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Return of Private Foundation

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

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

2009

OMB No 1545-0052

Use the IRS Name of foundation	interr	iai Hev	enue Service 1 1000. The foundation may i		Totalii to Satisty State Topo		<u> </u>
Use the IRS Name of toundation Animal Control Anima	For	calen	dar year 2009, or tax year beginning MAR	1, 2009	, and ending	FEB 28, 2010	
Use the IRS Name of foundation A Employer identification number Ay HENGES CHARITABLE TRUST Ay HENGES CHARITABLE TRUST A HENGES CHARITABLE A HENGES C	G C	Check	all that apply Initial return	Initial return of a fo	rmer public charity	Final return	
See Specific City or fown, state, and 2P cross 198			Amended return	Address chang	ge 🔲	Name change	
Table Day Table Day Table Day	lico	the	Name of foundation			A Employer identification	number
Otherwise, JAY HENGES CHARITABLE TRUST 14133 SHORELINE DRIVE 8 Specified (1914) 15 Check type of organization (2014) 291–6600 16 Section 497(3) Innovation and Process 16 Fart market value of all seasons and enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated or an enterest to stream the trust (1914) Innovated (1914) In		-	no l				
print if yet in the control of the c			se JAY HENGES CHARITABLE	TRUST		43-1197938	
or type 4133 SHORELINE DRIVE C. 4334 291-6600 C. rescription patients on a processor C. rescription patients C. rescription C. rescription patients C. rescription C. rescription patients C. rescription	-	_		livered to street address)	Room/suite	B Telephone number	
See Spetific City for form, stafe, and 2/8 code EARTH CITY MO 630.45—1211 H Check type of organization [X] Section 501(c)(3) exampt private foundation Is section 4947(s)(1) nonexempt charitable trust Other tasable private foundation If arm market value of all sasests and ord year Accounting method XI csch Accounting form Part II, col. (c), Inc 16) Is arm market value of all sasests and ord year Accounting method XI csch XI	0	r type	4133 SHORELINE DRIVE				600
Instructions EARTH CITY, MO 63045-1211 Check type of organization X section 501(o)(3) exempt private foundation Section 4947(3)(1) noneampt charitable trust Other taxable by most foundation If part market value of all exsets at each of year J Accounting method XI cash Accrual If provide foundation If provide foundation			City or town state and ZIP code				
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Section 4947(a)(1) nonexempt chantable trust	H (hack				2. Foreign organizations me	eting the 85% test,
Fair market value of all assets at end of year Accounting method Cosh Accounting method Cosh Accounting method Cosh Accounting method Cosh		_			tion		
## If the foundation is in a 60-menth termination in 198 g 661. Part I, column (of must be on cash basis) Fit the foundation is in a 60-menth termination in 198 g 661. Part I, column (of must be on cash basis) Fit the foundation is in a 60-menth termination increases and expenses and expenses and expenses and expenses per books (b) Net investment income increases and in							
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The foter of amounts in columns (b), (c), and (d) may not necessary equal the amounts in column (a), (c), and (d) may not necessary equal the amounts in column (a), (c), and (d) may not necessary equal the amounts in column (a), and a column (a),			· · · · · · · · · · · · · · · · · · ·				4.11
1 Contributions, girts, grants, etc. received 2 Check ▶	Pa	art i	(The total of amounts in columns (b), (c), and (d) may not				for charitable purposes
2 cneck		-		, ,	income		(cash basis only)
Travel continues and temporary				11,000.	·····	N/A	
Comparison of officers Comparison of Offic		2					
5a Gross rents D Not rental income or (ploss) 6a Not game or creat from sale of assets not on line 10 D creates on line 6a B Net short-term capital gam Income modifications 10a and allowances D Less Cost of goods sold C Gross profit or (loss) 1 Other income 1 Total Add lines 1 through 11 1 Compensation of officers, precious, part of the compensation		3	cash investments	0.050			
D Net rental income or (boss) B Net pain or (boss) from base of assets not on line 10 b Gross scale prose for a large of the pain of the		4	Dividends and interest from securities	2,352.	2,352.		STATEMENT 1
Sale		5a	Gross rents			··-	
b Gross seles prize for all both control of the selection in the Sa of Ceptial gan net income (from Part IV, line 2)		b	Net rental income or (loss)				[
8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and silvamees 1 Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 13,352. 2,352. 13 Compensation of officers, function, beginned to 1 14 Other employee salaries and wedges 15 Pension plans, employee benefits JUN 2 8 20 10 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 2 931. 931. 00 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 3 146. 146. 00 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 10,000 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements. Add lines 24 and 25 11,077. 1,077. 10,000	a	6a					
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8 Net short-term capital gain 9 Income modifications Gross sales less returns 10a and silvamees 1 Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 13,352. 2,352. 13 Compensation of officers, function, beginned to 1 14 Other employee salaries and wedges 15 Pension plans, employee benefits JUN 2 8 20 10 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 2 931. 931. 00 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 3 146. 146. 00 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 10,000 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements. Add lines 24 and 25 11,077. 1,077. 10,000	eve	7			0.		
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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	حق	24	Total operating and administrative				
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>.</u>		expenses Add lines 13 through 23	1,077.	1,077.		0.
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	-0	25	Contributions, gifts, grants paid	10,000.			10,000.
C Adjusted net income (If negative, enter -0-)							
C Adjusted net income (If negative, enter -0-)	Ш		•	11,077.	1,077.		10,000.
C Adjusted net income (If negative, enter -0-)	Z						
C Adjusted net income (If negative, enter -0-)	A	!		2,275.	1	94	,
C Adjusted net income (If negative, enter -0-)	Ç	ì.	· ·		1,275.	+H+'	1+1+4+4+++++++++++++++++++++++++++++++
	S					N/A	
	9235			Act Notice, see the instruct	ions.	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2009)

