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Extension to 8/15/10

Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

OMB No 1545-0052

| G Check at the stappy Interest required Interest return of a former public churry Name change G Check at the RS Name of foundation Address change Address change I the Name of foundation Paper Address change Paper Address change I the Name of foundation Paper Pa | | Revenue Service Note: The Touridation may b | e able to use a copy of this | return to satisfy state repor | rong redunerneurs | |
|--|---------------|--|---|---|---------------------------|---|
| Use the IRS Name of foundston | For ca | lendar year 2009, or tax year beginning | | ` | | |
| Use the IRS Name of foundation | G Ch | | · | | | 1 |
| Description | | Amended return | Address chang | je <u>Ll</u> | | |
| Otherwise, Creative Providers Foundation pint pint pint pint pint pint pint pint | Use ti | he IRS Name of foundation | | | A Employer identification | number |
| print Number and state (or PO - Dos normore I multi is not delivered to street address) Reemvalue T19 - 687 - 6011 See Specific Dy or town, state, and 2IP code | lat | pel. | • • • | | 00 0100507 | , |
| or type. D. O. Box 729 Creampton population particular provide instructions Divide, CO 80.81.4 H. Check type of organization XS section 501(c)(3) exempt private foundation Divide, CO 80.81.4 H. Check type of organization XS section 501(c)(3) exempt private foundation Divide, Co Co Region organizations, check here Creampton particular provides Divide, Co Co Region organizations, check here Creampton particular provides Divide Co Co Region organizations, check here Divide Co Co Co Region organizations, check here Divide Co Co Co Co Co Co Co C | | · · · · · · · · · · · · · · · · · · · | | | | · |
| See Specific (by or fown, 13th, and 2IP code instructions) Di Voi de , CO 80814 H Check type of organization (a) Section 501(c)(3) exampt private foundation Section 4947(c)(1) nonexempt charitable trust: | | | ivered to street address) | Room/suite | | |
| Instructions Day 10 Div Ce Ce 80 81 4 | | | | | /19-68/-60 | 11 |
| H Check type of organization \$\times\$ section \$\frac{1}{3}\$ sect | | | | | | · |
| Section 4947(a)(1) nonexempt charatable trust. Other taxable private foundation of the form of the for | | Divide, CO 80814 | | | 2 Foreign organizations | s, check here |
| Farm market value of all assets at end of year Accounting method Cash | H Ch | | | | check here and attach of | omputation Days test |
| Compare Com | <u> </u> | | | | | |
| Part I Analysis of Revenue and Expenses Part I Analysis of Revenue and Expenses (a) Revenue and (b) Net Investment (c) Adjusted net (d) Potential monome (d) Potential monome (e) Potential monome (e) Potential monome (e) Potential monome (e) Adjusted net (e) Potential monome (| | · · · · · · · · · · · · · · · · · · · | • | L Accrual | , ., | • • |
| Part II Analysis of Revenue and Expenses (a) Revenue and expenses (b) Net Investment (c) Adjusted net (d) Deturnment (d) Deturnm | • | | | 2000 | | - 1 1 |
| 1 Contributions, gifts, grants, etc. received 215,000. N/A | | | | | | |
| 1 Contributions, grifs, grants, etc., received 2 Check ▶ | Par | (The total of amounts in columns (b), (c), and (d) may not | | | | for charitable purposes |
| 2 Check ▶ de sevendades a rot requend to steur Sch 8 3 cards investimants 4 Dividends and interest from securities 5a Gross rents 5 Di Net medial fromer or (fors) 68 Net gran or floss) from sale of sasets not on line 10 5 discuss sates price for all 69 Net gran or floss) from sale of sasets not on line 10 60 discuss sates price for all 60 discuss sates price for all 61 Net Statement 1 62 Price for all sales and sales sales and sole in reliable 1 63 Net Statement 1 64 Logical sales sales for sales and sales and sales and sole sales for sales and sale | $\overline{}$ | necessarily equal the amounts in column (a)) | , | *************************************** | | (cash basis only) |
| 3 sinterest on assumes and temporary 40. 40. Statement 1 4 Dividends and interest from securities 5a Gross rents 5a Gross rents 6a Net special from securities 7 Capital gain not income (from Part V, line 2) 8 Net short-ferm capital gain 9 Income modifications 10 Cross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plais, employee shorteds 15 Lead Lead lines 1 through 11 17 Interest 18 Legal fees 19 Accounting fees 10 Cettler profits plant/Ager G | | | 213,000. | | 11/15 | |
| 4 Dividends and interest from securities 5a Gross rents 5 between the minimum or of loss) 6a Medigan or Dead from sale of sesets not on line 10 bestets on line do for all best to | _ | Interest on savings and temporary | 40 | 40 | | Statement 1 |
| Sa Gross rents b Net gain or (losa) from sale of assets not on line 10 b assets on line 16 b b assets on line | | 3 cash investments | 10. | | | Death I |
| b Net remail income or (loss) 8 | 3 | | | | | *************************************** |
| ## Air Lear or Quest) from sale of assets not on line 10 b assets on the Quest of the Control of | | | | | | |
| b Gross sates prior for all assess on line 88 | | | | | | *** 1.5 |
| A Pospita gian for incores (more profit year to part t | ₽ 3 | _ Gross sales price for all | | | ļ | |
| 8 Net short-term capital gain | ₹ § | | *************************************** | 0. | | |
| 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 Cother processional legs of 2010 2 Cother processional legs of 2010 2 Travel, conferences, and meetings 2 Printing and publications 2 Total operating and administrative expenses and disbursements. Add lines 24 and 25 2 Subtract line 26 from line 12 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 CAdjusted net Income (if negative, enter -0-) 2 Control to the control of negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) | ~ુ હૈ | | | | | |
| 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 Cother processional legs of 2010 2 Cother processional legs of 2010 2 Travel, conferences, and meetings 2 Printing and publications 2 Total operating and administrative expenses and disbursements. Add lines 24 and 25 2 Subtract line 26 from line 12 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 CAdjusted net Income (if negative, enter -0-) 2 Control to the control of negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) | ũ | · • | | H-H-H-H-H-H-H-H-H-H-H-H-H-H-H-H-H-H-H- | | .,, ',,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 Cother processional legs of 2010 2 Cother processional legs of 2010 2 Travel, conferences, and meetings 2 Printing and publications 2 Total operating and administrative expenses and disbursements. Add lines 24 and 25 2 Subtract line 26 from line 12 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 CAdjusted net Income (if negative, enter -0-) 2 Control to the control of negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) | | Gross sales less returns | | | | |
| 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 Cother processional legs of 2010 2 Cother processional legs of 2010 2 Travel, conferences, and meetings 2 Printing and publications 2 Total operating and administrative expenses and disbursements. Add lines 24 and 25 2 Subtract line 26 from line 12 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 CAdjusted net Income (if negative, enter -0-) 2 Control to the control of negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) | | | | · · · · · · · · · · · · · · · · · · · | | [|
| 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1 Cother processional legs of 2010 2 Cother processional legs of 2010 2 Travel, conferences, and meetings 2 Printing and publications 2 Total operating and administrative expenses and disbursements. Add lines 24 and 25 2 Subtract line 26 from line 12 2 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 Adjusted net Income (if negative, enter -0-) 1 CAdjusted net Income (if negative, enter -0-) 2 Control to the control of negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) 2 Adjusted net Income (if negative, enter -0-) | \$ | - | | | | |
| 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee tenefits 16a Legal fees | 5 1 | | | | | |
| 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other protection and people of the protection and people of the protection and people of the people of t | | 12 Total. Add lines 1 through 11 | 215,040. | 40. | | |
| 15 Pension plans, employer benefits 16a Legal fees RECEIVED 2 b Accounting fees b Accounting fees Contempose point (Approximate September 2) 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) | 1 | 3 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| 16a Legal fees b Accounting fees c Other processional fees c Other procession and fees c Other p | 1 | 4 Other employee salaries and wages | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | . 1 | 5 Pension plans, employee benefits | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | <u>8</u> 1 | 16a Legal fees RECEIVED | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | | b Accounting fees Stmt 2 | 1,185. | 0. | | 0 |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | Ä | c Other propositional feets a sound of | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | 1 <u>8</u> | 17 Interest | <u></u> | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | <u>E</u> 1 | | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | : <u>S</u> 1 | 19 Depreciation and depoton to 1 1 7 | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | 통 | 20 Occupancy | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | Ψ P | · · · · · · · · · · · · · · · · · · · | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | E 2 | · · | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | E | · | | | | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | ig i | | 1 105 | 0 | • | |
| 25 Contributions, gms, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | ŏ. | • | 1,183. | 0. | | |
| Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | 2 | | 217,300. | | | 211,300 |
| 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | 2 | · | 210 605 | n | | 217 500 |
| a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | -+. | | 210,005. | V • | | 217,500 |
| b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A | | | <2 615 | • | | |
| c Adjusted net income (if negative, enter -0-) | | | 73,043. | | | |
| | | | | 40 | N/A | † |
| | 923501 | HA For Privacy Act and Panerwork Reduction | Act Notice see the instruc | linns | | Form 990-PF (2009 |

