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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.

Department of the Treasury Internal Revenue Service

OMB No 1545-0052

Ford	calencar year 2009, or tax year beginning APR	1, 2009	, and ending	MAR 31, 2010	<u> </u>
G C	theck all that apply: Initial return	Initial return of a fo	ormer public charity	Final return	1
	Amended return	Address chan	ge	Name change	
Use	the IRS Name of foundation			A Employer identification	number
	abel.			82-0503980	
	print Number and street (or PO box number if mail is not del		Room/suite		<u> </u>
	rtype. P.O. BOX AA	ivolad to subot address)	Thousand The Control of the Control	B Telephone number 208-734-20	77
	Specific City or town, state, and ZIP code			C If exemption application is p	. 1 1
Inst	ructions. TWIN FALLS, ID 83303	-0010		D 1. Foreign organizations	
H C	Check type of organization: X Section 501(c)(3) exe			Foreign organizations me check here and attach co	peting the 85% test,
		Other taxable private founda	ation	E If private foundation sta	
I Fa	ur market value of all assets at end of year J Accounting	ng method: X Cash	Accrual	under section 507(b)(1	
(fr		her (specify)		F If the foundation is in a	60-month termination
_		nn (d) must be on cash i	basis.)	under section 507(b)(1	
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		expenses per books	income	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check if the foundation is not required to attach Sch B Interest on savings and temporary	148.	148.		STATEMENT 1
	3 cash investments	3,802.	3,802.		STATEMENT 2
•	4 Dividends and interest from securities	14,585.	14,585.		STATEMENT 3
Ì	5a Gross rents b Net rental income or (loss) 2,908	14,303.	14,505.		STATEMENT 4
4	6a Net gain or (loss) from sale of assets not on line 10	12,198.			STATEMENT 5
Ž	b Gross sales price for all 93,440.				Y 20
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		
æ.	8 Net short-term-capital gain				
- 1	9 Integrie modifications D 104 and allowances				
1	10a Gross Sales less réturns Q				
	CD Less Cost of goods sold 11				
	THE OUTO THOUSAND STATE OF THE	30,733.	18,535.	<u>. </u>	
	12 Total Add lines of through 11	30,733.	10,555.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
es	16a Legal fees STMT 6	156.	117.		39.
xpenses	b Accounting fees STMT 7	124.	93.		31.
Exp	c Other professional fees				
<u>8</u>	17 Interest				
and Administrative	18 Taxes . STMT 8	3,422.	3,119.		0.
nist	19 Depreciation and depletion				
ä	20 Occupancy		<u></u>		
Ă	21 Travel, conferences, and meetings				
ä	22 Printing and publications 23 Other expenses STMT 9	8,558.	8,558.		0.
Operating	23 Other expenses STMT 9 24 Total operating and administrative	0,330.	0,330.		
era	expenses. Add lines 13 through 23	12,260.	11,887.		70.
ဝိ	25 Contributions, gifts, grants paid	22,600.	,		22,600.
	26 Total expenses and disbursements.	==,,,,,,			
	Add lines 24 and 25	34,860.	11,887.		22,670.
_	27 Subtract line 26 from line 12:				
	& Excess of revenue over expenses and disbursements	-4,127.			
	b Net investment income (if negative, enter -0-)		6,648.		
	c Adjusted net income (if negative, enter -0-)			N/A	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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급	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	- <u>*</u>
P	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	94.	6,649.	6,649.
	2	Savings and temporary cash investments	62,449.	165,072.	165,072.
	3	Accounts receivable ► 1,335.			
		Less: allowance for doubtful accounts	21,601.	1,335.	1,335.
	4	Pledges receivable		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		Less; allowance for doubtful accounts	-	•	
	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable 4,604.			
	l <i>'</i>	Less: allowance for doubtful accounts	174,339.	4,604.	
	۵	Inventories for sale or use	1/1/0001	1,001.	
Assets		Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations	<u> </u>		
•		40	0.	174,870.	207,945.
				1/4,0/0.	201,343.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment. basis	202 250	202 250	202 250
		Less accumulated depreciation .	303,250.	303,250.	303,250.
	12	Investments - mortgage loans	00 470	00 470	
	13	Investments - other STMT 11	82,478.	82,478.	0.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	644,211.	738,258.	684,251.
	17	Accounts payable and accrued expenses	2.	98,176.	
	18	Grants payable .			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			1
	22	Other liabilities (describe >			
	23	Total liabilities (add lines 17 through 22)	2.	98,176.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
ည္က		Temporarily restricted			
3ala	1	Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
or Fund Bala		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	691,011.	691,011.	
SS	28		-46,802.	-50,929.	
ž	29	Retained earnings, accumulated income, endowment, or other funds	644,209.	640,082.	
ž	30	Total net assets or fund balances	044,203.	040,002.	
		T-4-1 (*-6-1)(*)	644,211.	738,258.	
_	31			730,230	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
			30		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	au au		644,209.
_		st agree with end-of-year figure reported on prior year's return)	•	1 2	-4,127.
_		r amount from Part I, line 27a	,	2	-4,127.
3		r increases not included in line 2 (itemize)	······································	3	640,082.
		lines 1, 2, and 3		4	040,082.
		reases not included in line 2 (itemize)	L (b.) 11 00	5	640,082.
6	Tota	l net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		
					Form 990-PF (2009)

