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SCAMNED MAR 3 0 2011

Form **990-PF**

Department of the Treasury

Internal Revenue Service

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

		dar year 2009, or ta	x year beginnir	ig M	ΑY	1	, 2	009	, and e	nding	APR	30, 2010	_
g (heck	all that apply:	Initial reti	ווו			In	utial return of a f	ormer public (charity		Final return	
<u>€</u>			Amended	l return			X	Address char	nge		Name ch	ange	
Os	the	IRS Name of found	ation								A Emplo	yer identification	number
<u> </u>	label	.											
Ot	įęrwi	se, <u>TALLGRA</u>								Ι		<u>-1111988</u>	
	print Etype	į.	et (or PO box num		ot de	livered	d to str	eet address)		Room/suite		hone number	22
See	Spe	cific Od and and					· ·				1_	<u>2-456-15</u>	
ans	rictio	ILARRODS	ate, and ZIP cod		22	Λ						ption application is p eign organizations	
	S -	type of organization					t nrava	te foundation			2. Fore	eigh organizations me ck here and attach co	eting the 85% test,
.,}₩	_	ction 4947(a)(1) nor						ole private found	ation		1		
l Fa		rket value of all asse		1					Accr	rual		ate foundation sta section 507(b)(1)	tus was terminated
		Part II, col. (c), line	-			-	specif				1		60-month termination
	-\$			(Part I, c				st be on cash	basis.)			section 507(b)(1)	
Pá	art I	Analysis of Reven	ue and Expense	9S	<u>.</u>		(a) R	evenue and	(b) Net in	vestment	(c)	Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the	amounts in column	(a))	ŭ.	е	ехреп	ses per books	ince	ome 		income	(cash basis only)
	1	Contributions, gifts,	, grants, etc., red	eived				<u>16,213.</u>			ļ		
	2	Check Interest on savings and	oundation is not require	d to attach Sch I	3								
	3	cash investments	, ,					4 500		1 500	!		
	4	Dividends and intere	est from securiti	es				4,620.		4,620.	1	4,620.	STATEMENT 1
	'.	Gross rents											
	١.	Net rental income or (lo						1,323.					
ī	l la	Net gain or (loss) from a Gross sales price for al		1,323				1,545.	· · · · · · · · · · · · · · · · · · ·				-
Revenue	7	assets on line 6a Capital gain net income			•				†	1,323.			_
æ	8	Net short-term capi		-,	ı							0.	· ·-
	9	Income mortification	ns.		_,								
	10a	Gross sales less return:	RECEIV	'ED									
	b	Less Cost of goods so	ld		ပျ								
	C	Gross profit of loss	MAR 21	2011									
	11	Other income		- 10	8								
	12	Total. Add lines 11			≐∐	_		22,156.	ļ	<u>5,943.</u>		<u>4,620.</u>	
	13	Compensation of office		ested	ן נــ			0.		0.	l .	0.	0.
	14 15	Other employee sala Pension plans, emp	-		ŀ								
ses	l	Legal fees	ioyee bellelits		ł		-						
	ı	Accounting fees	S	TMT 2	Ì			1,859.		0.		0.	1,859.
άX	I	Other professional f			Ì								
ě	17	Interest			į								
rati	18	Taxes								-			
nist	19	Depreciation and de	pletion					3,848.		0.		0.	
│ Operating and Administrative Exper	20	Occupancy											
_₹		Travel, conferences	_								 		
a	22	Printing and publica		mram 2	ŀ			1 700	 				1 706
ting	23	Other expenses		TMT 3	ŀ			1,796.		0.		0.	1,796.
era	24	Total operating and expenses. Add lines						7,503.		0.		0.	3,655.
o	25	Contributions, gifts,	-		ł			9,430.					9,430.
		Total expenses and		1	ŀ				ļ <u></u> .				2,430.
	~	Add lines 24 and 25		••				16,933.		0.		0.	13,085.
_	27	Subtract line 26 from		<u> </u>	_				-				
	a	Excess of revenue over	expenses and dist	oursements				5,223.					
	b	Net investment inco	ome (if negative, e	nter -0-)	[5,943.			
0005		Adjusted net incom									<u></u>	4,620.	<u> </u>
9235 02-0	2-10	LHA For Privacy	Act and Paperv	vork Reduc	tion /	Act N	lotice,	, see the instruc	tions.		9		Form 990-PF (2009)

