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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052 2009

Internal Revenue Service For calendar year 2009, or tax year beginning APR 1. 2009 , and ending MAR 2010 G Check all that apply: Initial return Initial return of a former public charity Final return Amended return X Address change Name change Name of foundation A Employer identification number Use the IRS lahel TEXAS STAR OAKS FUND, INC. 74-6047454 Otherwise. print Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number or type. 5502 WHITE BURCH RUN 281-364-7440 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions ТX SPRING, 77386 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust X Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here (from Part II, col (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,845,000. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here **Analysis of Revenue and Expenses** Part I (d) Disbursements for charitable purposes (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 56,273 Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 411 411 411. STATEMENT 4 Dividends and interest from securities 33,386. 33,386 33,386.STATEMENT 5a Gross rents b Net rental income or (loss) -1,2676a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) . 1 الويوار و * ي 0 vi Ya Net short-term capital gain Income modifications 10a Gross sales less retu b Less Cost of goods c Gross profit or (los \$ NOV 0 8 2010 Other income 11 88,803 33.797 33.797 Total. Add lines 1 through_1 Compensation of officers, died or trustees at 0 0. 14 Other employee salaries and wage 15 Pension plans, employee benefits Expenses 16a Legal fees **b** Accounting fees STMT 3 3,430 0 0 c Other professional fees 0. 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 3,098 23 STMT 4 0 0 0. Other expenses 24 Total operating and administrative 6,528 0 0 expenses. Add lines 13 through 23 89,638 89,638. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 96,166 0 0 89,638. 27 Subtract line 26 from line 12: -7,3631.76 2 Excess of revenue over expenses and disbursements 33,797 b Net investment income (if negative, enter -0-) 33,797 c Adjusted net income (if negative, enter -0-)

223501 12-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Form **990-PF** (2009)

17-64201

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	S STAR OAKS FUN					7	4-604	7454	Page 3
	nd Losses for Tax on In		come	I (b) Uni					
(a) List and descrit 2-story brick ware	pe the kind(s) of property sold (e.g. chouse; or common stock, 200 shs	, real estate, . MLC Co.)		P - P D - C	v acquired urchase lonation		acquired lay, yr.)	(d) Date (mo., da	
1a PEO SISTERHOOD	POOLED FUND		·-···		P	VARI	OUS	VARIO	US
_b	·			<u> </u>					
C				ļ					
<u>d</u>				<u> </u>					
<u>e</u>				 		l			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		 		ain or (loss s (f) minus (
<u>a</u>			1,26	7.		_		-1,	<u>.267.</u>
b									
C									
d			-						
<u>e</u>				_					
Complete only for assets showing	gain in column (h) and owned by t						ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (ı) (ı), ıf any		C		not less than (from col. (
a								-1,	267.
b	· - ····								
С			··						
d									
_e									
2 Capital gain net income or (net capi	tal loss) { If gain, also enter If (loss), enter -0-	ın Part I, line 7 ın Part I, line 7		}				-1,	267.
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) and	d (6):							
If gain, also enter in Part I, line 8, co		- (-).)					
If (loss), enter -0- in Part I, line 8				<u> </u>					0.
Part V Qualification Un	der Section 4940(e) for	Reduced Ta	ax on Net	Inves	tment In	come			
(For optional use by domestic private for	oundations subject to the section 4	940(a) tax on net	ınvestment ın	come.)					
If section 4940(d)(2) applies, leave this	nart blank								
ii section 4540(u)(z) applies, leave this	part blank.								
Was the foundation liable for the section	n 4942 tax on the distributable ami	ount of any year i	n the base per	iod?				X Yes	No
If "Yes," the foundation does not qualify								<u> </u>	
Enter the appropriate amount in each	ch column for each year; see instru	ctions before mal	king any entrie	es.					
(a) Base period years Calendar year (or tax year beginning	in) Adjusted qualifying dist	ributions N	et value of no	(c) ncharitat	le-use asset	ts	Distrib	(d) ution ratio ided by col. (c))
2008									
2007									
2006									
2005									
2004				_					
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the 5-y	year base period - divide the total o	n line 2 by 5, or b	y the number	of years					
the foundation has been in existenc	e if less than 5 years					3			
4 Enter the net value of noncharitable	-use assets for 2009 from Part X, li	ne 5				4			
5 Multiply line 4 by line 3						5			
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6	···		
7 Add lines 5 and 6						7			
8 Enter qualifying distributions from F	Part XII, line 4					8			
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and complete	that part using	g a 1% ta	x rate.				