Page 2

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	491.	539.	539.
	2	Savings and temporary cash investments	19,468.	2,120.	2,120.
	3	Accounts receivable			· · · · · · · · · · · · · · · · · · ·
		Less allowance for doubtful accounts			
	4	Pledges receivable ►			1
		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			
sts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	108	Investments - U.S. and state government obligations			
	t	Investments - corporate stock STMT 4	663,856.	683,431.	196,202.
	0	: Investments - corporate bonds			
	11	Investments land, buildings and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			The state of the s
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	683,815.	686,090.	198,861.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	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			
ý		and complete lines 24 through 26 and lines 30 and 31.			
Ce	1	Unrestricted			
alai	25	Temporarily restricted			
e E	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balance		and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds	683,815.	686,090.	
SSe	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
¥,	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ž	30	Total net assets or fund balances	683,815.	686,090.	
		-	600 015		
	31	Total liabilities and net assets/fund balances	683,815.	686,090.	
P	art	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		
		t agree with end-of-year figure reported on prior year's return)		1	683,815.
		amount from Part I, line 27a		2	2,275.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	ines 1, 2, and 3		4	686,090.
5	Decr	eases 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	lumn (b), line 30	6	686,090.

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Page 3

		roperty sold (e.g., real estate on stock, 200 shs MLC Co.)		P - Purchas D - Donatio	se ''	c) Date acquire (mo , day, yr)	
18				ļ			7
b NO	NE						
<u>c</u>				 			
d							
<u>e</u>			 				
(e) Gross sales price	(f) Depreciati (or allow		Cost or other basis s expense of sale			(h) Gain or ((e) plus (f) mit	
a b			<u></u> .				
C							
d e							
Complete only for assets showing	ig gain in column (f) and owned by the foundat	ion on 12/31/69		(1) (Gains (Col (h)	gain minus
(i) F M V as of 12/31/69	(j) Adjuste as of 12/		Excess of col (i) ver col (j), if any			k), but not less Losses (from c	
a				*			
b							
С							
d							
е							
2 Capital gain net income or (net ca	ipital loss)	lf gain, also enter in Part I, li lf (loss), enter -0- in Part I, li	ne 7 Ine 7	} 2			
3 Net short-term capital gain or (los	-						
If gain, also enter in Part I, line 8,		atotis 1222(3) atiu (0)					
If (loss), enter -0- in Part I, line 8	00.07 (0)			} 3			
Part V Qualification U	nder Section	4940(e) for Reduce	ed Tax on Ne	t Investme	nt Inco	me	
f section 4940(d)(2) applies, leave the Was the foundation liable for the section of the section of the foundation does not qualified.	tion 4942 tax on the lify under section 49	940(e) Do not complete this	part				Yes X No
1 Enter the appropriate amount in (each column for each	ch year, see instructions bet	ore making any entr	ies			
(a) Base period years Calendar year (or tax year beginnii	ng in) Adjust	(b) ted qualifying distributions		(c) oncharitable-usi			(d) stribution ratio) divided by col (c))
2008		8,500	•		,518.		.043474
2007		22,486			,210.		.114602
2006		6,000			,929.		.044141
2005		6,000			,988.		.054060
2004		6,000	•	107	,158.	ļ	.055992
2 Total of line 1, column (d)						2	.312269
3 Average distribution ratio for the	5-year base period	divide the total on line 2 by	5, or by the numbe	r of years			
the foundation has been in exister	nce if less than 5 ye	ars				3	.062454
Enter the net value of noncharitab	ole-use assets for 20	009 from Part X, line 5				4	172,518
Multiply line 4 by line 3						5	10,774