(a) List and des • 2-story brick w	cribe the kind(s) of property arehouse; or common stoc	sold (e.g., real estate, k, 200 shs. MLC Co.)		I P-P	v acquired urchase lonation	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a '								•	
b NC	ONE	. <u> </u>				ļ			
<u>C</u>	· <u>·</u> ··								
<u>d</u>				ļ		ļ		-	
<u>e</u>	(A) Donous alla	(-).0-	-AAb b'-	 		410			
(e) Gross sales price	(f) Depreciation allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (
8			<u> </u>						
b	ļ								
<u>C</u>									
d									
Complete only for assets show	ing gain in column (h) and (wood by the foundation	n on 12/31/60			/I) Coupe /C	al (h) saus	minus	
Complete only for assets show	· · · · · · · · · · · · · · · · · · ·		xcess of col. (i)		((I) Gains (C col. (k), but r	oi. (11) yaiii 10t less thar	11111111111111111111111111111111111111	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		r col. (j), if any			Losses	(from col. (h))	
<u>a</u>									
b									
<u>C</u>									
<u>d</u>			 			_			
е	<u></u>						-		
2 Capital gain net income or (net o		also enter in Part I, line), enter -0- in Part I, line		}[:	2				
3 Net short-term capital gain or (lo									
If gain, also enter in Part I, line 8				J					
If (loss), enter -0- in Part I, line 8	3			<u>ال</u>	3				
Part V Qualification	Jnder Section 494	0(e) for Reduced	d Tax on Net	inves	tment li	ncome			
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qui	ction 4942 tax on the distrib		-	rıod?				X Yes No	
Enter the appropriate amount in				es.	•		-		
(a) Base period years Calendar year (or tax year begin	ning in) Adjusted qua	(b) difying distributions	Net value of no	(c) oncharital	ble-use asse	ets	Distrib (col. (b) div	(d) ution ratio ided by col. (c))	
2008	9/	0.				0.	(001) (0) 0111000 0) 0011 (0)		
2007	**-								
2006									
2005									
2004						<u></u>	_	-	
									
2 Total of line 1, column (d)						2			
3 Average distribution ratio for the	5-year base period - divide	the total on line 2 by 5,	, or by the number	r of years					
the foundation has been in exist	ence if less than 5 years					3			
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5						4			
5 Multiply line 4 by line 3					5	<u> </u>			
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6			
7 Add lines 5 and 6						7			
8 Enter qualifying distributions fro	m Part XII line 4					8			
If line 8 is equal to or greater that		art VI, line 1h, and com	plete that part usin	ng a 1% t	ax rate.			<u> </u>	
See the Part VI instructions.			p par. don						