	m 990-PF (2009) TEXAS STAR OAKS FUND, INC. 74-604			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
îa	a 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%		6	76.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		6	76.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		6	<u>76.</u>
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,792.			,
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	1 Backup withholding erroneously withheld 6d 6d			,
7	Total credits and payments. Add lines 6a through 6d		1,7	<u>92.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,1	16.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			0.
<u> </u>	art VII-A Statements Regarding Activities	 		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1,20	đ,	1
	distributed by the foundation in connection with the activities.		, ju	ر _دردو به
	Did the foundation file Form 1120-POL for this year?	1c	, -	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		5.1 12: L	****
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		140	4.4
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		3.4	ું વધ
	managers. ▶ \$	ا المالكة		لتستيد
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.	4,0 4,0	. 3	,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	1. 200	-3	រស់ទី
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year? N/A	46		~
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u>`</u> a' :	X
	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1	-, 6	
0		1		, ,
	 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 	,	š.	77. 19
	remain in the governing instrument?	6	X	1.5
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.			
Q۵	to Test, Complete Fact it, Cor (c), and Fact XV. I Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			' ;
Ud	TX			
,	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			`,
IJ	of each state as required by General Instruction G? If "No," attach explanation	8b	x	
۵	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	00	*	
3	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	x.	لد
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10		X
		m 990 -	PF (

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Form 990-PF (2009) TEXAS STAR OAKS FUND, IN Part VII-B Statements Regarding Activities for Which		Poguirod (assistantia	74-60474	54_	Page 6
5a During the year did the foundation pay or incur any amount to:	TOTTI TIZO WIAY DE F	nequired (contil	iuea)		
` (1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		es 🛣 No		
(2) Influence the outcome of any specific public election (see section 4955); any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes(4) Provide a grant to an organization other than a charitable, etc., organization		Y	es X No		
509(a)(1), (2), or (3), or section 4940(d)(2)?	m acsoribed in section	Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
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	·	n Regulations	NT / 7	. .	
section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check t	•		N/A	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)				
$\textbf{6a} \ \ \text{Did the foundation, during the year, receive any funds, directly or indirectly, to}$	pay premiums on			١,	
a personal benefit contract?		Y	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No		
b If yes, did the foundation receive any proceeds or have any net income attribut		L ''		7b	+
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highl			
List all officers, directors, trustees, foundation managers and their	compensation.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allov	xpense nt, other wances
LOIS RAYOME	CHAIRMAN				
EL PASO, TX	4 00				_
PONNIE PROMI	4.00 VICE CHAIRMAN	0.	0.		0.
BONNIE BROWN RAYMONDVILLE, TX	VICE CHAIRMAN				
CAIMONDVILLE, IX	1.00	0.	0.		0.
LISA DAVIS	SECRETARY		<u> </u>		
TEXARKANA, TX					
	1.00	0.	0.		0.
KAREN BROOKS	TREASURER				
SPRING, TX	4 00				•
2 Compensation of five highest-paid employees (other than those inc	4.00	enter "NONE "	0.		0.
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	ačcou	xpense nt, other vances
NONE	devoted to position		Compensation	anos	vances
10112					
		-			
		<u> </u>			
· · · · · · · · · · · · · · · · · · ·					
]				
Total number of other employees paid over \$50,000				•	0

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	\top	
a	Average monthly fair market value of securities	1a	1.619.161.
ь	Average of monthly cash balances	1b	1,619,161. 229,520.
C	Fair market value of all other assets	1c	223/0200
d	Total (add lines 1a, b, and c)	1d	1,848,681.
е	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,848,681.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	27,730.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,820,951.
6	Minimum investment return. Enter 5% of line 5	6	91,048.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here X and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	
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	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	89,638.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	89,638.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	89,638.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies f	or the section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		** *** *		
		0.		
3 Excess distributions carryover, if any, to 2009:		1 1 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
a From 2004				
b From 2005			i	
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.	<u></u> -		
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ N/A		* <u>*</u> *		
a Applied to 2008, but not more than line 2a	***************************************	,	0.	
b Applied to undistributed income of prior	- 27		1	
years (Election required - see instructions)	17	0.	77.1.	
c Treated as distributions out of corpus			مال ^ا مر	3
(Election required - see instructions)	0.	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
d Applied to 2009 distributable amount		3		0.
e Remaining amount distributed out of corpus	0.	Ą		4
5 Excess distributions carryover applied to 2009	0.		4	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:		aby ay a line of the control of the	,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	. , -		
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	9			
the section 4942(a) tax has been previously assessed	' '	0.		
d Subtract line 6c from line 6b. Taxable			1,	
amount - see instructions	'	0.		
e Undistributed income for 2008. Subtract line			0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0
7 Amounts treated as distributions out of				0.
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.	,		
• • • • • • • • • • • • • • • • • • • •	U•	'		
9 Excess distributions carryover to 2010.	0.	1		
Subtract lines 7 and 8 from line 6a	U•			
O Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008		}		
e Excess from 2009				5 000 DE (2000)

