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Form 990-PF

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

OMB No 1545-0052 200a

Int	ernal R	evenue Sér	vice No	te. The foundati	on may l	be able to use a copy	of th	ns return to sa	tisfy state re	eporting	requ	urements	(4	<u> </u>	J
Fo	or cal	endar y	year 2009, or	tax year begi	nning	(	06/	01 , 2009,	and endir	ng			05	31,	<b>20</b> 10
G	Chè	ck all th	nat apply.	Initial retui	rn	Initial retu	ırn (	of a former p	ublic chari	ty			Final	return	
_				Amended	return	Add	dres	s change		Nam	ne ch	ange			
			Name of found	ation						Α	Empl	oyer identi	fication nu	mber	
ι	Jse th	ie IRS													
	lab	el.	COMPTON F	AMILY FOU	JNDAT]	ION						30	-60259	66	
•	Other		Number and st	reet (or PO box	number if	mail is not delivered to s	treet	address)	Room/sui	te B	Telepho	one number (se	e page 10 of th	e instruction	ns)
	pri														
c	or t	ype. Decific	P.O. BOX	2305								(5	03) 36	3-31	36
		tions.	City or town, st	ate, and ZIP co	de					C	If exe	mption applic	cation is		<b>&gt;</b>
										٦	•	0.	ations, check	here	
			SALEM, OR	97308-23	305					٦			ations meetin		
Н	Che					(c)(3) exempt priva	te fo	oundation			859	% test, check	here and atta	ach	
Γ			947(a)(1) nonex						ion			•			
ī			value of all as			unting method: X				E			n status was		<b>Ů</b>
			m Part II, col. (			ther (specify)				_			(b)(1)(A), chec		
		▶ \$	1,298			column (d) must be	e on	cash basis.)		F			s in a 60-mont (b)(1)(B), chec		
P			sis of Revenue				П		1	<u> </u>	dildoi	Section con		sbursen	
		total o	f amounts ın col	umns (b), (c), ar	nd (d)	(a) Revenue and expenses per		(b) Net inve				ed net	for	charitat	ole
		may no	ot necessarily eq n (a) (see page 1	ual the amount 1 of the instruc	s in tions) )	books		incom	ie	ı	incon	ne		ourposes	
	1		ons, gifts, grants, etc			402,89	35		+		_		tcasn	basis o	энгу)
	2	Check	If the four	ndation is not req	uired to	±02,03	٠٠.						+		
	3		on savings and temporary cash investments			5,50	<del>, ,  </del>		5,500.			5,500	+		TMT :
	_		_	•		23,45	$\overline{}$		3,456.			3,300			TMT :
	4		ds and interest f			23,40	<del>''</del>		3,430.			3,430	+		IMI .
			ents			<del></del>	$\dashv$						+		<del></del>
			tal income or (loss)  n or (loss) from sale of assets not on line 10			2,75	5						<del> </del>		<del></del>
Revenue	b	Gross sa	les price for all	or assets not on	552	2,13	<del>, o .</del>						+		
ven							$\dashv$		2,756.	_			<del> </del>		<del></del>
Ř		-	gain net income		•				2,750.		├-	<del>-RE</del>	<del>CEIVI</del>	ED-	
	8		rt-term capital g modifications				$\dashv$				1-1		+	<del></del>	18
	9 10 a	Gross sa	les less returns				-	· · · · ·		• • •	2	SEF	172	2010	8
	_		vances					<del> </del>			0	. 351	+1.4.4	1010	18
			st of goods sold . rofit or (loss) (at			<del></del>			-				+		<u>   22   </u>
			ncome (attach s				-				1	OG	DEN,	<del>UT</del>	_
			dd lines 1 throu				17	₹	1,712.		<del></del>	8,956	<del></del>	<u> </u>	
_	13		sation of officers, o				<del></del>		1,112.			0,750	+		
			mployee salaries						NONE			NON	<del></del>		
es			i plans, employe				$\dashv$		NONE			NON			
ns(	15 16 a		es (attach sched				$\dashv$	_	110111			11011	7		
Expenses	LON		ting fees (attach			<u> </u>		-					+		
ָ נונ			rofessional fees				$\dashv$						+		
ive	17	•		-				_					+		
Irai	ĺ		tach schedule) (se			68	15						<del> </del>		
nis	18			· •		- 00	٠, ٠,						+		
E	19		ation (attach sci		-			<del></del>					+		
Ä	20		ncy				-+		NONE			NON	<del>. </del>		
and Administrative	21		conferences, and				-+		NONE				<del></del>		<u></u> .
g	22	_	and publication				$\dashv$	<del></del>	MOND			NON	1		
ţ	23		xpenses (attach										+		
Operating	24		perating and ad			68	, _		NONE			NIONI			
ဝ	2-		es 13 through 2			38,75			NONE			NON	<del></del>	<del></del>	0 75
	25		utions, gifts, gra	•					MONTE			NICATI	<del>                                       </del>		8,750
-	26		enses and disbursen		4 and 25	39,43	. د		NONE			NON	<del></del>		8,750
Operating and Ad	27		t line 26 from lii			205 17	,,								
,			revenue over expen			395,17	4.		1 710				+		
į			estment income	•	-		-+	3	1,712.			0 056	+		
	C	Aujuste	d net income (i	i negative, ente	1-0-)	İ	- 1					8,956	•1		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form 990-PF (2009) S