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FOI	rm 95	10-PF (2009) TALLGRASS FARM FOUNDATI			1111988 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	-	976.	1,391.	
	2	Savings and temporary cash investments		2,576.	2,576.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	l ′	Less; allowance for doubtful accounts			
Assets	_	Inventories for sale or use			<u> </u>
Ass		Prepaid expenses and deferred charges			
•	ſ	Investments - U.S. and state government obligations			
	I	Investments - corporate stock STMT 4	0.	6,080.	59,660.
	C	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 ► 233, 289.		·	
		Less accumulated depreciation STMT 5 > 17,305.	219,832.	215,984.	468,663.
	15	Other assets (describe ▶			
		·			· · · · · · · · · · · · · · · · · · ·
	16	Total assets (to be completed by all filers)	220,808.	226,031.	532,290.
		Accounts payable and accrued expenses	220,000.	220,031.	33272301
	18	Grants payable			
	19	Deferred revenue			
Liabilities		ľ			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
		Total Pol Petro / add base 47 thorough 000			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ທູ		and complete lines 24 through 26 and lines 30 and 31.			
20	24	Unrestricted			
盲	25	Temporarily restricted			
Ä	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	220,808.	226,031.	
Net Assets or Fund Balances	30	Total net assets or fund balances	220,808.	226,031.	
_	L -				
	31	Total liabilities and net assets/fund balances	220,808.	226,031.	
P	art				
_					
		net assets or fund balances at beginning of year - Part II, column (a), line	3 U		000 000
		st agree with end-of-year figure reported on prior year's return)		1	220,808.
		amount from Part I, line 27a		2	5,223.
		r increases not included in line 2 (itemize)		3	0.
		lnes 1, 2, and 3		4	226,031.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	226,031.
					Form 990-PF (2009)

$\overline{}$			TOUNDATION				<u> </u>	<u> </u>	Page 3
Ŀ			ax on Investment	income	I (b) How	nogurad	 		
	(a) List and descri	be the kind(s) of prope	rty sold (e.g., real estate, ock, 200 shs. MLC Co.)		P - Pi	acquired irchase	(c) Date acquire (mo., day, yr.	ed (d) [) (mo.	Date sold day, yr.)
_	CAPITAL GAINS I				יט - ט	onation	(,,, ,	, (******	
la b		OTATDEMDS			1				<u> </u>
						1.			
_`					1				
-	-							_	
	(e) Gross sales price	(f) Depreciation al (or allowable		st or other basis expense of sale		<u>-</u>	(h) Gain or (e) plus (f) m		
	1,323.								1,323.
Ŀ									
_(
_	1								-
_6									
_	Complete only for assets showing						I) Gains (Col. (h) I. (k), but not les:		
_	(i) F.M.V. as of 12/31/69	(j) Adjusted ba as of 12/31/6		cess of col. (1) col. (j), if any			Losses (from	col. (h)) ´	
_ 8	1						 		<u>1,323.</u>
_ <u>t</u>									
_	C .		-						
	<u>. </u>	<i>C.</i> ,			$\overline{}$				
2	Capital gain net income or (net cap	oital loss) { If gai	n, also enter in Part I, line ss), enter -0- in Part I, line	<i>7</i> 7	<u>}</u>			<u> </u>	1,323.
3	Net short-term capital gain or (loss	•	s 1222(5) and (6):		٦				
	If gain, also enter in Part I, line 8, o	column (c).			<u> </u>				0.
ſ	If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 49	40(e) for Reduced	Tax on Net	Inves	tment Inc	come		
W	section 4940(d)(2) applies, leave the ast the foundation liable for the section of the section o	on 4942 tax on the dist fy under section 4940(e	e). Do not complete this pa	ırt.				☐ Ye	s X No
÷	(a)	don delatini for dadri ye	(b)	making any onti-	(c)			(d) Distribution rati	
	Base periód years Calendar year (or tax year beginnin	a in) Adjusted q	ualifying distributions	Net value of no		le-use assets	(col. (i	distribution rati b) divided by c	o.ol. (c))
_	2008		13,969.			1,239			274415
_	2007		22,438.			2,743		8.	180095
	2006		20,288.			2,820			194326
_	2005		25,548.			1,743			<u>657487</u>
_	2004		22,798.			3,068	3.	<u>7.</u>	<u>430900</u>
	Total of line 1, column (d)						2	48.	737223
3	Average distribution ratio for the 5 the foundation has been in existen		de the total on line 2 by 5,	or by the number	of years		3	9.	747445
_	Enter the net value of noncharitable	= -	rom Part X. line 5				4	5	4,923.
									5,359.
	Multiply line 4 by line 3						5		
6	Enter 1% of net investment income	e (1% of Part I, line 27t	0)				6		59.
7	Add lines 5 and 6						7	53	5,418.
8	Enter qualifying distributions from	•	De AMILLO M	I de about	. بمر		8	1	<u>3,085.</u>
_	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in	Part VI, line 1b, and comp	lete that part usir	ng a 1% ta	ix rate.			DF ::
								Earm OOF	LPE (2000)