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Total 923611 02-02-10

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▶ 3b

0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	_				
<u> </u>	_	-			
d	_				
e	_		+		
f	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	411.	
4 Dividends and interest from securities			14	33,386.	
5 Net rental income or (loss) from real estate:		4 C T			
a Debt-financed property					
b Not debt-financed property		·			
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	-1,267.	
9 Net income or (loss) from special events				•	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		•			
a					
b					
C					
d	1	•			
e					
12 Subtotal. Add columns (b), (d), and (e)).	32,530.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	32,530.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-R	Relationship	of Activities	to the Ad	ccomplishment	of Exempt Purposes
I GILATI-D	IICIAUVIISIIID	OI ACHTIGO	LU LIIC A	CCCIIIDIISIIIIICIIL	OF EXCITION FULLOSES

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Page 13

Yes No

X

X

X

X

X

X

X

X

X

(515)225-8400

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Phone no.

(a) Line no	(b) Amount involved	(c) Name of noncharita	able exempt organization	(d) Description of transfers, tran	sactions, and sharing arrangements
		N/A	1		
	-				
					•
					
		·			
					
2a Is the f	oundation directly or indirectly	affiliated with, or related to, o	ne or more tax-exempt organiza	tions described	
	on 501(c) of the Code (other t		ection 527?		Yes X No
b If Yes,	complete the following sched		Tax		
	(a) Name of organ	nization	(b) Type of organization	(c) Description	of relationship
	N/A		<u> </u>		
					
				- .	
I lander an					
and comp	plete Declaration of preparer (other)	han taxpayer or fiduciary) is based	ccompanying schedules and statemen on all information of which preparer ha	ns, and to the best of my knowledge a as any knowledge	nd belief, it is true, correct,
1. 4	KAMA TAN K	1 - 1	11/2/10	. Manda	••
e	nature of officer or trustee	2000	Date	Trile	<u>и</u>
<u>a</u>		7/	Date		Preparer's identifying number
I		4 /	_ A. Dat		Tropicor o residing ing inclined
S' S	Preparer's signature	. a. Tou	-PA 10	-27-10 self-	
Sign Here aid arer's Only	signature a	<i>f f f f f f f f f f</i>		-27-70 employed ▶ L	
P ai		N & COMPANY,	LLP SUITE 400	-27-10 Sell- employed ▶ [

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WEST DES MOINES, IA 50266-1453

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CAS	H I:	NVESTMENTS	ST	ATEMENT	1
SOURCE						AMOUNT	
INTEREST INCOME						4:	11.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A				42	11.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM S	ECU	RITIES	ST	ATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	C	OLUMN (A))
INVESTMENT INCOME		33,386.		0.		33,38	36.
TOTAL TO FM 990-PF, PART I, L	N 4	33,386.		0.		33,38	36.
FORM 990-PF O	THER PROFES	SIONAL FEE	<u> </u>		ST	ATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCO		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
OTHER PROFESSIONAL FEES	3,430.		0.		0.		0.
TO FORM 990-PF, PG 1, LN 16C =	3,430.		0.		0.		0.
FORM 990-PF	OTHER E	XPENSES			ST	ATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
EXCISE TAX INSURANCE MISCELLANEOUS	645. 462. 1,991.		0. 0. 0.		0. 0. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	3,098.	·	0.		 0.		0.

FORM 990-PF U.S. 7	ND STATE/CIT	Y GOV	ERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION		U.S. OV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE VALUE	T
US TREASURY BILLS	_	х	 ,	0.		0.
TOTAL U.S. GOVERNMENT OB	IGATIONS		•			
TOTAL STATE AND MUNICIPAL	GOVERNMENT	OBLIG	ATIONS			
TOTAL TO FORM 990-PF, PAI	T II, LINE 1	0A	=	0.		0.
FORM 990-PF	OTHER	INVES	TMENTS		STATEMENT	6
DESCRIPTION		VALU MET	ATION HOD	BOOK VALUE	FAIR MARKE VALUE	Т
PEO SISTERHOOD POOLED FUR	ID.	FM	v	1,616,932.	1,616,9	32.
TOTAL TO FORM 990-PF, PAR	T II, LINE 1	3	-	1,616,932.	1,616,9	32.