5 Enter 1% of net investment incom	ne (1% of Part I, line	e 27b)				6	13.
7 Add lines 5 and 6						7	10,787
3 Enter qualifying distributions fron	n Part XII, line 4					8	10,000.
If line 8 is equal to or greater than See the Part VI instructions		ox in Part VI, line 1b, and co	mplete that part usi	ng a 1% tax rate	•	<u> </u>	

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Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 - se	e instri	uctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	1			26.
	of Part I, line 27b				,
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3			26.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			26.
6	Credits/Payments		/ 		
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 480 .				
t	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7		4	80.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		4	54.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ► 454 • Refunded ► 1	11			0.
₽ź	rt VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	or			
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ► \$ O . (2) On foundation managers ► \$ O .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			ŀ	
	managers ► \$O.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 	٧			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col. (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		_		
	MO		_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
_	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
y	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calenda	ır			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
H	Did any persons become substantial contributors during the tax year? If the contributors during the tax year?		1 40		·V

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?

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X

Х

3b

4a

Yes X No

N/A

during the year?

Form 990-PF (2009) JAY HENGES CHARITABLE TR	RUST		43-11979	38 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		(33	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	ın Regulations	27 / 2	
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption t expenditure responsibility for the grant?		ined I/A 🔲 Yı	es 🗆 No	
If "Yes," attach the statement required by Regulations section 53 494		ν <u>Α</u> π	S CON C	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?	pay premiums on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?	١٠ بـــــا		6b X
If "Yes" to 6b, file Form 8870	sortonial bollont contract.		1	
7a At any time during the tax year, was the foundation a party to a prohibited tax:	shelter transaction?	Y₁	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut			 -	7b
Information About Officers, Directors, Trust		nagers, Highl		
Tala Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	() [
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAY HENGES	TRUSTEE			
4133 SHORELINE DRIVE				
EARTH CITY, MO 63045	0.00	0.	0.	0.
L R HENGES	TRUSTEE			
6710 N 23RD PLACE				
PHOENIX, AZ 85015	0.00	0.	0.	0.
CAROLYN HENGES	TRUSTEE			
4133 SHORELINE DRIVE				
EARTH CITY, MO 63045	0.00	0.	0.	0.
	4			
	4			
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "		·
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred compensation	account, other allowances
NONE				
	<u> </u>	ļ		
	-			
	4			
		 		
	-{			
Total number of other employees paid over \$50,000			•	0
		-	Form !	990-PF (2009)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	D	0
Part IX-A Summary of Direct Charitable Activities	 	——————————————————————————————————————
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 MADE DISTRIBUTIONS FROM TRUST ASSETS TO CHARITABLE		
ORGANIZATIONS TO BE USED FOR RELIGIOUS, CHARITABLE,	7	
SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES.		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions		
3	_	
	_]	
	ļ	
Total. Add lines 1 through 3		0.