	n 990 : PF	(2009) TALLGRASS FARM FOUNDATION, INC Excise Tax Based on Investment Income (Section 4940		49	940(b), 4	1940(e), or 4		1111 - see i			Page 4 1 s)
1a	Exempt	operating foundations described in section 4940(d)(2), check here and en	ter "N/	/A"	on lir	ne 1.		ì					
		ruling or determination letter: (attach copy of letter if nece					ons)						
b	Domest	tic foundations that meet the section 4940(e) requirements in Part V, check here		an	nd en	ter 1%		•	1			1	19.
		l, line 27b											
C	All othe	r domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	rt I,	line	12, co	l. (b)	J					
2	Tax und	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ners er	nter	r -0-)	1			_2_				0.
3	Add line	es 1 and 2							3			1	<u> 19.</u>
4	Subtitle	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers e	ente	er -0-))			4				0.
5	Tax bas	sed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-							5			1	<u> 19.</u>
6	Credits/	Payments:											
а	2009 es	stimated tax payments and 2008 overpayment credited to 2009	6a	\downarrow									
b	Exempt	foreign organizations - tax withheld at source	6b	_									
C	Tax paid	d with application for extension of time to file (Form 8868)	6c	1									
d	Backup	withholding erroneously withheld	6d						4				
		edits and payments. Add lines 6a through 6d							7				<u>0.</u>
8	Enter ar	ny penalty for underpayment of estimated tax. Check here 📖 if Form 2220 is attac	hed						8				
		e. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE	SI	ΓA	TE	MEI	1T 6		9			1	<u> 19.</u>
		yment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					1		10				
		e amount of line 10 to be: Credited to 2010 estimated tax					Refur	ided 🚩	11				
		A Statements Regarding Activities								_			
1a	During	the tax year, did the foundation attempt to influence any national, state, or local legisl	ation c	or d	dıd it p	partici	pate or	ıntervene	e in			Yes	
		itical campaign?									1a		X
b	Did it sp	pend more than \$100 during the year (either directly or indirectly) for political purpos	es (se	e in	nstruc	ctions	for defi	nition)?			1b		<u>X</u>
	If the a	nswer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copie	es e	of an	ıy ma	tenals ,	publishe	ed or				
	dıstnbı	ited by the foundation in connection with the activities.											
C	Did the	foundation file Form 1120-POL for this year?									1c		_X_
d	Enter th	e amount (if any) of tax on political expenditures (section 4955) imposed during the	-					_					
		the foundation. > \$ 0 . (2) On foundation managers.		_				0.	_				
е		e reimbursement (if any) paid by the foundation during the year for political expendit	ure tax	х ІП	npose	ed on	founda	tion					
	•	ers. ► \$0.											
2		foundation engaged in any activities that have not previously been reported to the IR	S?								2_		_X_
		" attach a detailed description of the activities.											
3		foundation made any changes, not previously reported to the IRS, in its governing in		nent	t, artı	cles o	fincorp	oration,	or		1		
		or other similar instruments? If "Yes," attach a conformed copy of the change									3_		<u>X</u>
		foundation have unrelated business gross income of \$1,000 or more during the year	7							_ , _	4a		<u>X</u>
		has it filed a tax return on Form 990-T for this year?							V	I/A	4b		
5		ere a liquidation, termination, dissolution, or substantial contraction during the year?									5		<u>X</u>
_		" attach the statement required by General Instruction T											
6		requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ner:										
	•	nguage in the governing instrument, or											
		ate legislation that effectively amends the governing instrument so that no mandatory	direct	tion	ns tha	at con	nict with	the stat	e law		_		
_		in in the governing instrument?									6	_ <u>X</u> _	
7		foundation have at least \$5,000 in assets at any time during the year?										<u>X</u>	
_		" complete Part II, col. (c), and Part XV.											
ва		e states to which the foundation reports or with which it is registered (see instruction	is) 🟲	_									
_		North less 7 heaths foundates foundates again (Form 200 PF to the Atlanta	ha			1.1 '		-\					
D		nswer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atl	iorney	/ Lie	eneral	ı (or d	esignat	e)				v	
Λ		state as required by General Instruction G? If "No," attach explanation	tion 4	10.40	27.370	۸ ۵۰ ۸	0407-577	() for!	nda-		_8b_	<u>X</u>	
y		oundation claiming status as a private operating foundation within the meaning of sec				-	942(J)(o) for cale	enuar			v	
10		09 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," co									9	X	<u>x</u>
IU	DIU AIIY	persons become substantial contributors during the tax year? If "Yes," attach a schedule	e listing	g the	eir nan	nes and	addres	ses		Га-	10 ~ 000	_DE /	
										For	m 990	-FF(ZUU9)