Page 2

| Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning or year | End of y | ear |
|--|--------------------|---------------------------------------|--|
| column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 Cash - non-interest-bearing | 3,218. | <427.> | <427. |
| 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 | 1 | 1 | |
| | | | |
| 9 Prepaid expenses and deferred charges | | | |
| 9 Prepaid expenses and deferred charges | | | |
| 10a investments - 0 5, and state government obligations | | | |
| b Investments - corporate stock | | | |
| c Investments - corporate bonds | <u></u> | | |
| 11 Investments - land, buildings, and equipment basis | | | |
| Less. accumulated depreciation | | | |
| 12 Investments - mortgage loans | | | |
| 13 Investments - other | | | |
| 14 Land, buildings, and equipment basis | | | |
| Less. accumulated depreciation | 1 | [| |
| 15 Other assets (describe ► | | | |
| | | | |
| 16 Total assets (to be completed by all filers) | 3,218. | <427.> | <427. |
| 17 Accounts payable and accrued expenses | 0,000 | | |
| 18 Grants payable | | | |
| 10.04 | | | |
| in the present teveline | | · · · · · · · · · · · · · · · · · · · | |
| 20 Loans from officers, directors, trustees, and other disqualified persons | | | |
| 20 Loans from officers, directors, trustees, and other disqualified persons 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. | | | |
| 24 Unrestricted | | | |
| 25 Temporarily restricted | | | |
| 26 Permanently restricted | | | |
| Foundations that do not follow SFAS 117, check here | | · · | |
| and complete lines 27 through 31. | | | |
| Temporanly restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances | 0. | 0. | |
| 28 Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | |
| Retained earnings, accumulated income, endowment, or other funds | 3,218. | <427.> | |
| 30 Total net assets or fund balances | 3,218. | <427.> | |
| 2 Job Fold hot dosoid of faile buildhous | 3,2100 | 127 | |
| 31 Total liabilities and net assets/fund balances | 3,218. | <427.> | |
| | | | |
| Part III Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| (must agree with end-of-year figure reported on prior year's return) | | 1 | 3,218. <3,645. |
| 2 Enter amount from Part I, line 27a | | 2 | |
| 3 Other increases not included in line 2 (itemize) ▶ | | 3 | 0. |
| 4 Add lines 1, 2, and 3 | | 4 | <427. |
| 5 Decreases not included in line 2 (itemize) | | 5 | 0. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | | | 1407 |
| Time of finite of fall in the | olumn (b), line 30 | 6 | <427.> |