Pa	nt X Minimum Investment Return (All domestic foundations in	must complete this part.	Foreign fou	ndations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	ele, etc , purposes			
а.	Average monthly fair market value of securities			1a	159,128. 16,017.
	Average of monthly cash balances			1b	16,017.
C	Fair market value of all other assets			10	
ď	Fotal (add lines 1a, b, and c)			1d	175,145
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	ic (attach detailed explanation)		0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0 .
3	Subtract line 2 from line 1d			3	175,145
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)		4	2,627 172,518
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	n Part V, line 4		5	172,518
6 _	Minimum investment return Enter 5% of line 5			6	8,626.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) a toreign organizations check here		oundations ar	id certain	
1	Minimum investment return from Part X, line 6			1	8,626.
2a '	Fax on investment income for 2009 from Part VI, line 5	2a	26.		
b	ncome tax for 2009 (This does not include the tax from Part VI)	2b			
C .	Add lines 2a and 2b			2c	26.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	8,600.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	8,600.
6	Deduction from distributable amount (see instructions)			6	0.
7 _	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1		7	8,600.
	rt XII Qualifying Distributions (see instructions)				
	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes		4.	10,000.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 Program-related investments - total from Part IX-B			1a	10,000.
	·	ble etc. sureces		1b	
	Amounts paid to acquire assets used (or held for use) directly in carrying out charita Amounts set aside for specific charitable projects that satisfy the	ole, etc., purposes		2	
	Suitability test (prior IRS approval required)			20	
				3a	
	Cash distribution test (attach the required schedule) Qualifying distributions: Add lines 1a through 3b. Enter here and on Part V, line 8, a	and Dart VIII. line 4		3b 4	10,000.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv			-	10,000
	ncome. Enter 1% of Part I, line 27b	ooundiil		5	0 .
	Adjusted qualifying distributions. Subtract line 5 from line 4			6	10,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether th	ia foundation		
		NUBU LANGUARNO WIERNEL III	E JUNIONACION 5	madues for 104	SECUOII

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	00150	10013 51101 (0 2000	2000	2009
line 7				8,600.
2 Undistributed income, if any, as of the end of 2009				,
a Enter amount for 2008 only			0.	
b Total for prior years				
3 Excess distributions carryover, if any, to 2009	······································	0.		· · · · · · · · · · · · · · · · · · ·
a From 2004				
b From 2005		,		
c From 2006		,		
d From 2007 12,662.				
e From 2008	1			
f Total of lines 3a through e	12,662.			,
4 Qualifying distributions for 2009 from	,	***************************************		
Part XII, line 4 ▶ \$ 10,000.				•
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				1911) - 11 - 11 - 11 - 11 - 11 - 11 - 1 - 1 - 1
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	- n	······································		8,600.
e Remaining amount distributed out of corpus	1,400.			0,000.
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)	Ŭ•			<u> </u>
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,062.		'	
b Prior years' undistributed income. Subtract				***************************************
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				······································
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
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				
Subtract lines 7 and 8 from line 6a	14,062.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007 12,662.				
d Excess from 2008				
e Excess from 2009 1,400.				