Part II Ralance		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of year			
		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash + non-interest-bearing					
		Savings and temporary cash investments	4,987.	62,726.	62,726.		
	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 (attach schedule) (see page 16 of the instructions)					
-	7	Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts ►NONE					
	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ass	10 a	Investments - U S and state government obligations (attach schedule)					
_		Investments - corporate stock (attach schedule)					
		Investments - corporate bonds (attach schedule)					
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation					
	12	(attach schedule)					
	13	Investments - mortgage loans Investments - other (attach schedule) STMT_4		1,314,181.	1,235,468.		
	14	Land, buildings, and		1/311/101.	1/235/100		
		equipment basis Less accumulated depreciation (attach schedule)					
	15	(attach schedule) Other assets (describe					
	16	Total assets (to be completed by all filers - see the					
	10	Instructions Also, see page 1, item I)	981,735.	1,376,907.	1,298,194.		
_	17	Accounts payable and accrued expenses		1737073073	1/230/131		
	18	Grants payable					
ω.	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	F				
Ρij	21	Mortgages and other notes payable (attach schedule)					
Lia	22	Other liabilities (describe					
		Other Habilities (describe >					
	23	Total liabilities (add lines 17 through 22)					
_		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
Š	24	Unrestricted	1				
lances	25	Temporarily restricted	i i				
ala		Permanently restricted					
80	26	Foundations that do not follow SFAS 117,					
Ē		check here and complete lines 27 through 31. ► X					
7	27	Capital stock, trust principal, or current funds					
		Paid-in or capital surplus, or land, bldg , and equipment fund					
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	981,735.	1,376,907.			
As	30	Total net assets or fund balances (see page 17 of the					
let	"	instructions)	981,735.	1,376,907.			
_	31	Total liabilities and net assets/fund balances (see page 17					
	•	of the instructions)	981,735.	1,376,907.			
Р	art I	Analysis of Changes in Net Assets or Fund			<del>,,,</del>		
		I net assets or fund balances at beginning of year - Part II,		agree with			
•		of-year figure reported on prior year's return)			981,735.		
2		er amount from Part I, line 27a			395,172.		
				1 - 1			
		lines 1, 2, and 3			1,376,907.		
				5			
6	Tota	Il net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b)		1,376,907.		
×		access or raine enterior as one or your fine a minde	2,		Form <b>990-PF</b> (2009)		