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

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orm 990-PF (2009) TALLGRASS FARM FOUNDATION Part VII-B Statements Regarding Activities for Which I		Poguirod (20-11119	88	Page 6
	rollii 4720 May De F	required (contin	uea)		
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	- 4045(-\\0		es X No		
(1) Carry on propagation, or otherwise attempt to influence registation (section (see section 4955); (2) Influence the outcome of any specific public election (see section 4955); (3)			es LALINO		
any voter registration drive?	or to carry on, unectry or more		es X No		
•	n		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		L Y6	es Lalino		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in Section		es X No		
509(a)(1), (2), or (3), or section 4940(d)(2)?			S LALINO		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t		es X No		
the prevention of cruelty to children or animals?	d Ab		S LALINO		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni		n Regulations	NT / 3	F	
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 f					
expenditure responsibility for the grant?		[/A	es L No	İ	
If "Yes," attach the statement required by Regulations section 53 494.					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u>ر</u> ۲۰۰۰	es X No		
a personal benefit contract?		Y6		~	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		_	<u>6b </u>	X
If "Yes" to 6b, file Form 8870.	.h.ltt		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	<u> </u>	76	
b If yes, did the foundation receive any proceeds or have any net income attribut Part VIII Information About Officers, Directors, Trust		nagore Highly	~~, ~~	7b	!
Part VIII Paid Employees, and Contractors	ees, roundation wa	mayers, mgm	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco allo	unt, other wances
TIMOTHY C. PETERS	PRESIDENT/DIR				
1279 CENTRAL PIKE					
HARRODSBURG, KY 40330	0.00	0.	٥.		0.
	SEC/TREAS/DIR				
1279 CENTRAL PIKE					
HARRODSBURG, KY 40330	0.00	0.	o.		0.
	DIRECTOR				
12740 WOODSHIRE PLACE					
BATON ROUGE, LA 70816	0.00	0.	0.		0.
	DIRECTOR	, ,			
SIERRA PLACE, NE					
ALBUQUERQUE, NM	0.00	0.	0.		0.
Compensation of five highest-paid employees (other than those inc					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(a) Componentia	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allo	wances
NONE					
				<u> </u>	
otal number of other employees paid over \$50,000			•		0
			Form	990-P	F (2009)

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must of	complete this part. Foreign foundations, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	, purposes:	-
a Average monthly fair market value of securities	1a	51,597
b Average of monthly cash balances	1b	51,597. 4,162.
c Fair market value of all other assets	1c	······································
d Total (add lines 1a, b, and c)	1d	55,759
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	55,759
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see ii	nstructions) 4	836.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part	V, line 4	54,923
6 Minimum investment return. Enter 5% of line 5	6	2,746.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(4) foreign organizations check here X and do not complete this part.)	5) private operating foundations and 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, li	ne 1 7	
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	:	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	<u>1a</u>	13,085.
b Program-related investments - total from Part IX-B	<u>1b</u>	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	c., purposes 2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part	t XIII, line 4	13,085
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ıt	
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,085
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c	alculating whether the foundation gualifies for the	section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

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Form **990-PF** (2009)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year SEE STATEMENT 12 9,430. ➤ 3a Total **b** Approved for future payment NONE Total 923611 02-02-10 Form **990-PF** (2009)

Part XVI-A	Anal	sis of	Income	-Producing	Activities
	, , , , , , , , , , , , , , , , , , ,	,010 01	111001110	I I Oddonig	ACCITICS

Enter gross amounts unless otherwise indicated.	Unrelated (a)	business income (b)	(C) Exclu-	by section 512, 513, or 514	(e)
1 Program service revenue:	Business code	Amount	Excfu- sion code	(d) Amount	Related or exempt function income
a	COUC	-	1		
b					
С					
d					-
e					
f					
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	4,620.	
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				ļ	
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	1,323.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b					
<u> </u>		_			
d	_			-	···.
e 2 Subtotal. Add columns (b), (d), and (e)	_	0		5,943.	0
3 Total. Add line 12, columns (b), (d), and (e)			.•		<u> </u>
See worksheet in line 13 instructions to verify calculations.	`			10	<u> </u>
					<u> </u>
Part XVI-B Relationship of Activities	s to the Accon	nplisnment of E	=xempt Pi	urposes	
Line No. Explain below how each activity for which in	ncome is reported in c	column (e) of Part XVI	-A contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other th	an by providing fund:	s for such purposes).			
					