| b NONE (e) Gross sales price (f) Depreciation allowed (g) Cost or either bruss plus expesse of sale (e) plus (f) minus (g) (g) Gross sales price (e) plus (f) minus (g) (g) Gross sales price (e) plus (f) minus (g) (g) Gross sales price (h) Same (cot | (a) List and des | cribe the kind(s) of property sold (varehouse, or common stock, 200 | (e g., real estate, | <u> </u> | P | low acquired - Purchase - Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|---|---|---|----------------------|---------|--|--|---------------------------------------|
| (e) Gross sales pince (f) Deprecation allowed (g) Cost or other basis (h) Data (7) minus (g) (e) Gross sales pince (f) Edentification (gradievable) (g) Cost or other basis (h) Gain or floss) (h) plus (7) minus (g) (h) plus (g) minus (plus (g) minus (g) (h) plus (g) | a | | | | | | | |
| (a) Gross sales price (b) Expressions allowed (g) Cost or other basis (h) Gam or floss) (e) plus (f) minus (g) complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (f) FMV as of 12/31/69 (g) FMV as of 12/31/69 (g) Adjusted basis (h) Excess of col. (h) (h) any over col. (h), if | b NC | ONE | | · · | | | | |
| (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or floss) (e) Plus expense of sale (h) Gain or floss) (f) FMV as of 12/31/69 (g) Agusted basis as of 12/31/69 (g) Faces of col (f) over col. (g), dit not less hain -0-) or col. (g), dut not less hain | C | | | | | | | |
| (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or floss) (e) Plus expense of sale (h) Gain or floss) (f) FMV as of 12/31/69 (g) Agusted basis as of 12/31/69 (g) Faces of col (f) over col. (g), dit not less hain -0-) or col. (g), dut not less hain | d | | - | | | | | |
| (or allowable) plus expense of sale (e) plus (f) minus (g) b c c d d c Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (li) Gains (Coli (h) gain minus (g) (li) F M V as of 12/31/69 (li) Adjusted basis (k) Excess of coli (h) column (h) and owned by the foundation on 12/31/69 (li) Gains (Coli (h) gain minus col (k), but not less than -0-) or Losses (from coli (h)) 2 Capital gain net income or (net capital loss) (li) gain, also enter in Part I, line 7 If (buss), enter -0- in P | | | | | | | | |
| December only for assets showing gain in column (h) and owned by the foundation on 12/31/69 col (k), but not less than -0-) or (l) FMV as of 12/31/69 (l) Adjusted basis so fit 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (i) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (ii) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (ii) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (ii) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (ii) as of 12/31/69 (l) Excess of col (i) over col. (i), if any column (ii) as of 12/31/69 (l) Excess of col (i) col (ii) any column (iii) as of 12/31/69 (l) Excess of col (i) col (ii) any column (iii) as of 12/31/69 (l) Excess of col (ii) col (iii) any column (iii) as of 12/31/69 (l) Excess of col (ii) as of 12/31/69 (l) Excess of col (ii) as of 12/31/69 (l) Excess of 12/31/69 (l) Excess of col (ii) as of 12/31/69 (l) Excess of 12/31 | (e) Gross sales price | | | | | | (h) Gain or (loss) (e) plus (f) minus (| g) |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Excess of cot (i) (ii) Excess of cot (ii) (iii) Excess of cot (iii) (iii) Excess of cot (iii) (iv) Excess of cot (iv) Exc | a | | | - | | · <u>-</u> . | | · |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FM V as of 12/31/69 (ii) Adjusted basis (ii) Excess of col. (i) over col. (ii), if any col. (iii) Basis (for col. (iii) Ba | b | | | | | | , | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) FMV as of 12/31/69 (I) Adjusted basis as of 12/31/69 (I) Adjusted basis (N) Excess of coil (i) over coil (ii), if any coil (iii), but not less than 40-) or Losses (from coil (iii)) over coil (iii), if any coil (iii), but not less than 40-) or Losses (from coil (iii)) or coil (iii), if any coil | C | | | | | | | |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) F M V as of 12/31/69 (I) Adjusted basis (k) Excess of col (i) col (ii), but not less than 6-) or col (ii), but not less than 6-) or col (iii), and more col (iii), and more col (iii), and more col (iii), and iiii), and complete that part using a 1% tax rate Seet the Part VIII, line 8. (I) Gains (Col (ii), but not less than 6-) or col (iii), and more col (iii), and more col (iii), and more col (iii), and more col (iiii), and more col (iii), and col (iii), and more col (iii), and col (iiii), and col (iii), and col (iii), and coll (iiii), and | d | | | | | | | |
| (I) FMV as of 12/31/69 (I) Adjusted basis as of 12/31/69 (II) Adjusted basis as of 12/31/69 (II) Adjusted basis as of 12/31/69 (IV) Excess of cot (IV) over cot. (IV), if any over | 8 | | | | | | | |
| (I) F MV as of 12/31/69 a | Complete only for assets show | ing gain in column (h) and owned | by the foundation | n on 12/31/69 | | • | (I) Gains (Col (h) gain | minus |
| Capital gain net income or (net capital loss) (if gain, also enter in Part I, line 7 (if (loss), enter -0- in Part I, line 7 (if (loss), enter -0- in Part I, line 7 (if (loss), and enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 7 If (loss), | (i) F M V as of 12/31/69 | | | | | c | | |
| Capital gain net income or (net capital loss) Resolved To Capital gain net income or (net capital loss) Capital gain net income or (net capital loss) Resolved To Capital gain net income or (net capital loss) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 7 If gain, also en | a | | | | | | | |
| d e Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income N/A f section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income N/A f section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If (loss), enter -0- in Part I, line 8 Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions before making any entries (col (b) divided by col (c)) 2008 2007 2006 2007 2006 2004 I Total of line 1, coliumn (d) 3 Adjusted qualifying distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of nonchantable-use assets for 2009 from Part X, line 5 4 Inter the net value of nonchantable-use assets for 2009 from Part X, line 5 5 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 5 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater (than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate see the Part VI instructions | • | | | | | | | |