Part	XIV Private Operating Fo	oundations (see in:	structions and Part VI	I-A, question 9)	N/A	
1 a lf 1	the foundation has received a ruling or	determination letter that	t it is a private operating			
fo	undation, and the ruling is effective for	2009, enter the date of t	the ruling	>		
b Ct	eck box to indicate whether the found	ation is a private operatir	ng foundation described	in section	4942(J)(3) or 494	12(j)(5)
2 a En	ter the lesser of the adjusted net	Tax year		Prior 3 years		
ine	come from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
in	vestment return from Part X for					
	ch year listed					
	% of line 2a					
	ralifying distributions from Part XII,					, , , , , , , , , , , , , , , , , , ,
	e 4 for each year listed					
	nounts included in line 2c not			 	-	
_						
	ed directly for active conduct of					
	empt activities					
	alifying distributions made directly					
	active conduct of exempt activities					
3 Co alt a "As	obtract line 2d from line 2c implete 3a, b, or c for the ernative test relied upon seets" alternative test - enter or Value of all assets					
(2	Value of assets qualifying under section 4942(j)(3)(B)(i)					
2/: sh	ndowment" alternative test - enter 3 of minimum investment return own in Part X, line 6 for each year ted					
	upport" alternative test - enter			1		
	Total support other than gross investment income (interest,					
	dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(1)(3)(B)(III)					
(3	Largest amount of support from					· · · · · · · · · · · · · · · · · · ·
•	an exempt organization					
14	Gross investment income					
Part		mation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
	at any time during the				40,000 0, ,,,0	
1 In	formation Regarding Foundation		<u></u> -		·····	
	t any managers of the foundation who	•	than 2% of the total cont	ributions received by the	foundation before the close	e of any tax
ye	ar (but only if they have contributed m	ore than \$5,000) (See s	ection 507(d)(2))			
JAY	HENGES					
	it any managers of the foundation who her entity) of which the foundation has			(or an equally large portio	n of the ownership of a pa	tnership or
NONE						
	formation Regarding Contribution					
the	eck here 🕨 🗶 if the foundation of foundation makes gifts, grants, etc. (nly makes contributions t see instructions) to indiv	to preselected charitable viduals or organizations L	organizations and does n inder other conditions, co	ot accept unsolicited reque mplete items 2a, b, c, and	sts for funds If d
a Th	e name, address, and telephone numb	per of the person to whor	n applications should be	addressed		
	e form in which applications should be	s cubmitted and informat	tion and materials they of	nould include		
		, submitted and intollial	and materials triey Si			
C An	y submission deadlines			· · · · · · · · · · · · · · · · · · ·		
d An	y restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	ther factors	

JAY HENGES CHARITABLE TRUST

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3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Julian		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid duning the year HILLSDALE COLLEGE 33 EAST COLLEGE ST. HILLSDALE, MI 49242	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	2,000
THE LEADERSHIP INSTITUTE 1101 N. HIGHLAND ST. ARLINGTON, VA 22201	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	4,000
THE ST. LOUIS ZOO MARLIN PERKINS SOCIETY P.O. BOX 798256 ST LOUIS, MO 63179-8000	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	1,000
ST. LOUIS SCIENCE CENTER 5050 OAKLAND AVENUE ST LOUIS, MO 63110	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	1,000
COLLEGE OF THE OZARKS P.O. BOX 17 POINT LOOKOUT, MO 65726	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	1,000
UNITED NEGRO-COLLEGE FUND, INC. 1015 LOCUST ST., SUITE 826 ST LOUIS, MO 63101	NONE	PUBLIC CHARITY	RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR	1,000
Total		<u> </u>		10 000
Total b Approved for future payment			▶ 3a	10,000
NONE				
Tota!			▶ 3b	0

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income		d by section 512, 513, or 514	(e)
Cittor gross amount amount of the market	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					
b					
C	1				
d					
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	2,352.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	1				
7 Other investment income			 		
8 Gain or (loss) from sales of assets other			 		
than inventory					
9 Net income or (loss) from special events			+ + +		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue			++		
	1		+		
			 -		
d	1		+		
			++		
e 12 Subtota! Add columns (b), (d), and (e)		0.	+-+	2,352.	0.
13 Total. Add line 12, columns (b), (d), and (e)	11		<u> </u>		2,352.
(See worksheet in line 13 instructions to verify calculations.)				13	2/332.
					· · · · · · · · · · · · · · · · · · ·
Part XVI-B Relationship of Activities	to the Accon	nplishment of E	xempt	Purposes	
Line No Explain below how each activity for which inco	ome is reported in o	column (e) of Part XVI-A	A contribut	ted importantly to the accomp	olishment of
the foundation's exempt purposes (other than	by providing fund:	s for such purposes)			
				····	
					