			RASS FARM FOU		20-111:			ige 13
<u> P</u>	art X	VII Information Re Exempt Organ		o and Transactions ar	nd Relationships With Noncha	ritable	9	
1	Did th	ne organization directly or indi	rectly engage in any of the follo	owing with any other organization	described in section 501(c) of		Yes	No
	the C	ode (other than section 501(c	e)(3) organizations) or in section	n 527, relating to political organiz	rations?			
í	a Trans	fers from the reporting found	ation to a noncharitable exemp	t organization of:		ŀ		
	(1) (Cash				1a(1)		X
	(2)	Other assets				1a(2)		X
ı	Other	transactions:						
		Sales of assets to a noncharita	• •	,		1b(1)		X
			oncharitable exempt organizatio	n		1b(2)	_	X
		Rental of facilities, equipment,				1b(3)		X
		Reimbursement arrangements	3			1b(4)		X
		oans or loan guarantees		latina.		1b(5)	-	X
			embership or fundraising solicit			1b(6)		X
			ailing lists, other assets, or paid		ave about the four market value of the goods.	1c	L	
•					ays show the fair market value of the goods, on any transaction or sharing arrangement, s		seis,	
			other assets, or services receiv		in any transaction or snaring arrangement, s	HUW III		
(a)	Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	
<u>\-</u> /		(0)	N/2	· · · · · · · · · · · · · · · · · · ·	(2) 2000 (210) 01 (410) 02 (410) 02 (410)		· ca · go · · · c	
_			14/4	•				
_								
							•	
		<u> </u>			<u> </u>			
28			•	one or more tax-exempt organiza	ations described	– 1	T.	٦
			r than section 501(c)(3)) or in s	section 5277	L	Yes	Λ	No
) II TE	s," complete the following sch (a) Name of org		(b) Type of organization	(c) Description of relations	hin		
_		N/A	janizadon	(b) Type of organization	(c) Bescription of relations	пр		
		N/A						
_			· · · · · · · · · · · · · · · · · · ·					
					nts, and to the best of my knowledge and belief, it is	true, corre	ect,	
	and con	nplete Declaration of pleparer (other	er than taxpayer or fiduciary) is based	d on all information of which preparer ha	as any knowledge			
_	N			- V2-16-11	I min mi			
ere	Sı	gnature of officer or trustee	7	∕ \Date	Title			
Sign Here	,	Preparer's	JAH DA	Da	te Check If self-	r's identif	ying num	ber
Sig	声	signature V	VIII an		employed ▶			
-	Paid sparer	Firm's name (or yours LOU-I			EIN ▶			
	Paid Preparer's Use Only		GARDINER LAN					
		address, and ZIP code LOUI	SVILLE, KENTU	CKY 40205	Phone no. (502	<u>) 459</u>	<u>-81</u>	00

(502)459-8100 Form **990-PF** (2009)

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

_		
	ALLGRASS FARM FOUNDATION, INC.	20-1111988
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(General Rule X For an organizati	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, (10) organization can check boxes for both the General Rule and a Special Rule, (10) or filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in raplete Parts I and II.	
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	·
aggregate contri	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cont butions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary for children or animals. Complete Parts I, II, and III	- · · · · · · · · · · · · · · · · · · ·
contributions for If this box is che purpose Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contuse exclusively for religious, charitable, etc., purposes, but these contributions did not a cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. rely religious, charitable, etc ,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act and for Form 990, 990-	·	B (Form 990, 990-EZ, or 990-PF) (2009)