| Example of the standard of the | <u> </u> | | | | | | | |
| Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundation subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income For optional use by domestic private foundation 4940(a) tax on net investment income For optional use by domestic private foundation 4940(a) tax on net investment income For optional use by domestic private foundation 4940(a) tax on net investment income Fo | d | | | | | | | |
| Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 8, column (c) If (loss), enter -0 - in Part I, line 6, column (c) If (loss), enter -0 - in Part I, line 7, column (c) If (loss), enter -0 - in Part I, line 7, column (c) If (loss), enter -0 - in Part I, line 7, column (c) If (loss), enter -0 - in Part I, line 9, column (c) If (loss), enter -0 - in Part I, line 9, column (c) If (loss), enter -0 - in Part I, line 2, column (c) If (loss), enter -0 - in Part I, line 2, column (c) If (loss), enter -0 - in Part I, line 2, column (c) If (loss), enter -0 - in Part I, line 2, column (c) If (loss), enter -0 - in Part I, line 2, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line 4, column (c) If (loss), enter in Part I, line | e | | | | | | | |
| Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If gain, also enter in Part I, line 8, column (c) If (loss), enter 0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income N/A section 4940(d)(2) applies, leave this part blank vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes The first the appropriate amount in each column for each year, see instructions before making any entries (a) Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by col (c)) 2007 2006 2007 2006 2007 2006 2007 1 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of nonchantable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Capital gain net income or (net o | apital loss) { If gain, also e | nter in Part I, line r -0- in Part I, line | 7 97 | } | 2 | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income N/A If section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes Yes Yes Yes Yes Yes Yes Ye | | oss) as defined in sections 1222(5 | | | ٦ | | | |
| For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) N/A section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes Yes Yes Yes Yes Yes Yes Ye | | | | | [| 3 | | |
| Section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Pres, the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries Calendar year (or lax year beginning in) Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by col (c)) | Part V Qualification I | Under Section 4940(e) | for Reduced | d Tax on Net | Inv | estment Ir | come | |
| f section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (a) Base period years Calendaryear (or lax year beginning in) Adjusted qualifying distributions Net value of nonchantable-use assets (col (b) divided by col (c)) 2008 2007 2006 2005 2004 2 Total of line 1, column (d) A Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of nonchantable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 7 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate see the Part VI instructions | For optional use by domestic priva | te foundations subject to the secti | on 4940(a) tax o | n net investment ir | ncome | .) | | N/A |
| Enter the appropriate amount in each column for each year, see instructions before making any entries (a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Vas the foundation liable for the se | ction 4942 tax on the distributable | • • | • | riod? | | | Yes N |
| Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions 2008 2007 2006 2005 2004 ? Total of line 1, column (d) A Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Lenter the net value of nonchantable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Inter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | es | | · · · · · · · · · · · · · · · · · · · | |
| 2008 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Finter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | (a) Base period years | (b) | | | (c) | ntable-use asse | | utión ratio |
| 2007 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Total of line 1, column (d) 2 Add lines 5 and 6 Total of line 1, column (d) 2 Add lines 5 and 6 Total of line 1, column (d) 4 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | <u> </u> | ······ | | | | ``` | · · · · · · · · · · · · · · · · · · · |
| 2006 2005 2004 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | | | | |
| 2005 2004 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 The enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | | | | |
| Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Finter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | | | | |
| 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 4 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | | | - | |
| Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | 1 | | 1 | | | | |
| the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | | | _ | | 2 | |
| Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | | | ital on line 2 by 5 | , or by the number | r of ye | ars | 3 | |
| Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Enter the net value of noncharita | ble-use assets for 2009 from Part | t X, line 5 | | | | 4 | ··· |
| Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Multiply line 4 by line 3 | | | | | | 5 | |
| Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Enter 1% of net investment inco | me (1% of Part I, line 27b) | | | | | 6 | |
| If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions | Add lines 5 and 6 | | | | | | 7 | |
| See the Part VI instructions | | | | | | | 8 | |
| | If line 8 is equal to or greater that See the Part VI instructions | In line 7, check the box in Part VI, | line 1b, and com | plete that part usin | ig a 1 | % tax rate | | 000 55 |

