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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
- The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2009**Open to Public Inspection****A For the 2009 calendar year, or tax year beginning 05/01/09, and ending 04/30/10****B** Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**MIDWEST REGIONAL TURF FOUNDATION**

Number and street (or P O box, if mail is not delivered to street address)

PO BOX 2285

Room/suite

City or town, state or country, and ZIP + 4

WEST LAFAYETTE**IN 47996****D** Employer identification number**35-6045428****E** Telephone number**765-494-8039****F** Group Exemption Number

Number

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Accounting method ☐ Cash ☒ Accrual

Other (specify) ►

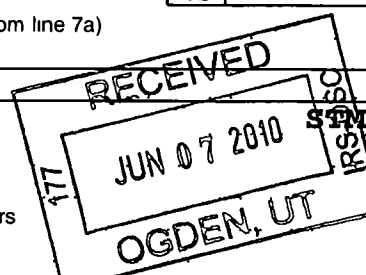
I Website: ► **WWW.MRTF.ORG****J** Tax-exempt status (check only one) — ☒ 501(c) (**3**) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **258,440****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)**

		1	2	3	4	5c	6c	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received				1	18,956															
	2	Program service revenue including government fees and contracts				2	92,200															
	3	Membership dues and assessments				3	56,895															
	4	Investment income				4	1,694															
	5a	Gross amount from sale of assets other than inventory		5a	40,000																	
	b	Less cost or other basis and sales expenses		5b	46,282																	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)				5c	-6,282															
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>																				
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)		6a	42,980																	
	b	Less direct expenses other than fundraising expenses		6b	20,662																	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)				6c	22,318																
7a	Gross sales of inventory, less returns and allowances		7a																			
b	Less cost of goods sold		7b																			
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				7c																	
8	Other revenue (describe ► SEE STATEMENT 3)				8	5,715																
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				9	191,496																
Expenses	10	Grants and similar amounts paid (attach schedule)				10	93,750															
	11	Benefits paid to or for members				11																
	12	Salaries, other compensation, and employee benefits				12																
	13	Professional fees and other payments to independent contractors				13	5,559															
	14	Occupancy, rent, utilities, and maintenance				14	38,157															
	15	Printing, publications, postage, and shipping				15																
	16	Other expenses (describe ► SEE STATEMENT 5)				16	60,053															
	17	Total expenses. Add lines 10 through 16				17	197,519															
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)				18	-6,023															
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)				19	265,024															
	20	Other changes in net assets or fund balances (attach explanation)				20	38,211															
	21	Net assets or fund balances at end of year Combine lines 18 through 20				21	297,212															

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	257,379	283,864
23	Land and buildings		
24	Other assets (describe ► SEE STATEMENT 7)	7,699	13,348
25	Total assets	265,078	297,212
26	Total liabilities (describe ► SEE STATEMENT 8)	54	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	265,024	297,212

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

Form **990-EZ** (2009)

2010 JUL 7 2010

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Form 990-EZ (2009)

MIDWEST REGIONAL TURF FOUNDATION

35-6045428

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)**Expenses**

What is the organization's primary exempt purpose?

SUPPORT TURF RESEARCH & EDUCATION

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

**28 CONFERENCES RELATED TO TURF MANAGEMENT AND RELATED TRAVEL
ALONG WITH SUPPORT FOR TURF RESEARCH**(Grants \$ **93,750**) If this amount includes foreign grants, check here ☐**28a****110,990**(Grants \$) If this amount includes foreign grants, check here ☐**29a**(Grants \$) If this amount includes foreign grants, check here ☐**30a****31 Other program services (attach schedule)**(Grants \$) If this amount includes foreign grants, check here ☐**31a****32 Total program service expenses** (add lines 28a through 31a)**32****110,990****Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated (See the instructions for Part IV.)

(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 & deferred compensation	(e) Expense account and other allowances
BRENT EMERICK PO BOX 2285	WEST LAFAYETTE IN 47996	PAST PRESIDENT 1.00	0	0	0
DAVID GEORGE PO BOX 2285	WEST LAFAYETTE IN 47996	VICE PRESIDENT 1.00	0	0	0
SCOTT LIPPENS PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
DAVID SULLIVAN PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
TROY RIPPY PO BOX 2285	WEST LAFAYETTE IN 47996	PRESIDENT ELECT 1.00	0	0	0
CHRIS PISKE PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
TOM LIST PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
RYAN BALDWIN PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
GARY SHETLER PO BOX 2285	WEST LAFAYETTE IN 47996	PRESIDENT 1.00	0	0	0
MIKE KENNY PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
GARY CRUM PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
JAMIE MEHRINGER PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
NIKKI HENDRICKSON PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
GREG LOVELL PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
ZAC REICHER PO BOX 2285	WEST LAFAYETTE IN 47996	EXEC DIRECTOR 1.00	0	0	0
CALE BIGELOW PO BOX 2285	WEST LAFAYETTE IN 47996	DIRECTOR 1.00	0	0	0
RANDY BREHMER PO BOX 2285	WEST LAFAYETTE IN 47996	TREASURER 1.00	0	0	0
JENNIFER BIEHL PO BOX 2285	WEST LAFAYETTE IN 47996	EXEC SECRETARY 1.00	0	0	0

DAA

Form 990-EZ (2009)

Form 990-EZ (2009) **MIDWEST REGIONAL TURF FOUNDATION** **35-6045428**
Part V Other Information (Note the statement requirements in the instructions for Part V.)

