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SCANNED 0CT 0 6 2010

990-PF	
Department of the Treasury Internal Revenue Service	

Return of Private Foundation

OMB No 1545-0052

or Section 4947(a)(1) Nonexempt Charitable Trust	0000
Treated as a Private Foundation	2009
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements	<u> </u>
on toy year hadinging 05/01 2009 and ending	04/30 2010

_				or tax year beg				, and end				04730, 2010
G	Che	ck all t	hat apply	Initial retui		Initial return	•	ublic cha T	<u> </u>	lomo abona	<u> </u>	Final return
_			Name of fou	Amended	return	Addres	ss change		- 11	lame change A Employer is		eation number
	lea th	ne IRS	I vame or rou	indation.						A Chiployer ii		daon namber
•	ise u lab		THE MON	IKER FOUND <i>A</i>	TION						84-	1461847
		wise,				mail is not delivered to street	address)	Room/si	uite	B Telephone num	ber (see	page 10 of the instructions)
	pr	int		,			·		Ì			
_	or ty		1308 W.	COLORADO A	VENUE						(71	9) 635-0583
		pecific ctions.	City or town.	, state, and ZIP co	de			·		C If exemption pending, che		
	istiu	cuons.	-							D 1. Foreign of		► 1
			COLORADO	O SPRINGS,	CO 80	904				2 Foreign o	rganızatı	ions meeting the
Н	Che	ck type	e of organiza	ition X Secti	on 501(c)(3) exempt private f	oundation					ere and attach
	s	ection 4	4947(a)(1) no	nexempt charitable	e trust	Other taxable pr	ıvate founda	tion		·		status was terminated
ī	Fair	marke	et value of all	assets at end	J Acco	unting method X Ca	ash Acc	rual				(1)(A) check here .
			m Part II, coi			ther (specify)				F If the founds	ation is i	in a 60-month termination
	16)	▶ \$	2,6	15,735.	(Part I,	column (d) must be on	cash basis ,) 		under section	507(b)	(1)(B), check here . >
G	art I			nue and Expens		(a) Revenue and	(b) Net inve	estment	,,	c) Adjusted ne	ot	(d) Disbursements for charitable
		may n	not necessanly	olumns (b), (c), an equal the amount	s in	èxpenses per	incon		'`	income	`	purposes
_		colum	n (a) (see pag	e 11 of the instruc	rions))	books						(cash basis only)
	1	Contribut	tions, gifts, grants,	etc , received (attach scl	nedule) .	255,665.			<u> </u>	·- ·-		
	2	Check]	attach	Sch B	}		-					
	3		-	temporary cash inves	1	57,385.		7,385.	-			·
	4			est from securities		37,303.		7,303.				
			-	ss)		78,749.		····				
ηne			n or (loss) from sales price for all	sale of assets not on 1,110					-			
Revenue	-		on line 6a	me (from Part IV,			7	8,749.		- 		
Re	7 8	•	•	algain							-	·
	9			s · · · · · · · ·								
		Gross sa	ales less returns									
	b		ost of goods sold									
	С	Gross	profit or (loss)	(attach schedule)								
	11	Other	income (attacl	h schedule)								
_	12	Total.	Add lines 1 th	rough 11		391,799.	13	6,134.				··· · · ·
				rs, directors, trustees.		0.						
S	14			ries and wages .					ļ			
use	15			oyee benefits					-			
çpe	16a	Legal f	ees (attach so	chedule)		1,050.		0.			0.	1,050
Ű				ach schedule) ATC		1,050.			<u> </u>			1,030
ţį		-	='	ees (attach schedu				R	EC	EIVED		
štra	17 18			(see page 14 of the ins							18	
ž	19	•		schedule) and de				8g S	ו מ	7 2010	Ö	
퉏	20	•						w 3	-1 -2	<u>E</u>	18	
and Administrative Expenses	21			and meetings					20	CN LIT		
E	22			tions				U	טט	EN, UT		
ing	23	Other	expenses (atta	ach schedule) AT	CH 2.	11,059.						11,059
Operating	24			l administrative ex				_				
Spe		Add lin	nes 13 through	h 23		12,109.		0.	<u> </u>		0.	12,109
J	25	Contrit	butions, gifts,	grants paid		82,097.						82,097
_	26			rsements Add lines 2	4 and 25	94,206.		0.	 		0.	94,206
	27		ct line 26 fror			297,593.						
				penses and disbursem		491,093.	1:	6,134.	1			
				ome (if negative, ei				, , , , , , , ,	}		-0-	
	С	Adjust	tea net incom	e (if negative, ente	ı - ∪-)	L						