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see instru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1	33.
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		1	33.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1	33.
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
b Exempt foreign organizations - tax withheld at source 6b			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld			
7 Total credits and payments. Add lines 6a through 6d			0.
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		1	33.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax			
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
distributed by the foundation in connection with the activities.			
c Did the foundation file Form 1120-POL for this year?	10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ► \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	1	х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	/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			
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) NONE			
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	L
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		Х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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Part VII-B Statements Regarding Activities for Which F	orm 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 (section	1 4945(e))?	Ye	s X No		-	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,				
any voter registration drive?			8 X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes'	(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	n described in section					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	B X No	1		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?		Ye	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		. N/A _	5b		
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□□			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?	N	[/A	es L No			
If "Yes," attach the statement required by Regulations section 53.4945	5-5 <i>(d)</i>			l l		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			ŀ		
a personal benefit contract?		Ye	es 🗶 No	_		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X	
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		Ye	s X No	_		
b If yes, did the foundation receive any proceeds or have any net income attribute				7b	Ш	
Part VIII Information About Officers, Directors, Trustory Paid Employees, and Contractors		inagers, Highly	<i>y</i>			
1 List all officers, directors, trustees, foundation managers and their						
(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 vances	
JACKIE WERNER	CO-TRUSTEE					
PO BOX 371	1					
EDEN, ID 83325	0.00	0.	0.		<u> </u>	
	CO-TRUSTEE					
PO BOX 148			_		_	
MURTAUGH, ID 83344	0.00	0.	0.		<u> </u>	
	CO-TRUSTEE	1				
PO BOX AA	0.00				•	
rwin Falls, ID 83303	0.00	0.	0.		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "				
2 Compensation of live highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) E	xpense	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	accou allov	xpense nt, other vances	
NONE						
						
Total number of other employees hald over \$50,000		L		L		

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Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	· · · · · · · · · · · · · · · · · · ·	
	·	
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	information such as the	<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers produce	d, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
		····
Total. Add lines 1 through 3	<u> </u>	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 169,510. a Average monthly fair market value of securities 1a 1b 98,822. b Average of monthly cash balances 303,250. c Fair market value of all other assets 1c 571,582. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 8,574. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 563,008. Net value of noncharitable-use assets, Subtract line 4 from line 3. Enter here and on Part V, line 4 5 6 28,150. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 28,150. Minimum investment return from Part X, line 6 133 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.) 2b 133 c Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 5 28.017. Add lines 3 and 4 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 22,670. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 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: 32 a Suitability test (prior IRS approval required) 3b b Cash distribution test (attach the required schedule) 22,670. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income. Enter 1% of Part I, line 27b 6 22,670. Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

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	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7		:		28,017.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			22,534.	
b Total for prior years:				-
<u>2007, 2006, 2005</u>		12,893.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008		-		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 22,670.				
a Applied to 2008, but not more than line 2a			22,534.	
b Applied to undistributed income of prior		•		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	•			
(Election required - see instructions)	0.			436
d Applied to 2009 distributable amount	0			136.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		12,893.		
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 .		12,893.		
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				27,881.
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	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				Form 000 DE (2000)

Part XIV Private Operating Fo		tructions and Bort VIII			503980 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	· ·	=	n acation P	4049(1)(2) 01	40.40(.)/E)
b Check box to indicate whether the found		ig louridation described i	Prior 3 years	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(8) 2009	(0) 2000	(6) 2007	(4) 2000	(6) 10(2)
investment return from Part X for				1	
each year listed				ļ	<u> </u>
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					. =
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(ı)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section			i		
512(a)(5)), or royalties)				1	
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					1
(4) Gross investment income					<u> </u>
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or n	nore in assets
at any time during the	he year-see the i	instructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ributions received by the	foundation before the c	lose of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation (or an equally large porti	on of the ownership of a	partnership or
other entity) of which the foundation has	a 10% or greater interes	St.			
NONE					
2 Information Regarding Contribution					
		to preselected charitable			
the foundation makes gifts, grants, etc. (umpiete items za, u, c, a	<u></u>
a The name, address, and telephone numb	per of the person to who	n applications should be	addressed:		
b The form in which applications should be	e submitted and informa	tion and materials they sh	ould include.		<u> </u>
c Any submission deadlines;					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	-
200001 20 20 10					Form 990-PF (2009)
923601 02-02-10					1 UIIII 234-F (2009)

923611 02-02-10

Form **990-PF** (2009)

Part XV Supplementary Information	1 (continued)			
3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid duning the year BOYS AND GIRLS CLUB OF MAGIC VALLEY 999 FRONTIER RD TWIN FALLS, ID 83301	NONE	CHARITY	HELP WITH OPERATING EXPENSES IN BUHL	4,200
MURTAUGH HIGH SCHOOL 500 W BOYD ST MURTAUGH, ID 83344	NONE	N/A	SCHOLARSHIP FUND CONTRIBUTION	4,200
VALLEY VIKING FOUNDATION 882 VALLEY RD HAZELTON, ID 83335	NONE	CHARITY	SCHOLARSHIP FUND	4,200.
SALVATION ARMY 348 4TH AVE N TWIN FALLS, ID 83301	NONE	CHARITY	HELP WITH OPERATING EXPENSES	10,000.
				00 (00
Total .	<u> </u>		<u>▶</u> 3a	22,600
b Approved for future payment				
NONE				
Total	·		▶ 3b	0.
				000 DE (0

