	ture of officer or trustee				Date			Title				
Sign Here	-	0						Date	Charket		Preparer's identifi number (see Sig		on
厉	ح ج	Preparer's		\mathcal{D} .	~^				Check if self-employed	ı ∢ t	page 30 of the in	struction	s)
ัร	o a gi	signature		Hem	4, CY	7		05/25/	10		P00963	306	<u>; </u>
į	Paid Preparer's Use Only	Firm's name (or yours if	Cosse'		lace,	CPA's	3				00 000	46-	
	۵ _	self-employed), address,		lox 3969	9					_	<u>86-069</u>		
		and ZIP code	<u>Sedon</u>	a, AZ	86340	J				Phone no	<u>928-28</u>	<u>2-3</u>	<u>U40</u>

86-0965394	Federal	Federal Statements		
Description CRYOCELL Total	Statement 1 - Form 990-PF	- Form 990-PF, Part I, Line 11 - Other Income Revenue per Ne Books \$ 78,719 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Net Investment Income	Adjusted Net Income \$ 78,719 \$
Description Indirect Legal Fees Total	Statement 2 - Form 990-PF Total \$ 24,222 \$ 24,222	Form 990-PF, Part I, Line 16a - Legal Fees Net 24, 222 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Adjusted Net	Charitable Purpose
Description Indirect Accounting Fees Total	Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Net	Sart I, Line 16b - Account Net Investment	Adjusted Net	Charitable Purpose
Description FEDERAL INCOME TAX AZ TAXES PROPERTY TAXES Total	Statement 4 - Form 990 Total \$ 770,136 197,494 32,116 \$ 999,746	- Form 990-PF, Part I, Line 18 - Taxes Net Net 70, 136 \$ 97, 494 32, 116 99, 746 \$	Adjusted Net S	Charitable Purpose
				4-1

		Charitable Purpose	ጥ								\$
	Expenses	Adjusted Net	ς,								\$
Federal Statements	Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	₩		498	49,489					\$ 49,987
Federal	Statement 5 - Form 990-PF,	Total	\$		498	49,489	1,938	9,885	1,764	197, 631	\$ 261,205
86-0965394		Description		Expenses	UBS MANAGEMENT FEES	DEL RIO/JACKRABBIT LLC	OFFICE	INSURANCE	STORAGE	REPAIR/MAINTENENACE	Total

86-0965394

Federal Statements

Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

Description

	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
JACKRABBIT 72, LLC	318,862	\$ 304,743	Cost	\$ 287,028
DEL RIO 246, LLC	982,341	•		884,930
TEXAS REVENUE SHARING AGREEMENT	•	·		·
	16,645	16,645	Cost	256,335
Total	1,317,848	\$ <u>1,269,607</u>		\$ 1,428,293

86-0965394

Federal Statements

Statement 8 - Form 990-PF, Part III, Line 3 - Other Increases

Description		Amount
PRIOR 12/31/08 CONTRIBUTION NOT ON BOOKS	\$	3,040,000
MISC ITEMS ON BOOKS NOT RETURN		57
1099 TIMING DIFFERENCE BOOKS VERSUS RETURN		301
Total	\$_	3,040,358

Statements
Federal

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Name	Address	1	1	•
Address	Relationship	Status	Purpose	Amount
α.	P. O. BOX 14315			
SCOTTSDALE AZ 85267	501	501 C (3)	CHARITABLE PROGRAM	15,000
FOUND FOR BLIND CHILDREN 1235	1235 E. HARMONT DRIVE			
PHOENIX AZ 85020	501	(3)	CHARITABLE PROGRAM	
2334	2334 E. POLK STREET			
PHOENIX AZ 85006		501 C (3)	CHARITABLE PROGRAM	
<i></i>	4710 N. 5TH STREET			
PHOENIX AZ 85012	501	C (3)	CHARITABLE PROGRAM	20,000
GARDENS FOR HUMANITY 2990	2990 VALLEY VISTA DRIVE			
SEDONA AZ 86351	501	C (3)	CHARITABLE PROGRAM	
ER	PO BOX 1074			
MANCOS CO 81328	501	C (3)	CHARITABLE PROGRAM	10,000
MOGOLLON HEALTH ALLIANCE 708	708 E HWY 260			
PAYSON AZ 85541	501	501 C (3)	CHARITABLE PROGRAM	30,000
PO B	PO BOX 306			
PAYSON AZ 85547	501	C (3)	CHARITABLE PROGRAM	15,000
ΞŢ	3218 E. BELL ROAD #203			
PHOENIX AZ 85032	501	C (3)	CHARITABLE PROGRAM	5,000
SEDONA VISUAL ARTIST COAL 251	251 BEAR WALLOW LANE			
SEDONA AZ 86336	501	C (3)	CHARITABLE PROGRAM	2,600
Y FOUND. 400	CATHOLIC COMMUNITY FOUND. 400 E MONROE STREET			
PHOENIX AZ 85004	501	C (3)	CHARITABLE PROGRAM	10,000
SIDE OUT FOUNDATION PO B	PO BOX 223325			
CHANTILLY VA 20153-3325	501	501 C (3)	CHARITABLE PROGRAM	200
				137,800