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9E1410 2 0000 IM9008 2YL4 9/8/2010 1:06:05 PM V 09-7.3

E	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
_	art II		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing			
	2		cash investments	127,901.	364,139	. 364,139.
	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4					
		Less allowance for dou	btful accounts ▶			
	5		<i>.</i>			
	6		officers, directors, trustees, and other			
			ach schedule) (see page 16 of the instructions)			
	7	• •	receivable (attach schedule)			
	·		ibtful accounts			
	8		se , , , , ,			
Assets	9		leferred charges			
SS	_		te government obligations (attach schedule)			
٩			e stock (attach schedule) ATCH 3	1,644,731.	2,251,716	2,251,716.
		· · · · · · · · · · · · · · · · · · ·			-, ,	
	11	Investments - corporate	e bonds (attach schedule)s,			
		and equipment basis Less accumulated deprecia				
		(attach schedule)				
	12		loans			
	13	Land, buildings, and	ach schedule)			
	• •	equipment basis	2tion b			
		(attach schedule)	ation			<u> </u>
	15	Other assets (describe	- ,			
	16	•	npleted by all filers - see the	1 770 620	2 (15 055	2 615 055
_			page 1, item I)	1,772,632.	2,615,855	2,615,855.
	17	Accounts payable and a	accrued expenses			
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20		ors, trustees, and other disqualified persons			_
iab	21	Mortgages and other no	otes payable (attach schedule)			
٦	22	Other liabilities (describe	e ▶)			
_	23		es 17 through 22)			
		Foundations that fol	llow SFAS 117, check here $\blacktriangleright X$			
		and complete lines	24 through 26 and lines 30 and 31.			
es	24	Unrestricted		1,772,632.	2,615,855	
auc	24 25 26					
3al	26					
Þ			not follow SFAS 117,			
F			pplete lines 27 through 31.			
<u>-</u>	27		cipal, or current funds			
ts	28		or land, bldg, and equipment fund			
se	29		ulated income, endowment, or other funds			
Net Assets	30		d balances (see page 17 of the			
det				1,772,632.	2,615,855	
_	31		t assets/fund balances (see page 17			
	• •		· · · · · · · · · · · · · · · · · · ·	1,772,632.	2,615,855	
F	art	Analysis of Ch	anges in Net Assets or Fund I			
			alances at beginning of year - Part II,		t agree with	
ı						1,772,632.
•		-	d on prior year's return)			297,593.
2	EUIG	er amount from Part I,	line 27a	MENT A		545,630.
						2,615,855.
_	_	lines 1, 2, and 3			l _	2,013,033.
5	nec	reases not included in	line 2 (itemize) ▶ alances at end of year (line 4 minus l	loo EV. Don II. and the control of the	5	2,615,855.
6	iota	ii net assets or fund ba	alances at end of year (line 4 minus l	iiie 5) - Paπ II, column (b), line 30 6	2,013,033