Page 12

Form **990-PF** (2009)

923621 02-02-10

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelati	ed business income	Exclu	ded by section 512, 513, or 514	(e)
,	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code				
b		<u> </u>			
<u> </u>				<u> </u>	
a			├──		
e					
· · · · · · · · · · · · · · · · · · ·			-		 -
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	1		14	148.	
investments			14	3,802.	
4 Dividends and interest from securities	-		14	3,002.	
5 Net rental income or (loss) from real estate:			-		
a Debt-financed property			1.0	2 000	
b Not debt-financed property		ļ	16	2,908.	
6 Net rental income or (loss) from personal	İ		1		
property .			ļ		
7 Other investment income			↓		
8 Gain or (loss) from sales of assets other				40.400	
than inventory			18	12,198.	
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory			ļ		
11 Other revenue:					
a					
b					
C			L		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		19,056.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	19,056.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t					
Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than			contrib	outed importantly to the accon	nplishment of
·					
					· —··
					<u>, </u>
					· · · · · · · · · · · · · · · · · · ·
			-		

For	m 990-l	PF (2009) THE E	DWARD L. UH	iLIG	FOUNDATION		82-050	3980	Pa	age 13
P	art X	/II Information Re	egarding Transfe	ers To a	and Transactions ar	nd Relationsh	ips With Nonch	aritable		
		Exempt Organ	izations							
1	Did th	ie organization directly or indi	rectly engage in any of th	ne followin	g with any other organization	described in section	on 501(c) of		Yes	No
	the C	ode (other than section 501(c)(3) organizations) or in	ations?						
a	Trans	fers from the reporting found	ation to a noncharitable (exempt or	ganization of:					
	(1)	Cash						1a(1)		X
	(2)	Other assets						1a(2)		Х
t		transactions								
		Sales of assets to a noncharita	ible exempt organization					16(1)		x
		Purchases of assets from a no		nization	•		• •	1b(2)		Х
	٠,	Rental of facilities, equipment,	• •				•	1b(3)		X
		Reimbursement arrangements					•	1b(4)	_	X
	• •	oans or loan guarantees			•••			1b(5)		X
		Performance of services or me	Amhershin or fundraising	solicitațio	ns .	•		1b(6)		Х
		ng of facilities, equipment, ma	-					10		X
		answer to any of the above is	-			avs show the fair ma	arket value of the goods		ets	
٠		rvices given by the reporting f							,,,,	
		nn (d) the value of the goods,			od 1000 (IIIII) IIII IIII IIII III	in any transaction	or onaring arrangement,			
(a)	Line no	(b) Amount involved			exempt organization	(d) Description of	of transfers, transactions, and	sharing ar	rangeme	ents
(4/		(5) /	(0) 11	N/A		(5) 5 5 5 5 7 5 5 7 5 7 5 7 5 7 5 7 5 7 5				
_				14/ 21						
						 				
										
		-								
_			 							
_					·				-	
_						1				
			 			 				
						-				
			<u> </u>							
_			ļ <u> </u>							
2:	ı is the	foundation directly or indirec	tly affiliated with, or relat:	ed to, one	or more tax-exempt organiza	ations described	_			_
	IN Sec	ction 501(c) of the Code (othe	r than section 501(c)(3)) or in sect	tion 527?			Yes	X	☐ No
	<u> </u>	s," complete the following sch								
_		(a) Name of org	ganization		(b) Type of organization	((c) Description of relation	ship		
		N/A	<u> </u>							
									_	
	Under	penalties of perjury, I declare that I I	nave examined this return, inc	cluding acco	mpanying schedules and stateme	nts, and to the best of	my knowledge and belief, it i	s true, corre	ect,	
	and ∞	pplete Declaration of preparer (other	er than faxpayer or fiduciary)	is based on	all information of which preparer h	as any knowledge				
		boroneres	Men. 1	,	17-21-11	N TTE	•			
)	B	gnature of officer or trustee	7-4-		Date	Title				
Ĭ	· •	Dennerada N	1 1 1 1 1	7 0 4	Da			rer's identif	ying nur	nber
Sign Here	s ≥	signature	MAY Mal	She	-	7.2/. // self	ployed X PC	0056	987	
S	5 % Q	Firm's name (or yours HCM	HOLMSTEAD.	PLLC		, , , , , , , , , , , , , , , , , , , ,	EIN ► 82-043			
	Paid Preparer's Use Only	if self-employed), P.O.	BOX 1293							
	رہ	address, and ZIP code TWIN		8330	3-1293		Phone no 208-	734-	<u>20</u> 7	7