Employer identification number

art 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

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

Schedule B (For	m 990, 990-EZ, or 990-PF) (2009)		Page of of Part III
Name of orga	anization		Employer identification number
M177	1.66 F1 F1 F0 F0 F1 F1 F1 F1 F1	~	00 1111000
Part III	ASS FARM FOUNDATION, INC Exclusively religious, charitable, etc., indi	C. vidual contributions to section	20-1111988 on 501(c)(7), (8), or (10) organizations aggregating
	more than \$1,000 for the year. Complete of Part III, enter the total of exclusively religious \$1,000 or less for the year. (Enter this information)	olumns (a) through (e) and the s, chantable, etc, contributions	e following line entry. For organizations completing sof
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	t
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(=) N =			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(a) Transfer of the	
		(e) Transfer of gif	ı
Ĺ	Transferee's name, address, and	Relationship of transferor to transferee	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	DEPRECIATION	OF ASS	SETS NOT	HELD	FOR	INVESTMENT	STATEMENT	5
DESCRIPTION				T OR BASI	5	ACCUMULATED DEPRECIATION	BOOK VALU	E
	IMPROVEMENT IMPROVEMENT			126,7 97,5 3,8 5,1	71. 00.	16,250. 0. 538. 517.	110,5 97,5 3,2 4,6	71. 62.
TOTAL TO FM 99		I, LN 1	. 4	233,2		17,305.	215,9	

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

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Current Year Deduction	3,250. 0. 253. 3,848.
Current Sec 179	o
Accumulated Depreciation	13,000.
Basis For Depreciation	126,750. 97,571. 3,800. 5,168. 233,289.
Reduction In Basis	ò
Bus % Excl	
Unadjusted Cost Or Basis	126,750. 97,571. 3,800. 5,168. 233,289.
No o	7
Life	39.00 <u>17</u> 15.00 <u>17</u> 15.00 <u>17</u>
Method	I I S I S I S
Date Acquired	050204SL 122807L 032808SL 071008SL
Description	1HISTORIC BARN 2DONATED LAND FENCE - LAND SIMPROVEMENT * TOTAL 990-PF DEPR
Asset	L

(D) - Asset disposed

*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

18

FORM 990-PF DIVIDENT	S AND	INTER	EST FROM	SECUE	RITIES	ST	ATEMENT	1
SOURCE		GROSS	AMOUNT	CAPITAL GAINS NT DIVIDENDS		COLUMN (A) AMOUNT		
HILLIARD LYONS	•		5,943.		1,323.		4,62	20.
TOTAL TO FM 990-PF, PART I, I	N 4		5,943.		1,323.		4,62	20.
FORM 990-PF	AC	COUNTI	NG FEES			ST	ATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
ACCOUNTING FEES		1,859.		0.		0.	1,8	59.
TO FORM 990-PF, PG 1, LN 16B		1,859.		0.		0.	1,85	59 .
FORM 990-PF	0	THER E	XPENSES			ST	ATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
INSURANCE - BARN REPAIRS - BARN FORT HARROD TOUR DUES		1,128. 500. 68. 100.		0. 0. 0.		0. 0. 0.	(28. 00. 68.
TO FORM 990-PF, PG 1, LN 23		1,796.		0.		0.	1,79	96.
FORM 990-PF	CO	RPORAT	E STOCK			ST	ATEMENT	4
DESCRIPTION				ВОС	OK VALUE	_F <u>A</u>	IR MARKET VALUE	r
BROWN FORMAN STOCK				-	6,080.		59,66	50.
TOTAL TO FORM 990-PF, PART II	, LIN	E 10B			6,080.		59,66	 50.

FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT S
ACTIVITY ONE		_
STUDENTS FROM N. PROGRAMS FOR FAI VALUE OF SMALL-; WELL AS THE NEE: FARMLAND AND THI NEARBY HISTORIC.	CONTINUED ITS EDUCATIONAL PROGRAMS BY HOSTI ATIVITY ACADEMY AND SACRED HEART SUMMERBRID RM FIELD DAY EXPERIENCES. STUDENTS LEARN T SCALE LOCAL FOOD AGRICULTURE AND GARDENING D TO BE SUSTAINABLE IN THE CONSERVATION OF E EARTH'S RESOURCES. THEY ARE ALSO TAKEN T AL SITES LIKE FT. HARROD AND SHAKERTOWN TO MING TECHNIQUES.	GE HE AS
		EXPENSES
TO FORM 990-PF,	PART IX-A, LINE 1	2,261
FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT 10
ACTIVITY THREE		
THE KY AGRICULT MERCER CO., A T EMPHASIZE FARMI FOUNDATION OF C OF THE FUTURE W	EXPRESSED ITS COMMITMENT TO THE FORMATION OURAL HERITAGE CENTER ON A NEIGHBORING FARM EACHING MUSEUM AND LIVING FARM THAT WILL NG AS A SOURCE OF FOOD AND HISTORICALLY THE IVILIZATION. SUSTAINABLE METHODS FOR FARMS ILL BE DEMONSTRATED INCLUDING WIND POWER, COMPOST MATERIALS AS NATURAL ENERGY SOURCE	IN
		EXPENSES
TO FORM 990-PF,	PART IX-A, LINE 3	465
		STATEMENT 1