	and Losses for Tax on Inve		(b) How	(c) Date	<u> </u>
	I describe the kind(s) of property sold (e rick warehouse, or common stock, 200 s		acquired P-Purchase D-Donation	acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE			D D G (72,10,7)		
b					
C		· · · · · · · · · · · · · · · · · · ·			
<u>d</u>					_
<u>e</u>				J	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а					
b					
C					
d					
Complete only for assets st	nowing gain in column (h) and own	ed by the foundation on 12/31/69		0	
	(i) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
2					
b					
c ·					
d					· · · · · · · · · · · · · · · · · · ·
е					
	(If	gain, also enter in Part I, line 7			
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		78,749.
3 Net short-term capital gain	or (loss) as defined in sections 12	22(5) and (6)			
If gain, also enter in Part I,	line 8, column (c) (see pages 13 a	and 17 of the instructions)			
If (loss), enter -0- in Part I, I	ıne 8	<u> </u>	3		
	nder Section 4940(e) for Reduce private foundations subject to the				
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase pero	d? [Yes X No
	ount in each column for each year,		efore mak	ung anv entries	
(a)	(b)	(c)	1	(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution r (col (b) divided by	
2008	127,350.	1,855,288.			0.068642
2007	157,774.	964,014.			0.163664
2006	122,319.	1,558,731.			0.078473
2005	124,666.	1,247,185.			0.099958
2004	68,517.	1,222,552.	ļ <u>, , , , , , , , , , , , , , , , , , ,</u>		0.056044
	•				
2 Total of line 1, column (d)			2		0.466781
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if less	than 5 years	3		0.093356
		Dad V. Iraa S		2	230,565.
4 Enter the net value of non	charitable-use assets for 2009 fro	m Part X, line 5	4		230,303.
e Multiply lime 4 by line 2			5		208,237.
5 Multiply line 4 by line 3			3		200,237.
6 Enter 19/ of not investme	nt income (1% of Part I, line 27b)		6		1,361.
6 Enter 1% of net investmen	in income (170 or Fait I, IIIe 270),		 		
7 Add lines 5 and 6			7		209,598.
, Add iines o and O			 		
8 Enter qualifying distribution	ns from Part XII, line 4		8		94,206.
If line 8 is equal to or gre Part VI instructions on pag	eater than line 7, check the box in the 18	n Part VI, line 1b, and complete t	that part	using a 1% ta	x rate See th

Par	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,7	23.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		2,1	23.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		2,1	23.
6	Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,200.			
	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
d	Backup withholding erroneously withheld		1 0	
7	Total credits and payments Add lines 6a through 6d		1,2	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		3 C	2.2
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,5	23.
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 ▶ 0 · Refunded ▶ 11			
	t VII-A Statements Regarding Activities		1	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X
	participate or intervene in any political campaign?	1 a_		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	4.5		Х
	of the instructions for definition)?	1 b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	ļ		
	published or distributed by the foundation in connection with the activities	4.		Х
	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation managers (3)			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е				
	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
2	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		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
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	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ▶ ^{CO} ,			
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	8 b	X	<u> </u>
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 on page			U
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

. 4b X

4 a

Χ

2b

3a Did the foundation hold more than a 2% direct or indirect interest in any business

Pa	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)				
-	During the year did the foundation pay or incur any amou	int to						
	(1) Carry on propaganda, or otherwise attempt to influe		1 4945(e))?	Yes X	No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?		•	Yes X	No			
	(3) Provide a grant to an individual for travel, study, or ot				No			
	(4) Provide a grant to an organization other than a char							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?			Yes X	No I			
	(5) Provide for any purpose other than religious, charita							
	purposes, or for the prevention of cruelty to children of	•		Yes X	No			
	If any answer is "Yes" to 5a(1)-(5), did any of the trans			. —				
D	Regulations section 53 4945 or in a current notice regard				5b			
	Organizations relying on a current notice regarding disas	-	· · ·		35			
	•							
С	If the answer is "Yes" to question 5a(4), does the foundation			Yes I	No			
	because it maintained expenditure responsibility for the g			res r	10			
	If "Yes," attach the statement required by Regulations sec	• •			!			
6 a	Did the foundation, during the year, receive any funds, or	•	* * *	Yes X	.			
_	on a personal benefit contract?				I .	x		
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contrac	^{:17}	6b			
	If "Yes" to 6b, file Form 8870		_					
	At any time during the tax year, was the foundation a pa					V		
	If yes, did the foundation receive any proceeds or have					X		
Pai	t VIII Information About Officers, Directors and Contractors	i, irustees, Foun	dation Managers,	Highly Paid Emp	pioyees,			
1	List all officers, directors, trustees, foundation m	anagers and their		page 22 of the ins	tructions).			
	() No. 10. 11. 11. 11. 11. 11. 11. 11. 11. 11	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e account.		
	(a) Name and address	hours per week	(If not paid, enter	employee benefit plans	other all			
	(a) Name and address		(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all			
		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
ĀT	· ,	hours per week	(If not paid, enter		other all			
 AT		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
ĀT		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
AT		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
<u>AT</u>		hours per week	(If not paid, enter -0-)	and deferred compensation	other all	owances		
 	TACHMENT 5	hours per week devoted to position	(If not paid, enter	and deferred compensation O	other all	owances		
	TACHMENT 5	hours per week devoted to position	(If not paid, enter	and deferred compensation O	other all	owances		
	TACHMENT 5	hours per week devoted to position	(If not paid, enter	e page 23 of the in	structions).	0		
	TACHMENT 5	her than those inc	(If not paid, enter	e page 23 of the in	other all	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE."	hours per week devoted to position her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		
	TACHMENT 5 Compensation of five highest-paid employees (ot If none, enter "NONE." Name and address of each employee paid more than \$50,000	her than those inc	(If not paid, enter 0-) 0.	e page 23 of the in (d) Contributions to employee benefit plans and deferred	structions).	e account,		