TEXAS STAR OAKS FUND, Inc.	3.												Worksheet		
Assistance Grants															
2009-2010 Payment Schedule															
Name		_	May.09	June.09	July.08	Aug.09	Sept.09	Oct.09	Nov.09	Dec.09	Jan.10	Feb.10	Mar. 10	Totals	
Ellison, Michelle	cs	3,000												3,000	
Hoffner, shirley	AC	3,200												3,200	
Miller, Jackle	Ş	1,000												1,000	
Tomlin, Steffanle	¥	2,460												2,460	
Cynthia Henderson	¥		4,844											4,844	
Barble Drayton	¥		3,000											3,000	
Heather Storey	ō		3,000											3.000	
Alethie McGriff	5			3,300										3.300	
Sheri M. Henderson	5			2,006									İ	2.008	
Leah Roberts	Ö			3,380										3,380	
Sharon McEntire	Ē			6,000										6,000	
Angela Todd	5 S					1,150								1,150	
Shawna Hulon	ত					3,000								3,000	
Shelley McLeroy	F						1,000							1,000	
Ann Sullivan	င္သ						200							900	
Corl Sue Wilson	Σ						4,000							4,000	
Elizabeth Plumbo	2						2,000							2,000	
Angelica Acosta	3							1,768						1,758	
Maria Lourdes Serrano	R							2,190						2,190	
Cathi Kneuper	눞							2,862						2,862	
Amanda Rogers	3								1,300	1				1,300	
Kay Beshears	Œ								500					200	
Tana Mendenhall	ဗ္ဗ								200					200	
Tomlann Caseldy	ä								744					744	
Arlene McLaughlin	ဗ္ဗ									4,920				4,920	
Stacy Ann Lara	2									4,500				4,600	
Almee Williams	0											3,000		3,000	
Carolyn Ella Jonea	DA								ı			2,364		2,384	
Elizabeth Stelger	9											2,760		2,760	
Rebecca Schmidt	<u>m</u>											4,000		4,000	
Nicole Robinson	ပ				: !								3,000	3,000	
Jason Wayne Shelly	댎												3,600	3,600	
Teresa Daigle	≥												2,000	2,000	
Janice Presidergast	₹												1,800	1,600	
Kimberley Relser	3												1,600	1,600	
														0	
														0	
														0	
TOTALS:		9,660	10,844	14,686	0.00	4,160	7,600	6,810	2,744	9,420	0	12,124	11,700 /	88,638.00	7

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)

				
-	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ [X
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the			
Do not c	omplete Part II unless you have already been granted an automatic 3-month extension on a previously	filed Fo	orm 8868	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		-	_
A corpora	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and co	mplete		
Part I onl	у		▶ [
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request one tax returns.	an extei	nsion of time	
noted be (not auto you must	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extens low (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electromatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or can submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic gov/efile and click on e-file for Charities & Nonprofits.	nically ronsolid	f (1) you want the addit lated Form 990·T. Inste	ional
Type or	Name of Exempt Organization	Emp	oloyer identification nu	ımber
print	TEXAS STAR OAKS FUND, INC.	7	74-6047454	
File by the due date for filing your	Number street and room or suite to 16 a D.O. hou are maturations		1 001/131	
return See instructions				
Check ty	pe of return to be filed (file a separate application for each return)			
For For	m 990	5227		
LX For	m 990-PF	3870		
Teleph If the control	KAREN BROOKS books are in the care of ► 5502 WHITE BURCH RUN - SPRING, TX 7738 none No ► 281-364-7440 FAX No. ► corganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If t . If it is for part of the group, check this box ► and attach a list with the names and EINs of a	his is fo		
ıs fo	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time up ${\color{red}NOVEMBER~15,~2010}$, to file the exempt organization return for the organization named or the organization's return for: calendar year or and ending ${\color{red}MAR~31,~2010}$		The extension	
2 If th	nis tax year is for less than 12 months, check reason Initial return		Change in accounting	penod
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nrefundable credits. See instructions	3a	\$	0.
nor		1	1	
nor b If th	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated	O.L	ا 1 م	702
b If the	payments made. Include any prior year overpayment allowed as a credit	3b	\$ 1,	792.
b If the tax	payments made. Include any prior year overpayment allowed as a credit lance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	3b	\$ 1,	792.
b If the tax c Ball	payments made. Include any prior year overpayment allowed as a credit	3b 3c	\$ 1,' \$	792. 0.

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