_TIMOTHY C.-PETERS----LOIS MATEUS PETERS

FORM 990-PF

STATEMENT 12

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
SIERRA CLUB 85 SECOND ST., 2ND FLOOR SAN FRANCISCO, CA 94105		PUBLIC CHARITY	150.	
KY AGRICULTURE HERITAGE CENTER 2805 LOUISVILLE RD. HARRODSBURG, KY 40330		PUBLIC CHARITY	5,000.	
HABITAT FOR HUMANITY 2777 S. FLOYD ST. LOUISVILLE, KY 40209	NONE GENERAL FUND	PUBLIC CHARITY	300.	
JAMES HARROD TRUST 225 SOUTH MAIN ST. HARRODSBURG, KY 40330		PUBLIC CHARITY	400.	
PARTNERS FOR FAMILY FARMS P.O. BOX 22259 LEXINGTON, KY 40522	NONE GENERAL FUND	PUBLIC CHARITY	200.	
OCEANS OF MERCY P.O. BOX 860143 SHAWNEE, KS 66286		PUBLIC CHARITY	500.	
RAGGED EDGE COMMUNITY THEATRE 111 S. MAINT ST. HARRODSBURG, KY 40330	NONE GENERAL FUND	PUBLIC CHARITY	600.	
SUMMERBRIDGE LOUISVILLE 3628 VIRGINIA VE. LOUISVILLE,	NONE GENERAL FUND	PUBLIC CHARITY	400.	

GRANTS AND CONTRIBUTIONS

_KY- 402-11------

TALLGRASS FARM FOUNDATION, INC.			20-1111988
UNIVERSITY OF KENTUCKY RURAL JOURNALISM INSTITUTE 122 GREHAN BUILDING UK LEXINGTON, KY 40506	NONE GENERAL FUND	PUBLIC CHARITY	315.
MERCER CO. ARTS COUNCIL 1007 LEXINGTON RD. HARRODSBURG, KY 40330	NONE GENERAL FUND	PUBLIC CHARITY	100.
CRESCENT HILL BIRD SANCTUARY LOUISVILLE, KY		PUBLIC CHARITY	125.
NATIVITY ACADEMY 529 EAST LIBERTY ST. LOUISVILLE, KY 40202		PUBLIC CHARITY	340.
LEUKEMIA AND LYMPHOMA SOCIETY 301 EAST MAINT ST., STE 100 LOUISVILLE, KY 40202	NONE GENERAL FUND	PUBLIC CHARITY	100.
FOOD LITERACY PROJECT 9001 LIMEHOUSE LANE LOUISVILLE, KY 40222	NONE GENERAL FUND	PUBLIC CHARITY	100.
FESTIVAL OF ARTS AND BOOKS HARRODSBURG, KY 40330		PUBLIC CHARITY	300.
MERCER CO. 4-H 1007 LEXINGTON RD. HARRODSBURG, KY 40330	NONE GENERAL FUND	PUBLIC CHARITY	500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		9,430.