Part VIII	and Contractors (continued)	yees,
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	lation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ins and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		· · · · · ·
2		
3		
·		
		<u>,</u>
4		
Dart IV D	Summary of Program-Related Investments (see page 23 of the instructions)	 -
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		·
2		
All other pro	ram-related investments. See page 24 of the instructions	
3 NONE		
Total. Add I	nes 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions.)	ign foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		-
	purposes		
а	Average monthly fair market value of securities	1a	1,943,466.
b	Average of monthly cash balances	1b	321,067.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1 d	2,264,533.
е			
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,264,533.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		- :
	of the instructions)	4	33,968.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,230,565.
6	Minimum investment return. Enter 5% of line 5	6	111,528.
	To and do not complete this foundations and certain foreign organizations check here ▶ and do not complete this)
1	Minimum investment return from Part X. line 6	1	111,528.
2a	2 722		·
b	Income tax for 2009 (This does not include the tax from Part VI) 2b	7	
c		ן 2c	2,723.
3	Add lines 2a and 2b	3	108,805.
4	Recoveries of amounts treated as qualifying distributions		
5		1 - 1	108,805.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	108,805.
Pa	Irt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	94,206.
b			0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_		2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		94,206.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	·	
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	·	94,206.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	whether the	
	qualifies for the section 4940(e) reduction of tax in those years		···

Ρa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•			· · · · · · · · · · · · · · · · · · ·		108,805.
2	Undistributed income, if any, as of the end of 2009				<u> </u>
_	Enter amount for 2008 only				
d L	Total for pnor years 20 07 20 06 20 05				
3	Excess distributions carryover, if any, to 2009			· -	
	From 2004				
h					
	73 174				
d	From 2006				
	From 2008				
•	Total of lines 3a through e	268,182.			
4	Qualifying distributions for 2009 from Part XII,				
•	line 4 ▶ \$ 94,206.				1
а	Applied to 2008, but not more than line 2a				
	•				
O	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				<u> </u>
	Treated as distributions out of corpus (Election				
C	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				94,206.
	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	14,599.			14,599.
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	253,583.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				-
С	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				<u>"</u>
d	Subtract line 6c from line 6b Taxable				
_	amount - see page 27 of the instructions				<u> </u>
0	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
•	applied on line 5 or line 7 (see page 27 of the				
•	Instructions)	-			
9	Subtract lines 7 and 8 from line 6a	253,583.			
10	Analysis of line 9	<u> </u>			
	Excess from 2005				
b	73 174				
c	11/ 375				
d	35 634				
	Excess from 2009				

Forn	n 990-PF, (2009)			84-1	461847	Page 10
Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	ating	
	foundation, and the ruling				5	
b	Check box to indicate wh)(3) or 4942(j)(5)
_		Tax year	Final operating real	Prior 3 years		1 10120,007
2 a	Enter the lesser of the ad-		(b) 2000	1	(4) 2000	(e) Total
	justed net income from Part I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	return from Part X for each					
	year listed					
b	85% of line 2a					
С	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					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c					
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)		·			
р	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents					
	payments on secunties					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(III)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income	lufa (C		anti if the found	ation had \$5 000	
Pa					ation had \$5,000	or more in assets
_		luring the year - sec	· ·	structions.)		
1	Information Regarding			- 4b 20/ -6 4b- 4-4-		
а	List any managers of before the close of any	the foundation who h	iave contributed more	e than 2% of the tota	ar contributions receiv see section 507(d)(2))	ed by the foundation
	•	tax year (but only if the	icy have contributed i	1101¢ (11a11 \$5,000) (0	cc 3000011 307 (d)(2))	
	NONE		. <u> </u>			
ь	List any managers of	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equally	large portion of the
	ownership of a partner	ship or other entity) of	f which the foundation	n has a 10% or greater	rinterest	
	NONE					
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:		
	Check here ► X If t	he foundation only r	makes contributions	to preselected charu	table organizations a	nd does not accept
	unsolicited requests f					
	organizations under ot					,
_					a addressed	
а	The name, address, a	na telephone number	of the person to who	ii applications should b	e addressed	
	The face of the back and	Landa and the said			ماسيام سيام مام	
b	The form in which app	lications should be sul	omitted and information	on and materials they	snoula incluae	
						