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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

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.

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

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

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

Х

3b

4a

Yes X No

during the year?

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0.

All other program-related investments. See instructions

Total. Add lines 1 through 3

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, se | e 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. |
| b | Average of monthly cash balances | 1b | <u> </u> |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 26,368. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 26,368. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 396. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 25,972. |
| 6 | Minimum Investment return. Enter 5% of line 5 | 6 | 1,299. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,299. |
| 2a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009 (This does not include the tax from Part VI) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 1,299. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,299. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7_ | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 1,299. |
| = | art XII Qualifying Distributions (see instructions) | 1 | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 217 500 |
| _ | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 217,500. |
| b | g | 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 | | |
| a | many many the second second | 3a | |
| b | | 3b | 217 500 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 217,500. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | ^ |
| _ | income Enter 1% of Part I, line 27b | 5 | <u>0.</u> 217,500. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years | qualities for t | ne section |

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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 | | | u' ahdar sa malanzadan 'idan | 1,299. |
| 2 Undistributed income, if any, as of the end of 2009 | | | | |
| a Enter amount for 2008 only | | | 0. | |
| h Total for prior years. | | _ | | |
| | Herbitation from the Herbitation of | 0. | | |
| 3 Excess distributions carryover, if any, to 2009 | | | | |
| a From 2004 | | | | |
| t From 2005 c From 2006 183,628. | | | | |
| d From 2007 344, 368. | | | | |
| e From 2008 188, 331. | | | | |
| f Total of lines 3a through e | 716,327. | | | |
| 4 Qualifying distributions for 2009 from | 71070276 | | | ····· |
| Part XII, line 4. ►\$ 217,500. | | | | |
| a Applied to 2008, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | · | 11 11111 11 4-14 1 1 1 1 1 1 1 1 1 1 1 1 | | - Walionalian was a sanata a |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | 'i ' .''iith.te |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2009 distributable amount | | · ···································· | | 1,299. |
| e Remaining amount distributed out of corpus | 216,201. | | | |
| 5 Excess distributions carryover applied to 2009 | 0. | | | 0. |
| (if an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 932,528. | | | |
| 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 | | ······ | | <u></u> |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2010 | | | | 0. |
| 7 Amounts treated as distributions out of | | We'll-delicated the state of th | | |
| 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 | 0. | | | |
| 9 Excess distributions carryover to 2010. | · <u>-</u> | , | | |
| Subtract lines 7 and 8 from line 6a | 932,528. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2005 | | | | |
| b Excess from 2006 183,628. | | | | |
| E Excess from 2007 344, 368. | | | | |
| d Excess from 2008 188, 331. | | | | |
| B Excess from 2009 216, 201. | | | | Form QQD_DE (2009) |
| | | | | Farm CICIO LIE (2000) |