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form **8868** (Rev 4-2009)

	ment of th	e Treasury Service	•	File a separate application for each return.			
			omatic 3-Month Extension, com	plete only Part I and check this box			▶ X
				Extension, complete only Part II (on page 2 of this for			
Do no	t compl	ete Part II unk	ss you have already been granted	an automatic 3-month extension on a previously filed Fo	rm 8868.		
Par	rt I	Automati	3-Month Extension of Ti	me. Only submit original (no copies needed	l).		-
A corp	oration r	required to file	form 990-T and requesting an auto	omatic 6-month extension—check this box and complete			
Part I	only						▶ 📙
	•	rations (includi ome tax returns	• • • • • • • • • • • • • • • • • • • •	MICs, and trusts must use Form 7004 to request an exte	nsion of		
Electr	ronic Fili	ing (e-file). Ge	nerally, you can electronically file F	Form 8868 if you want a 3-month automatic extension of	ime to file		
one of	f the retu	rns noted belo	(6 months for a corporation requi	ired to file Form 990-T). However, you cannot file Form 8	868		
electro	onically if	(1) you want t	e additional (not automatic) 3-moi	nth extension or (2) you file Forms 990-BL, 6069, or 8870	, group		
returns	s, or a co	omposite or co	solidated Form 990-T. Instead, yo	u must submit the fully completed and signed page 2 (Pa	ırt II) of Fo	rm	
8868.	For more	e details on the	electronic filing of this form, visit v	ww.irs.gov/efile and click on e-file for Charities & Nonpro	fits.		
Туре	or	Name of Exe	mpt Organization		Employ	er iden	tification number
print							
File by			Y C. CARIS FAMILY		<u> 86-0</u>	9653	394
due dat filing yo			et, and room or suite no. If a P.O.	box, see instructions.			
return :	See		BOX 14315				
instructi	bons	SCOTTS	•	or a foreign address, see instructions. AZ 85267-4315			
Check	type of		led (file a separate application for				
\Box	Form 99			Form 990-T (corporation)			Form 4720
	Form 99			Form 990-T (sec 401(a) or 408(a) trust)			Form 5227
П	Form 99	0-EZ		Form 990-T (trust other than above)		П	Form 6069
X Form 990-PF					Form 8870		
			· · · <u>· · · · · · · · · · · · · · · · </u>				
• Th	ne hooks	are in the care	of ▶ SHIRLEY CAR	IS FOUNDATION			
•••	ic books						
Тe	elephone	No. ▶		FAX No. ▶			_
• If t	the orgar	nization does n	ot have an office or place of busine	ess in the United States, check this box			▶ 🗌
• If t	this is for	a Group Retu	n, enter the organization's four dig	it Group Exemption Number (GEN)	. If this ıs		
for the	whole g	roup, check thi	s box ▶ ∐ . If it is for	part of the group, check this box and	attach		
a list w	vith the n	ames and EIN	of all members the extension will	cover			
				n required to file Form 990-T) extension of time eturn for the organization named above The extension is			
		ganızation's re		cidin for the organization named above. The extension is	•		
ì		calendar year					
i		lax year beginr		a .			
•	٠ ٠	,	: /				
2 I	If this tax	year is for les	than 12 months, check reason:	Initial return Final return Change	ın accoun	ting pend	od
3a i	If this ap	plication is for l	orm 990-BL, 990-PF, 990-T, 4720), or 6069, enter the tentative tax,	[
-			credits. See instructions		3a	\$	0
	-		· · · · · · · · · · · · · · · · · · ·	efundable credits and estimated tax			1 27.6
•			any prior year overpayment allow		3b	\$	1,376
				payment with this form, or, if required,			
			n or, if required, by using EFTPS (Electronic Federal Tax Payment		۱.	^
		See instructio		with this Form 0000 . F 0450 TO	3c	1 \$	0
	-	rare going to n structions.	ane an electionic lung withgrawal	with this Form 8868, see Form 8453-EO and Form 8879	·EU		

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