С	Any submission deadli	nes				
			<u> </u>			
d	Any restrictions or li	mitations on awards,	such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other
	factors					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Show any relationship to any foundation manager or substantial contributor And Paid during the year ATTACHMENT 6	mount
Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor a Paid during the year If recipient is an individual, show any relationship to any foundation manager or substantial contributor or substantial contribution And substantial contributor or substantial contribution or substantial contributor or substantial c	nount
a Paid during the year	nount
a Paid during the year	
ATTACHMENT 6	
·	
Total	82,097.
b Approved for future payment	
Total	

Part XVI-A Analysis of Income-Produ	icing Activ	<u>vities </u>			
Enter gross amounts unless otherwise indicated	Unrel (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code		Exclusion code		(See page 28 of the instructions)
a			_		
b			_ 		
c					
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	57,385.	
5 Net rental income or (loss) from real estate					
			1		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property			+		
7 Other investment income			1.0	70 740	
$\boldsymbol{8}$ $$ Gain or (loss) from sales of assets other than inventory			18	78,749.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b					·=· · · ·
с					·
d					•
8 (b) (d) and (c)				136,134.	
12 Subtotal Add columns (b), (d), and (e)					136,134
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28					
Part XVI-B Relationship of Activities	to the Ac	complishment of Ex	xempt Purp	oses	
Line No. Explain below how each activ					
the accomplishment of the fo	oundation's	exempt purposes (d	other than t	by providing funds for	such purposes) (Se
page 29 of the instructions)					
			_		
			-		
		=		· · · · · · · · · · · · · · · · · · ·	·
		-,			<u></u> -
					
		· · · · · · · · · · · · · · · · · · ·			
		NOT APPLICABI	LE		
1					
					· · · · · · · · · · · · · · · · · · ·

Pa	rt XVI	Information Exempt Orga		ransfers To and	Fransaction	s and Relationships With I	Noncha	aritable
1	ın se	ction 501(c) of the C	ode (other than	section 501(c)(3) orga	inizations) or in	any other organization described section 527, relating to political	Y	es No
а	organi Trans	izations? fers from the reporting f	oundation to a ni	oncharitable exempt organi	zation of			
							1a(1)	X
								X
b		transactions						
	(1) S	ales of assets to a nonch	naritable exempt o	organization			1b(1)	X
	(2) P	urchases of assets from	a noncharitable e	exempt organization			1b(2)	X
	(3) R	ental of facilities, equipm	ent, or other asse	ets			1b(3)	X
							, ,	X
								X
							1 1	$\frac{x}{x}$
С							1c	
d						e Column (b) should always show		
		•			=	on If the foundation received less		
	value	in any transaction of	snaring arran	gement, snow in colum	in (a) the valu	ue of the goods, other assets, or	services	received
(a) i	ine no	(b) Amount involved	(c) Name of	noncharitable exempt organiza	ation (d) C	Description of transfers, transactions, and sha	ring arrange	ements
		N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	N/P			
								
							-	
				·				
				· ·				
						• • •		
								
	1- 41		disable office	that with an related to				
2 a				ned with, or related to, a 501(c)(3)) or in section 527		ix-exempt organizations described in	Yes	X
.		s," complete the following		30 1(C)(3)) of its section 32.	······		'\&	
	11 16	(a) Name of organization		(b) Type of organ	ıızatıon	(c) Description of relation	ship	
	Under	penalties of perjury, I decl	are that have ex	amined this return, including	accompanying so	chedules and statements, and to the best of based on all information of which prepare	of my know	wiedge and
	Deller,	in is true, correct, and com	picto reciaration		رور المال المال المال المال المال]	omouge
	_	MY11/	1-1.	Pres	17/	13/10 Presider	<u> </u>	
e l	S	ignature of officer or trustee			Date	Title		
Ĭ		1	1 . 1		Date	Check if Preparer's		
Sign Here	Paid Preparer's Use Only	Preparer's signature	JAW 1		9-8-10	self-employed page 30 of P00843	the instruct	
	Paid Preparer' Use Only	Firm's name (or yours	HEANT			EIN ▶ 26-1276	709	
	دے	self-employed), address	. 1580 I	E. CHEYENNE MTN	. BLVD.	1		