12/15/2010

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 you are filin 	g for an Automatic 3-Month Extension, complete only Part I and check this box		$\triangleright \overline{\mathbf{X}}$
-	g for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		. 0000
	te Part II unless you have already been granted an automatic 3-month extension on a previously file	ea Form	1 8808
Part I	Automatic 3-Month Extension of Time. Only submit onginal (no copies needed)		
A corporation re	equired to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
Part I only		•	. ▶ 🗀
All other corpor to file income ta	ations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an x returns.	extensi	on of time
noted below (6 (not automatic) you must subm	ig (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensio months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cor it the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file and click on e-file for Chanties & Nonprofits	cally if (1 nsolidate	l) you want the additional ed Form 990-T. Instead,
Type or Nar	ne of Exempt Organization	Emplo	yer identification number
print ma	LLGRASS FARM FOUNDATION, INC.	20	-1111988
File by the due date for Nur	nber, street, and room or suite no. If a PO box, see instructions 95 BARDSTOWN ROAD	, 20	1111700
instructions City	v, town or post office, state, and ZIP code For a foreign address, see instructions OUISVILLE, KY 40204		
Check type of	return to be filed (file a separate application for each return)		
Form 990		-	
Form 990		069	
X Form 990	-PF Form 1041-A Form 88	370	
Telephone N If the organiz If this is for a	TIMOTHY C. PETERS re in the care of 1295 BARDSTOWN ROAD - LOUISVILLE, KY 40 o 502-456-1522 FAX No cation does not have an office or place of business in the United States, check this box Group Return, enter the organization's four digit Group Exemption Number (GEN) f it is for part of the group, check this box and attach a list with the names and EINs of all in	ıs ıs for t	
•	an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time untigonal $\frac{15}{100}$, to file the exempt organization return for the organization named altergraphs return for		ne extension
is for the	alendar year or ux year beginning <u>MAY 1, 2009</u> , and ending <u>APR 30, 2010</u>		
is for the c		c	hange in accounting penoc
is for the company to the last tax 2 If this tax 3a If this app	year is for less than 12 months, check reason: Initial return Final return lication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
is for the company of the last section of the	year beginning MAY 1, 2009 , and ending APR 30, 2010 year is for less than 12 months, check reason. Initial return Final return blication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any dable credits. See instructions		hange in accounting penod
s for the car	year beginning MAY 1, 2009 , and ending APR 30, 2010 year is for less than 12 months, check reason: Initial return lication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any dable credits. See instructions lication is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	s 0
is for the large in the large i	year beginning MAY 1, 2009 , and ending APR 30, 2010 year is for less than 12 months, check reason: Initial return Final return discation is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any discation is for Form 990-PF or 990-T, enter any refundable credits and estimated ents made. Include any prior year overpayment allowed as a credit	3a	s 0
Is for the large in the large i	year beginning MAY 1, 2009 , and ending APR 30, 2010 year is for less than 12 months, check reason: Initial return Final return blication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any dable credits. See instructions blication is for Form 990-PF or 990-T, enter any refundable credits and estimated ents made. Include any prior year overpayment allowed as a credit Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3a	\$ 0
Is for the large in the large i	year beginning MAY 1, 2009 , and ending APR 30, 2010 year is for less than 12 months, check reason: Initial return Final return blication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any dable credits. See instructions blication is for Form 990-PF or 990-T, enter any refundable credits and estimated ents made. Include any prior year overpayment allowed as a credit of the Subtract line 3b from line 3a. Include your payment with this form, or, if required, with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	3a	s 0

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

Form 8868 (Rev. 4-2009)

3/1-	5/11			
<u>Form</u>	8868 (Rev. 4-2009) •		<u> </u>	Page 2
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	х.		. ▶ 🗓
Note	. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form	8868.	
• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Par	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies r	needed).	
Туре	or Name of Exempt Organization	Emp	loyer identific	ation number
print	TALLGRASS FARM FOUNDATION, INC.	2	0-11119	88
File by extended due da	Number, street, and room or suite no. If a P O. box, see instructions.		RS use only	
filing the return instruct	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
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 Torm 990-PF Form 990-T (trust other than above) Form 4720	 -	orm 5227 orm 6069	Form 8870
STOR	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8868.	
	TIMOTHY C. PETERS			
• Th	e books are in the care of ▶ 1295 BARDSTOWN ROAD - LOUISVILLE, KY 40	204		
	lephone No ▶ 502-456-1522 FAX No. ▶			
	he organization does not have an office or place of business in the United States, check this box			▶ □
• If 1	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi	s is fo	r the whole gro	up, check this
box	If it is for part of the group, check this box and attach a list with the names and EINs of all	memb	ers the extensi	on is for.
4	I request an additional 3-month extension of time until MARCH 15, 2011.			
5	For calendar year, or other tax year beginning MAY 1, 2009 , and ending	APR	_30, 20	10 .
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in acc	ounting period
7	State in detail why you need the extension			
	THE TAXPAYER NEEDS ADDITIONAL TIME TO COMPILE THE INFO	RMA	TION NE	CESSARY
	TO FILE A COMPLETE AND ACCURATE RETURN.			
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.
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	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 instructions.	8c	\$	0.
	Signature and Verification			
Under it is tri	penalties of perjury, I declare that Have examined this form, including accompanying schedules and statements, and to the je, correct, and complete, and that Jam authorized to prepare this form.	best o	f my knowledge	and belief,
Signat	ure ▶ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date	▶ /~	2/10//0
			Form 88	68 (Rev. 4-2009)