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	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instr	37a	
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed. IN		
42a The organization's books are in care of JENNIFER BIEHL PO BOX 2285 Located at WEST LAFAYETTE, IN ZIP + 4 47907 Telephone no 765-494-8039		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	X
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country	42c	X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Form 990-EZ (2009)

Form 990-EZ (2009)

MIDWEST REGIONAL TURF FOUNDATION

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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?		<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

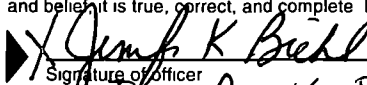
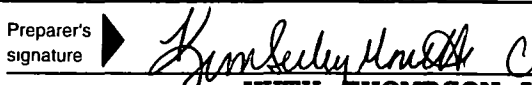
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000 ▶

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		6/1/2010 Date	
	Jennifer K. Biehl, Executive Secretary Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See instr)
	 Firm's name (or yours if self-employed), address, and ZIP + 4	05/24/10		P00337290 EIN ▶ 35-2055043 Phone no ▶ 765-428-5000
HUTH THOMPSON LLP PO BOX 970 LAFAYETTE, IN 47902-0970				

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

Form 990-EZ (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	75,799	76,010	82,959	82,873	75,851	393,492
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	175,572	127,287	132,867	82,868	92,200	610,794
3 Gross receipts from activities that are not an unrelated trade or business under section 513	27,750	31,127	31,578	43,224	42,980	176,659
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	279,121	234,424	247,404	208,965	211,031	1,180,945
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						1,180,945

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	279,121	234,424	247,404	208,965	211,031	1,180,945
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,362	7,041	9,207	9,888	1,694	36,192
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	8,362	7,041	9,207	9,888	1,694	36,192
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	2,051	926	186		5,715	8,878
13 Total support. (Add lines 9, 10c, 11, and 12.)	289,534	242,391	256,797	218,853	218,440	1,226,015
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	96.32 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	90.65 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	3 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	3 %

- 19a 33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ☒
- b 33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

PART III, LINE 12 - OTHER INCOME DETAIL

MISCELLANEOUS REVENUE	\$	8,878
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Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments**

<u>Description</u>	<u>Amount</u>
MEMBERSHIP DUES - BUSINESS	\$ 53,485
MEMBERSHIP DUES - INDIVIDUAL	3,240
MEMBERSHIP DUES - STUDENT	170
TOTAL	<u>\$ 56,895</u>

Federal Statements

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Statement 2 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities

Description		How Received	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Depreciation	Gain / Loss
ML&CO MITTS GLOB EQY IND PURCHASE				8/03/06	2/09/10	\$ 40,000	\$ 46,282	\$	\$ -6,282
TOTAL						\$ 40,000	\$ 46,282	0	\$ -6,282

Federal Statements**Statement 3 - Form 990-EZ, Part I, Line 8 - Other Revenue**

<u>Description</u>	<u>Amount</u>
OTHER INCOME	\$ <u>5,715</u>
TOTAL	\$ <u><u>5,715</u></u>

Federal Statements

Statement 4 - Form 990-EZ, Part I, Line 10 - Grants and Similar Amounts Paid to
Organizations

Name and Address	Date of Gift	Description of Property	Class of Activity				Book Value Explanation	Book Value Explanation	FMV Explanation
				Cash Contribution	Noncash Contribution				
PURDUE UNIVERSITY 915 WEST STATE STREET WEST LAFAYETTE, IN 47907			DANIEL CENTER	15,000					
PURDUE UNIVERSITY 915 WEST STATE STREET WEST LAFAYETTE, IN 47907			RESEARCH GRANTS	78,750					
TOTAL									
				93,750					

Federal Statements**Statement 5 - Form 990-EZ, Part I, Line 16 - Other Expenses**

<u>Description</u>	<u>Amount</u>
MRTF GOLF DAY	\$
GOLF DAY	6,484
EXPENSES	
MARKETING	7,705
NEWSLETTER & FACTSHEETS	2,000
MEMBERSHIP ROSTER	252
OFFICE EXPENSES	798
EXPO - CURRENT YEAR	10,456
TURF AND ORNAMENTAL	3,722
BASIC TURF WORKSHOP	1,062
MEALS & REFRESHMENTS	126
MEMBER RENEWAL & RECRUITM	2,126
ENDOWMENT DONATION	3,000
VISA - MASTERCARD	2,741
AGRONOMY SALARIES & BENEF	15,000
PURDUE RECEPTION	1,124
STUDENT ACTIVITIES	2,000
OTHER EXPENSES	1,457
TOTAL	\$ <u>60,053</u>

Statement 6 - Form 990-EZ, Part I, Line 20 - Other Changes in Net Assets or Fund Balances

<u>Description</u>	<u>Amount</u>
UNREALIZED GAIN/LOSS ON INVESTMENTS	\$ <u>38,211</u>
TOTAL	\$ <u>38,211</u>

Statement 7 - Form 990-EZ, Part II, Line 24 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
PREPAID EXPENSES AND DEFERRED CHARGES	\$ <u>7,699</u>	\$ <u>13,348</u>
	<u>7,699</u>	<u>13,348</u>

Statement 8 - Form 990-EZ, Part II, Line 26 - Total Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ <u>54</u>	\$ <u></u>
	<u>54</u>	<u></u>

35-6045428

Federal Statements

FYE: 4/30/2010

Special Events Direct Expenses

<u>Description</u>	<u>Amount</u>
COLUMN A	\$
MRTF GOLF DAY	
GOLF DAY	<u>4,323</u>
SUBTOTAL	<u>4,323</u>
 COLUMN B	
MRTF FIELD DAY	
FIELD DAY	<u>16,339</u>
SUBTOTAL	<u>16,339</u>
 TOTAL	<u><u>20,662</u></u>

DIRECT EXPENSES OTHER THAN FUNDRAISING EXPENSES
REPORTED ON FORM 990-EZ, PAGE 1, LINE 6B.