Creative Providers Foundation

Form 990-PF (2009)

92-0192597

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| If recipient is an individual show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution | 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | |
|---|--|---|------------|---------------------|----------|--|--|--|
| See Statement 5 Total Approved for future payment | Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | Amount | | | |
| See Statement 5 Total Approved for future payment | Name and address (home or business) | or substantial contributor | recipient | Contribution | , | | | |
| Total b Approved for future payment 217,50 | a Paid during the year | or substantial contributor | recipient | | | | | |
| b Approved for future payment | | | | | 217 500 | | | |
| Total > 3b | None | | | | 217,500. | | | |

(a) Business code

Unrelated business income

(b) Amount Excluded by section 512, 513, or 514
(C)
Exclusion
code (d)
Amount

(e) Related or exempt

function income

Form 990-PF (2009)

1 Program service revenue

Enter gross amounts unless otherwise indicated.

Part XVI-A Analysis of Income-Producing Activities

| D | | · | | | | |
|--------------------|---|--------------------|--------------------------|-------|--------------------------------|---|
| c | | . | | | | |
| d | | . | | | | |
| e | | | | | | |
| f | | | | | | |
| g Fees | and contracts from government agencies | | | | _ | |
| 2 Membe | rship dues and assessments | | | | | |
| 3 Interest | on savings and temporary cash | | | | | |
| ınvestm | ents | | | | | 40. |
| 4 Dividen | ds and interest from securities | | | | | |
| 5 Net rent | al income or (loss) from real estate | | | | | *************************************** |
| | -financed property | | | | | |
| | debt-financed property | | | | | |
| | al income or (loss) from personal | | | | | |
| property | | | | | | |
| | vestment income | | | | | |
| | | | | | | |
| | (loss) from sales of assets other | | | | | • |
| than inv | | - | | | ļ | |
| | ome or (loss) from special events | - | | | | |
| | rofit or (loss) from sales of inventory | | | | | |
| 11 Other re | venue | | | | | |
| a | | . | | | | |
| b | | | | | | <u></u> |
| c | | | | | | |
| d | | | | | | |
| e | | | | L | | |
| 12 Subtota | I Add columns (b), (d), and (e) | | 0. | | 0. | 40. |
| 3 Total. A | add line 12, columns (b), (d), and (e) | | | | 13 | 40. |
| (See works | heet in line 13 instructions to verify calculations) | | | | | |
| Part X | | to the Asse | mplichment of Ev | · | nt Durmosos | <u> </u> |
| Part A | Relationship of Activities | to the Accor | Tipiisiiilletit üi Ex | em | pt rui poses | |
| Line No. | Explain below how each activity for which inc | ome is reported in | column (e) of Part XVI-A | contr | buted importantly to the accor | nplishment of |
| lacktriangle | the foundation's exempt purposes (other than | | | | • | |
| 3 | Interest earned on ban | k checki | ng acct hol | dir | ng funds recei | ved from |
| 3 | contributions until pa | id to ot | her 501 (C) | 3 | charities | |
| | F | | <u> </u> | | | · · · · · · · · · · · · · · · · · · · |
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| | | | | | | |
| 923621 | | | | | - | Form 990-PF (2009) |
| 923621 02-02-10 | | | | | | Form 990-PF (200 |