Phone no 719-540-6063

80906

and ZIP code

COLORADO SPRINGS,

CO

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

Employer identification number

Name of the organization		Employer identification number
THE MONIKER FOUNDA	TION	84-1461847
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private trust not trust not treated as a private trust not	vate 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	
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, some contributor. Complete Parts Land II	\$5,000 or more (in money or
Special Rules		
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 331/3% sup) and 170(b)(1)(A)(vi), and received from any one contributor, during to 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990	the year, a contribution of the greater
the year, aggrega	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receive ate contributions of more than \$1,000 for use exclusively for religious, coses, or the prevention of cruelty to children or animals. Complete Part	charitable, scientific, literary, or
the year, contribution aggregate to more year for an exclusion applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receive itions for use <i>exclusively</i> for religious, charitable, etc., purposes, but there than \$1,000. If this box is checked, enter here the total contributions sively religious, charitable, etc., purpose. Do not complete any of the paganization because it received nonexclusively religious, charitable, etc.	ese contributions did not s that were received during the arts unless the General Rule , contributions of \$5,000 or more
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does noust answer "No" on Part IV, line 2 of its Form 990, or check the box of the certify that it does not meet the filing requirements of Schedule	on line H of its Form 990-EZ,
For Privacy Act and Paperwork R	eduction Act Notice, see the Instructions	chedule B (Form 990, 990-EZ, or 990-PF) (2009)

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

__ of Part I Page_ _ of __

Name of organization

THE MONIKER FOUNDATION

Employer identification number 84-1461847

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BLANCHE W. SINTON 3085 ELECTRA DRIVE COLORADO SPRINGS, CO 80906	\$\$	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
2	FRANK J. SINTON P.O. BOX 2705 DURANGO, CO 81302	\$9,796.	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
3	LINDA S. HAMMOND 2105 HERCULES DRIVE COLORADO SPRINGS, CO 80906	\$9,301.	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
4	MARGIE SINTON P.O. BOX 1743 SILVERTHORNE, CO 80498	\$24,465.	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
5	MARI SINTON-MARTINEZ 6335 WILSON ROAD COLORADO SPRINGS, CO 80909	\$9,537.	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)

Page of of Part II

Name of organization THE MONIKER FOUNDATION

Employer identification number 84-1461847

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
1	4,200 SHARES OF ILLINOIS TOOL WORKS	\$\$	10/23/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	200 SHARES OF ILLINOIS TOOL WORKS	\$\$.	04/19/2010
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	200 SHARES OF ILLINOIS TOOL WORKS	\$\$,301.	11/03/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	500 SHARES ILLINOIS TOOL WORKS	\$\$	11/12/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	200 SHARES OF ILLINOIS TOOL WORKS	\$9,537.	12/22/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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FEES
ACCOUNTING
1
PART I -
Н

CHARITABLE PURPOSES	1,050.	1,050.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	1,050.	1,050.
		TOTALS
DESCRIPTION	ACCOUNTING SERVICES	

EXPENSES
OTHER
י
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PART
990PF, PAR

	AND
	EXPENSES
RIPTION	PER BOOKS
POSTAGE	102.
SECRETARIAL	4,500.
FEES	10.
OFFICE SUPPLIES	174.
TELEPHONE EXPENSE	633.
RENT	5,640.

1,059.

TOTALS

ATTACHMENT 2

- CORPORATE STOCK

PART II

FORM 990PF,

ENDING <u>FMV</u>	2,251,716.	2,251,716.
ENDING 'BOOK VALUE	2,251,716.	2,251,716.
BEGINNING BOOK VALUE	1,644,731.	1,644,731.
		TOTALS
DESCRIPTION	ITW STOCK	

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAIN ON SECURITIES

545,630.

TOTAL

545,630.