Schedule B

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

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 THE EDWARD L. UHLIG FOUNDATION 82-0503980 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)

Employer identification number

THE EDWARD L. UHLIG FOUNDATION

82-0503980

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF EDWARD L UHLIG 4384 E 3500 N MURTAUGH, ID 83344	\$	Person X Payroll
(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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
923452 02-0		\$Schodule B (Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2009)

of Part II

Name of organization

Employer identification number

THE EDWARD L. UHLIG FOUNDATION

82-0503980

Part II	Noncash Property (see instructions)	_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
23453 02-0	1-10	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2009)

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
SMITH BARNEY			148	•
TOTAL TO FORM 990-PF, PART I, LIN	E 3, COLUMN A		148	<u>·</u>
FORM 990-PF DIVIDENDS AND	D INTEREST FROM	SECURITIES	STATEMENT	<u> </u>
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	
SMITH BARNEY	3,802.	0.	3,802	•
TOTAL TO FM 990-PF, PART I, LN 4	3,802.	0.	3,802	- -
FORM 990-PF RE	NTAL INCOME		STATEMENT	<u> </u>
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INCOM	E
RESIDENTIAL HOME ON 1.28 ACRES LANOFFICE BLDG, SHOP AND 17.2852 ACRE		1 2	6,185 8,400	
TOTAL TO FORM 990-PF, PART I, LIN	E 5A		14,585	- -
FORM 990-PF REN	TAL EXPENSES		STATEMENT	4
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
GROUNDS MAINTENANCE INSURANCE PROPERTY TAX REPAIRS - SUBTO INSURANCE PROPANE TANK RENT PROPERTY TAX REPAIRS	TAL - 1	100. 1,318. 2,247. 1,420. 1,318. 185. 872. 1,419.	5,085	•

THE EDWARD L. UHLIG FOUNDATION	82-0503980
WATER SHARES UTILITIES - SUBTOTAL - 2	601. 2,197. 6,592.
TOTAL RENTAL EXPENSES	11,677.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B	2,908.

FORM 99	0-PF _.	GAIN OR (LOSS) F	FROM SALE OF	ASSETS	STA'	rement 5
DESCRIP	(A) FION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
342.5468	8 SH CONSOL ENE	RGY		PURCHASED	05/26/09	12/23/09
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF		G) TIV	(F)
-	17,818.		SALE	DEPREC	0. GAIN	OR LOSS 4,492.
	17,010.	15,520.		· · · · · · · · · · · · · · · · · · ·	···	4,472.
DESCRIPT	(A) FION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
463.291	7 SH MOSAIC CO			PURCHASED	05/26/09	12/23/09
	(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
_	SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
	27,555.	26,170.	0		0.	1,385.
DESCRIPT	(A) FION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
702 SH I	PLUM CREEK TIME	ER		PURCHASED	05/26/09	12/23/09
	(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
	SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
_	25,661.	23,661.	C	•	0.	2,000.

DESCRIPT	(A) TION OF PROPERTY				ANNER QUIRED		ATE JIRED	DATE S	OLD
535 SH C	QUESTAR	_		PUR	CHASED	05/2	26/09	12/23	/09
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE O SALE		(E) DEPREC.	_	GAIN	(F) OR LOS	s
-	22,406.		 	0.		0.		4,3	
	OR LOSS FROM SA					_		12,1	98.
ייסייאד. ייס	FORM 990-PF, PA	ART T. LINE 6A				-		12,1	98.
101111	7 10141 770 11, 11	1, 21, 011				=			
FORM 990)-PF	LEG	AL FEES				STAT	PEMENT	6
DESCRIPT	FION	(A) EXPENSES PER BOOK	(B) NET INV S MENT IN	EST-	ADJU	C) JSTEI INCON	O ((D) CHARITA PURPOS	
LEGAL EX	 KPENSE	15	6.	117.					39.
то ғм 99	90-PF, PG 1, LN 1	.6A 15	6.	117.					39.
FORM 990)-PF	ACCOUN	TING FEES				STAT	PEMENT	7
DESCRIPT	rion	(A) EXPENSES PER BOOK	(B) NET INV S MENT IN	EST-	ADJU			(D) CHARITA PURPOS	
ACCOUNTI PREPARAT	ING FEES AND TAX	12	4.	93.					31.
TO FORM	990-PF, PG 1, LN	1 16B 12	4.	93.					31.