| | | | ive Ploviders | | | 192391 | | ige 13 |
|-----------|--------------------------------|----------------------------------|-------------------------------------|--|---|--------------------|-----------|-------------|
| P | art X\ | Information Re Exempt Organ | | o and Transactions ar | nd Relationships With None | charitable |) | |
| 1 | Did th | e organization directly or indi | rectly engage in any of the follo | owing with any other organization | described in section 501(c) of | | Yes | No |
| | the Co | ode (other than section 501(c |)(3) organizations) or in section | n 527, relating to political organiz | ations? | | | |
| а | Trans | fers from the reporting found | ation to a noncharitable exemp | t organization of. | | | | |
| | (1) (| ash | | | | 1a(1) | | X |
| | (2) | Other assets | | | | 1a(2) | | X |
| t | Other | transactions | | | | | | |
| | (1) 8 | ales of assets to a noncharita | ible exempt organization | | | 1b(1) | | X |
| | (2) F | urchases of assets from a no | encharitable exempt organizatio | n | | 1b(2) | | X |
| | (3) F | tental of facilities, equipment, | or other assets | | • | 1b(3) | <u> </u> | X |
| | | Reimbursement arrangements | | | | 1b(4) | | X |
| | | oans or loan guarantees | | | | 1b(5) | <u> </u> | X |
| | | | embership or fundraising solicit | | | 1b(6) | ļ. — | X |
| C | | | ailing lists, other assets, or paid | | | 1c | l | <u> </u> |
| d | | • | • | • • | ays show the fair market value of the go | | sets, | |
| | | • • • | | | in any transaction or sharing arrangem | ent, snow in | | |
| 7-1 | | , - ' ' | other assets, or services receiv | | (4) - | | | |
| (a) | Line no | (b) Amount involved | | table exempt organization | (d) Description of transfers, transactions | s, and sharing ar | rangeme | ents |
| | | | N/2 | A. | | | | |
| _ | | | - | | | | | |
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| | | | | | | | | |
| | ın sed | • | er than section 501(c)(3)) or in | one or more tax-exempt organize section 527? | ations described | Yes | X | □ No |
| | , 11 16 | (a) Name of or | | (b) Type of organization | (c) Description of rela | tionship | | |
| | | N/A | | (-)), | | • | | |
| | | | | | | | | |
| | | | | | | | | |
| _ | | | | | | | | |
| | | | | | | | | |
| • | and cor | 1 | | accompanying schedules and statemed on all information of which preparer h | ents, and to the best of my knowledge and belie has any knowledge President | f, it is true, com | ect, | |
| der. | S | gnature of officer or trustee | | Date | Title | | | |
| Sign Here | Paid Preparer's Use Only | Preparer's signature | For Covalit | | te Check if self- 7/23/10 employed ► | reparer's identif | lying nur | nber |
| | Paid epare se On | Firm's name (or yours COV a | ilt & Associate | es, P.C. | EIN ► | | | |
| | ا آجا Use | if self-employed), P • C | . Box 948 | | | | | |
| | _ | address, and ZIP code Colo | orado Springs, | CO 80901 | Phone no(7 | 19) 38 | 1-1 | <u>.737</u> |

Schedule B (Form 990, 990-EZ, or 990-PE)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization Creative Providers Foundation 92-0192597 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

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

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

Name of organization

Employer Identification number

Creative Providers Foundation

92-0192597

| Part I | Contributors (see instructions) | | |
|------------|--|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | Peter C. Kuyper P, O. Box 729 Divide, CO 80814 | \$ | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | Alternatives Foundation c/o Dorsey Whitney 401 E. N. East 8th, Suite 319 Sioux Falls, SD 57103 | \$ 130,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| 23452 02-0 | 1-10 | Schedule B (Form | 990, 990-EZ, or 990-PF) (2009 |

| Form 990-PF Interest on Sav | ings and Tem | porary Cash In | nvestments | Statement | 1 |
|---|------------------------------|-----------------------------------|-------------------------------|--------------------------|-----|
| Source | | | | Amount | |
| Park State Bank & Trust | | | _ | | 40. |
| Total to Form 990-PF, Part I | , line 3, Co | lumn A | = | (| 40. |
| Form 990-PF | Accounti | ng Fees | | Statement | 2 |
| Description | (a) Expenses Per Books | (b) Net Invest- ment Income | (c) Adjusted Net Income | (d) Charita Purpos | |
| Accounting fees | 1,185. | 0. | | | 0. |
| To Form 990-PF, Pg 1, ln 16b | 1,185. | 0. | | | 0. |
| Explanation Explanation State of Colorado does not was General. | ant Form 990 | -PF to be file | ed with Atto | | 3 |
| | f Substantia Part VII-A, | l Contributors Line 10 | | Statement | |
| Name of Contributor | Addr | ess | | | |
| Peter C. Kuyper | | 5 West Highway de, CO 80814 | y 24 | | |
| Alternatives Foundation c/o Whitney | _ | E. N. East 8th | | | |