EXPENSE ACCT

. CONTRIBUTIONS

PART VIII

FORM 990PF,

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT

PAGE 23

AND OTHER ALLOWANCES	0	0.			
TO EMPLOYEE BENEFIT PLANS	.0	0			
COMPENSATION	0.	0.			
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	GRAND TOTALS			
NAME AND ADDRESS	LINDA S. HAMMOND 1308 W. COLORADO AVENUE	COFORATO SERINGS, CO 60304			

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNIVERSITY OF COLORADO BOULDER, CO		SCHOLARSHIP	12,000
COLORADO STATE UNIVERSITY FORT COLLINS, CO		SCHOLARSHIP	7,500
FORT LEWIS COLLEGE DURANGO, CO		SCHOLARSHIP	8,000
COLORADO SCHOOL OF MINES GOLDEN, CO		SCHOLARSHIP	5,000
CEDARVILLE UNIVERSITY CEDARVILLE, OH		SCHOLARSHIP	1,500
DENVER UNIVERSITY DENVER, CO		SCHOLARSHIP	1,000

ATTACHMENT 6 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	•	
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CREIGHTON UNIVERSITY OMAHA, NE		SCHOLARSHIP	2,500
UNIVERSITY OF COLORADO, COLORADO SPRINGS COLORADO SPRINGS, CO		SCHOLARSHIP	5,500
ST CLOUD UNIVERSITY		SCHOLARSHIP	3,000
WESTERN STATE COLLEGE GUNNISON, CO		SCHOLARSHIP	1,000
COLORADO MOUNTAIN COLLEGE BRECKENRIDGE, CO		SCHOLARSHIP	5,500
FORT LEWIS COLLEGE FOUNDATION DURANGO, CO		CHARITABLE	2,500

V 09-7 3

ATTACHMENT 6 (CONT'D)

CONTRIBUTOR	
SUBSTANTIAL	AND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTO	

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SAN JUAN COLLEGE FARMINGTON, NM		SCHOLARSHIP	1,347
REDSTONE COLLEGE BROOMFIELD, CO		SCHOLARSHIP	2,000
UNIVERSITY OF TULSA TULSA, OK		SCHOLARSHIP	2,000
COLORADO COLLEGE COLORADO SPRINGS, CO		SCHOLARSHIP	2,000
COLORADO SPRINGS, CO		CHARITABLE	5,000
SAFE PASSAGE COLORADO SPRINGS, CO		CHARITABLE	250

84-1461847

IM9008 2YL4 9/8/2010

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

			ATTACHMENT 6 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SUMMIT PUBLIC RADIO BREAKENRIDGE, CO		CHARITABLE	5,000
PIKES PEAK EDUCATIONAL FOUNDATION COLORADO SPRINGS, CO		CHARITABLE	1,000.

2,500

SCHOLARSHIP

3,000

SCHOLARSHIP

SCHOLARSHIP

UNIVERSITY OF PUGET SOUND TACOMA, WA

METRO STATE COLLEGE

DENVER, CO

MESA STATE COLLEGE GRAND JUNCTION, CO 3,000

82,097	
TOTAL CONTRIBUTIONS PAID	

GCHFDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

T	HE MONIKER FOUNDATION				84-14618		
	: Form 5227 filers need to complete only F		Hold One Ve	25 05 1 000			
Par	(a) Description of property	(b) Date acquired	(c) Date sold		(e) Cost or other		(f) Gain or (loss) for
	(Example 100 shares 7% preferred of "Z" Co)	(mo , day, yr)	(mo , day, yr)	(d) Sales price	(see page 4 of instructions)		the entire year Subtract (e) from (d)
1a							
				<u>-</u>	_		
						\longrightarrow	
						İ	
			<u> </u>				
h	Enter the short-term gain or (loss), if any	from Schedule D	-1. kne 1b			1b	95,979.
	Enter the orient term games (1999), in any	, 20 2	.,				
2	Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partne	rshins Sicornora	tions, and other	estates or triets		3	
4	Short-term capital loss carryover Enter t						
	Carryover Worksheet					4	()
5	Net short-term gain or (loss). Combine li					5	95,979.
Par	column (3) on the back	ses - Assets Held	More Than Or	ne Year			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
		_				-	
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6 b	-17,230.
_		0.400 400.4	0050 0704 -	- 1 0004		_	
7	Long-term capital gain or (loss) from For	rms 2439, 4684,	6252, 6781, ar	10 8824		7	<u></u>
8	Net long-term gain or (loss) from partner	ships, S corporat	ions, and other	estates or trusts		8_	
9	Capital gain distributions	• • • • • • • •		• • • • • • • • • • • •		9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter t	he amount, if any	, from line 14 o	of the 2008 Capital Lo	oss		
12	Carryover Worksheet			Enter here and on I		11	
12	column (3) on the back					12	-17,230.
For I	Paperwork Reduction Act Notice, see the Ins					hedul	e D (Form 1041) 2009