					
923621 02-02-10					Form 990-PF (2009)

JAY HENGES CHARITABLE TRUST 43-1197938 Form 9,90-PF (2009) Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of Х (1) Cash 1a(1) X 1a(2) (2) Other assets **b** Other transactions Х (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) Х 1b(3) (3) Rental of facilities, equipment, or other assets X (4) Reimbursement arrangements 1b(4) Х (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 10(6) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 10 If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A

2a Is the foundation directly or indirectly affiliated with, or	•	
in section 501(c) of the Code (other than section 501(b If "Yes," complete the following schedule	c)(3)) of its section 5277	Yes X No
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		
Under penalties of perjury, I declare that I have examined this retu and complete. Declaration of preparer (other than taxpayer or fidu		
yay Henges	- 16-22-10N	Trustee
Signature of officer or trustee		itle

INC.

SUITE 100

63143

ADVISORS MO,

MO

SUNNEN DR,

LOUIS

314-615-1200 Form **990-PF** (2009)

Preparer's identifying number

Check if

employed _

EIN >

Phone no

self-

Paid Preparer's Use Only Preparer's

signature

Firm s name (or yours

address and ZIP code

UH

15

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number

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

JAY HENGES CHARITABLE TRUST 43-1197938 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 Form 990-PF 501(c)(3) exempt private foundation 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 X 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 that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

for Form 990, 990-EZ, or 990-PF.

	7	1	
Page	⊥ of	l of Par	+ 1

Name of organization

Employer identification number

JAY HENGES CHARITABLE TRUST

43-1197938

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JAY HENGES 4133 SHORELINE DRIVE EARTH CITY, MO 63045	\$\$	Person X Payroli 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 Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZfP + 4	(c) Aggregate contributions	(d) Type of contribution
	1-10	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF DIVIDE	ENDS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1	
SOURCE		GROSS AMOUNT			ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT		
MERRILL LYNCH MERRILL LYNCH - MONEY MARKI	2,345.		0.		2,345.			
TOTAL TO FM 990-PF, PART I	, LN 4		2,352.		0.	2,3	52.	
FORM 990-PF		TAX	ES	-		STATEMENT	2	
DESCRIPTION	EXPE	(A) (B) EXPENSES NET INVEST PER BOOKS MENT INCOM			(C) ADJUSTED NET INCOM		CHARITABLE	
EXCISE TAX		931.	31. 9				0.	
TO FORM 990-PF, PG 1, LN 18	8	931.	:	931.			0.	
FORM 990-PF	0	OTHER EXPENSES			STATEMENT 3			
DESCRIPTION	EXPE	A) NSES BOOKS	NET INVEST- ADJ					
ACCOUNT FEES		146.	• • • • • • • • • • • • • • • • • • • •	146.		······································	0.	
TO FORM 990-PF, PG 1, LN 23	3	146.	:	146.			0.	
FORM 990-PF	CO	RPORAT	E STOCK			STATEMENT	4	
DESCRIPTION				вос	OK VALUE	FAIR MARKE VALUE	T	
BLACKROCK FOCUS 2,000 SHS BANK OF AMERICA REAVES UTILITY INCOMF FUND REQUIRED TECHNOLOGIES 1,000 SHS ALTRIA GROUP, INC	c.				480,637. 85,315. 22,904. 75,000. 19,575.	123,4 33,3 19,3	20. 00. 0.	
TOTAL TO FORM 990-PF, PART II, LINE 10B				683,431.	196,2	02.		
							=:=	