Sioux Falls, SD 57103

| Form 990-PF | | and Contributions During the Year | _ | | State | ement | |
|--|---|--|-----|--------------|-------|-------|-----|
| Recipient Name and Address | 5 | Recipient Relationship and Purpose of Grant | | cipi Stat | | Amou | nt |
| American Center for Legal Justice Colorado Springs, CO | - | None Charitable donation | 501 | (C) | 3 | 1,0 | 00. |
| Biola University Los Angeles, CA | | None Charitable donation | 501 | (C) | 3 | 5,0 | 00. |
| Central College Pella, IA | | None Charitable donation | 501 | (C) | 3 | 2,5 | 00. |
| Cheyenne Mountain Zoo Colorado Springs, CO | | None Charitable donation | 501 | (C) | 3 | 5 | 00. |
| Community Partners Family Resource Center Colorado Springs, CO | | None Charitable donation | 501 | (C) | 3 | 1,5 | 00. |
| Colorado Springs Christian School Colorado Springs, CO | n | None Charitable donation | 501 | (C) | 3 | 92,5 | 00. |
| Rocky Mountain Kids Inc Colorado Springs, CO | | None Charitable donation | 501 | (C) | 3 | 5 | 00. |
| Community Cupboard Pella, IA | | None Charitable donation | 501 | (C) | 3 | 5 | 00. |

| Creative Providers Foundation | | | 92-0192597 |
|---|-----------------------------|-----------|------------|
| Crossroads of Pella Pella, IA | None Charitable donation | 501 (C) 3 | 2,500. |
| Knox College Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 1,000. |
| Habitat for Humanity Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 1,000. |
| Heartlight Ministries Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 3 1,500. |
| Junvenile Diabetes Research Foundation Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 3 1,000. |
| New Convenant Christian Fellowship Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 80,000. |
| El Paso County Dare Colorado Springs, CO | None Charitable donation | 501 (C) 3 | 5,000. |
| New Horizons Foundation Colorado Springs, CO | None Charitable donation | 501 (C) | 3,000. |
| Peak Vista Health Center of Divide Divide, CO | None Charitable donation | 501 (C) 3 | 3 1,000. |
| Pella Christian High School Pella, IA | None Charitable donation | 501 (C) | 3,000. |

| Creative Providers Foundation | | | | | 92-0192597 |
|---|-----------------------------|-----|-----|---|------------|
| Pella Community Foundation Pella, IA | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Pella Historical Society Pella, IA | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Pella Opera House Pella, IA | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Prospect Homecare Hospice Colorado Springs, CO | None Charitable donation | 501 | (C) | 3 | 500. |
| Little Chapel Food Pantry Colorado Springs, CO | None Charitable donation | 501 | (C) | 3 | 2,500. |
| Sonscape Ministries Colorado Springs, CO | None Charitable donation | 501 | (C) | 3 | 500. |
| Choices Pregnancy Center Woodland Park, CO | None Charitable donation | 501 | (C) | 3 | 5,000. |
| Navigators Colorado Springs, CO | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Woodland Park Christian Church Woodland Park, CO | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Single Parent Family Ministry Colorado Springs, CO | None Charitable donation | 501 | (C) | 3 | 1,000. |
| Total to Form 990-PF, Part XV, li | ne 3a | | _ | | 217,500. |
| | | | _ | | |

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

Form 8868 (Rev 4-2009)

| | you are filing for an Automatic 3-Month Extension, complete only Part I and check this box | ► X | | | |
|---|---|--|--|--|--|
| | ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this ot complete Part II unless you have already been granted an automatic 3-month extension on a previously f | • | | | |
| Par | | | | | |
| | rporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor I only | nplete | | | |
| All oti | her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a pincome tax returns. | n extension of time | | | |
| Elect noted (not a you n | tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi d below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files and click on e-file for Charities & Nonprofits. | ically if (1) you want the additional onsolidated Form 990-T. Instead, | | | |
| Type print | | Employer identification number | | | |
| - | Creative Providers Foundation | 92-0192597 | | | |
| File by the due date for filing your return See Number, street, and room or suite no. If a P.O. box, see instructions. P. O. Box 729 | | | | | |
| Instruc | | | | | |
| | Form 990 Form 990-T (corporation) Form 5 Form 990-EZ Form 990-T (trust other than above) Form 8 Form 990-PF Form 1041-A | 227 069 | | | |
| Te ● If t ● If t | Peter C. Kuyper ne books are in the care of P. O. Box 729 - Divide, CO 80814 elephone No. 719-687-6011 FAX No. 719-687-6788 the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all the properties of the group in the lift is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group is the group is the part of the group is the group i | ▶ ☐ | | | |
| 1 | I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un August 15, 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 | · | | | |
| 2 | If this tax year is for less than 12 months, check reason: Initial return Final return | Change in accounting period | | | |
| 3a | 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. | 3a \$ | | | |
| b | If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated | 25 6 | | | |
| С | tax payments made. Include any prior year overpayment allowed as a credit. Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, | 3b \$ | | | |
| | deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c \$ | | | |
| Cauti | ion. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form | n 8879-EO for payment instructions. | | | |

LHA

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