Ֆçhe	dule D (Form 1041) 2009			Page 2
Pa	t III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this part	(see page 5)	or trust's	(3) Total
13	Net short-term gain or (loss)			95,979.
14	Net long-term gain or (loss):			
а	Total for year	 		-17,230.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
	28% rate gan			70 740
15		27.0-41111.61	44	78,749.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990 art V, and <mark>do not</mark> complete Part IV If line 15, column (3), is a net loss, complete Part IV			
_	rt IV Capital Loss Limitation			
16		line 4c, if a trust) the sr	naller of	
)
Note	The loss on line 15, column (3) or b \$3,000 or if Form 1041, page 1, lill cover Worksheet on page 7 of the instructions to figure your capital loss carryover	ne 22 (or Form 990-T, li	ne 34), is a loss, comp	olete the Capital Loss
		·		
	Tax Computation Using Maximum Capital Gains Rates	2)		Dark Law Dark II and
	n 1041 filers. Complete this part only if both lines 14a and 15 in column () e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more tha		nount is entered in i	Part I or Part II and
	tion: Skip this part and complete the worksheet on page 8 of the instruction:			
	other line 14b, col (2) or line 14c, col (2) is more than zero, or			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain			
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and er line 14b, col. (2) or line 14c, col. (2) is more than zero.	d complete the work	sneet on page 8 of	the instructions if
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero 18			
19	but not less than zero	 		
13	from Form 1041, line 2b(2) (or enter the qualified			
	dividends included in income in Part I of Form 990-T) . 19			
20	Add lines 18 and 19		1 1	
21	If the estate or trust is filing Form 4952, enter the			
	amount from line 4g, otherwise, enter -0 ▶ 21			
22	Subtract line 21 from line 20 If zero or less, enter -0	22		
23	Subtract line 22 from line 17 If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24?			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box		1 1	
	No. Enter the amount from line 23		 	
26	Subtract line 25 from line 24	26		
27	Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
	Tes. Skip lines 27 thru 30, go to line 31	21		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
20	Enter the amount north line 20 (if line 20 is blank, onto 1-0-)		 -	
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (15)		30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Sch	nedule for Estates ar	nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)			
32	Add lines 30 and 31			
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate Sch			
	(see the Schedule Ginstructions in the instructions for Form 1041)			
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here			
	G, line 1a (or Form 990-T, line 36)	<u> </u>	34	

GCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

2009

Internal Revenue Service

▶ See instructions for Schedule D (Form 1041).

Department of the Treasury ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. Employer identification number Name of estate or trust

84-1461847 THE MONIKER FOUNDATION Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (b) Date (e) Cost or other basis (c) Date sold (f) Gain or (loss) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (see page 4 of the instructions) acquired (mo, day, yr) Subtract (e) from (d) (mo, day, yr) 1a VARIOUS MORGAN STANLEY-SMI TH BARNEY SHORT TERM ASSE VAR 688,145. 592,166. 95,979. VAR

95,979.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
a VARIOUS MORGAN STANLEY-SMI TH BARNEY LONG TERM ASSET		VAR	413,777.	440,017.	-26,240
200 SHS ILLIONIS TOOL WORKS	01/04/1965	VAR	9,016.	6.	9,010
					.
	_				
				_	
	<u></u>				
·					· - · · · · · · · · · · · · · · ·
6b Total. Combine the amounts in colum	n (f) Enter here e	nd on Schadula D	line 6h		-17,230

FORM 990-PF - PART IV

Kind of P	roperty		Des	cription		0 D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
588,145.			RGAN STANLE YPE: SECURI	Y-SMITH BAR TIES	NEY SHOR	P	VAR 95,979.	VAR
13,777.		4	RGAN STANLE YPE: SECURI	Y-SMITH BAR TIES	RNEY LONG	Р	VAR -26,240.	VAR
9,016.			LIONIS TOOL YPE: SECURI			Р	01/04/1965 9,010.	VAR
							<i>3</i> ,010.	
OTAL GAIN(LO	oss)						78,749.	