FORM 990-PF	TAX	ES		STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
FEDERAL 990 PF TAX PAID PROPERTY TAX PROPERTY TAX	303. 2,247. 872.	2,247 872	•	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	3,422.	3,119	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
GROUNDS MAINTENANCE INSURANCE REPAIRS INSURANCE PROPANE TANK RENT REPAIRS WATER SHARES UTILITIES	100. 1,318. 1,420. 1,318. 185. 1,419. 601. 2,197.	100 1,318 1,420 1,318 185 1,419 601 2,197	•	0. 0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	8,558.	8,558	•	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 10
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
STOCK			174,870.	207,945.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		174,870.	207,945.

THE EDWARD L. UHLIG FOUNDATION

FORM 990-PF OTHER INVESTMEN	TS	STATEMENT	11
DESCRIPTION	VALUATION METHOD	BOOK VAL	UE
REMAINDER INTEREST GEORGIE'S HOUSE	COST	82,4	78.
TOTAL TO FORM 990-PF, PART II, LINE 13		82,4	78.

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

• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this t complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	,	
Parl	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A com	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con only	nplete	▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ncome tax returns.	exten	sion of time
noted (not at you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic firs. gov/efile and click on e-file for Chanties & Nonprofits.	ically if	(1) you want the additional ated Form 990-T. Instead,
Туре	Name of Exempt Organization	Emp	loyer identification number
print	THE EDWARD L. UHLIG FOUNDATION	8	2-0503980
File by to due date filing you	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX AA		
return S instructi			
	Form 990 Form 990-T (corporation) Form 45 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 55 Form 990-EZ Form 990-T (trust other than above) Form 66 Form 990-PF Form 1041-A Form 86 JEANENE FRAZIER	227 069 370	
Tel If ti	books are in the care of P.O. BOX AA, TWIN FALLS, ID - 83303-00 dephone No. > 208-731-1781 FAX No. >	ıs ıs fo	
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unital NOVEMBER 15, 2010, to file the exempt organization return for the organization named as is for the organization's return for: Calendar year	above.	The extension Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	Ι	····-
	nonrefundable credits. See instructions.	3a_	\$ 0.
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 0.
С	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	<u> </u>	
	See instructions.	3c	\$ 0.

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

Form 8	3868 (Rev. 4-2009)			Page 2
• If v	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check the	ıs box		▶ [X]
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously		8868.	
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original	no copies i	needed).	
_	Name of Exempt Organization	່ລ່ Emp	loyer iden	tification number
Туре	or			
print	THE EDWARD L. UHLIG FOUNDATION	ූ 8	2-050	3980
File by extended due date	Number, street, and room or suite no If a P.O. box, see instructions.	For I	RS use on	ly
filing the return is instruct	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			hy gji Nortanije kipa Sá
Chec	k type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	_	orm 5227 orm 6069	Form 8870
STOP	PI Do not complete Part II if you were not already granted an automatic 3-month extension on a pre	viously file	d Form 8	868.
Te If t	JEANENE FRAZIER the books are in the care of ▶ P.O. BOX AA, TWIN FALLS, ID - 83303- the phone No. ▶ 208-731-1781 FAX No. ▶ 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) I request an additional 3-month extension of time until FEBRUARY 15, 2011. For calendar year, or other tax year beginning if this tax year is for less than 12 months, check reason: State in detail why you need the extension	If this is fo	ers the ex	tension is for
•	TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO G	ATHER	INFOR	MATION
	NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETUR			
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	1.3		
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid	280		_
	previously with Form 8868.	8b	\$	0.
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			•
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruct	ions. 8c	\$	0.
	Signature and Verification			
Under	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and	to the best	of my knowl	edge and beliet,
	ue, correct, and complete, and that I am authorized to prepare this form	Date	► 11 -1	15-2010

Form 8868 (Rev 4-2009)