Pa	(a) List and	d describe the kind(s) of property sold (s	e g , real estate,	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr )
1-	2-story bi SEE PART IV DETA	rick warehouse, or common stock, 200	sns MLC Co )	D-Donation	(IIIO , Gay, yr.)	
<u>1a</u>	SEE PART IV DETA	7.1.0	<del></del>		<del></del>	
p						
c d	<del></del>		· · · · · · · · · · · · · · · · · · ·			
e						
Ť		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	oss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) min	
а						
b						
C						
d						
е						
Co	omplete only for assets sho	owing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col (h) g	
(i) F.M.V. as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any					(k), but not less Losses (from co	
<u>a</u>	··					
b						
C						
<u>d</u>						
<u>e</u>	12.2	. 16	ania alaa antar in Bart I lina 7			
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		2,756.
3	Net short-term capital gain	or (loss) as defined in sections 122				2,750.
		line 8, column (c) (see pages 13 ar				
		line 8		3		
Pa	It V Qualification Un	der Section 4940(e) for Reduc	ed Tax on Net Investment Inc	ome		
Wa		the section 4942 tax on the distrib not qualify under section 4940(e). I		ase perio	d?	Yes X No
		ount in each column for each year;		fore mak	ing any entries	
<u> </u>	(a)	(b)	(c)		(d)	
C	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution r (col (b) divided by	
	2008	29,136.	765,736.			804966725
	2007	11,250.	643,672.			747784586
_	2006	9,500.	391,395.	ļ <u></u>		427215473
	2005	1,500.	31,411.	<u> </u>		775397154
	2004		12,029.	<del>                                     </del>	0.01	<u> 246986449</u>
_					0 14	000250207
	Total of line 1, column (d	for the 5-year base period - divide	the total on line 2 by E. or by the	2	0.14	002350387
3	The state of the s			3	0 02	800470077
	number of years the found	dation has been in existence if less	than 5 years		0.02	000470077
4	Enter the net value of nor	ncharitable-use assets for 2009 from	m Part X, line 5	4		1,161,016
5	Multiply line 4 by line 3			5		32,514.
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		317
7				7		32,831
0	If line 8 is equal to or gr Part VI instructions on page	ons from Part XII, line 4 reater than line 7, check the box ige 18.	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Pari	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne ins	tructio	ns)
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		3	17.
	here X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		3	<del>17.</del>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		N	ONE
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-		3	17.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009			
b	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		3	<u>50.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>33.</u>
	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 33 . Refunded ▶ 11			
	t VII-A Statements Regarding Activities	<del></del>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			v
	of the instructions for definition)?	1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		Ì	
	published or distributed by the foundation in connection with the activities		İ	v
С.	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation >\$(2) On foundation managers >\$	. 1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	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
<b>1</b> 2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
h	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ı İ		
•	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	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) > STMT 5			
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 <sup>2</sup> If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ı Ţ	Ţ	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		<u> X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	X	

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?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . .

X

X

NONE

NONE

Total number of other employees paid over \$50,000

NONE

NONE

and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
NONE	NONE
	-
	,
Total number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Table Add have 1 through 2	
Total. Add lines 1 through 3	<u> </u>

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Page 7

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes:		
а	Average monthly fair market value of securities	1a	1,103,957.
b		1b	74,739.
C		1c	NONE
d		1d	1,178,696.
е	Reduction claimed for blockage or other factors reported on lines 1a and		- 1
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	1,178,696.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
		4	17,680.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,161,016.
6	Minimum investment return. Enter 5% of line 5	6	58,051.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here   ☐ and do not complete this privations.	te operating part.)	
1	Minimum investment return from Part X, line 6	1	58,051.
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	317.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	57,734.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	57,734.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	57,734.
	art XII Qualifying Distributions (see page 25 of the instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	•	20 750
a		1a	38,750.
b	· · · · · · · · · · · · · · · · · · ·	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а		3a	NONE_
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	38,750.
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	317.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,433.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years.	hether the fou	ndation

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Pai	t XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				57,734.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			37,831.	
	Total for prior years 20_07_,20,20		NONE		
3	Excess distributions carryover, if any, to 2009:				
а	From 2004 NONE				
b	From 2005 NONE				
c	From 2006 NONE				
d	From 2007 NONE				
e	From 2008 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$38,750.				
8	Applied to 2008, but not more than line 2a			37,831.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)		NONE		
c	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)	NONE			
d	Applied to 2009 distributable amount				919.
	Remaining amount distributed out of corpus	NONE	<del></del>	-	NONE
5	Excess distributions carryover applied to 2009 .  (If an amount appears in column (d), the same	NONE	· · · · · · · · · · · · · · · · · · ·		NONE
	amount must be shown in column (a) )			İ	
6	Enter the net total of each column as indicated below:				
		NONE			
8	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b	Prior years' undistributed income Subtract line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed		1,01,12		<del></del>
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has been previously assessed		NONE		
ч	Subtract line 6c from line 6b Taxable	-			
u	amount - see page 27 of the instructions		NONE		
e	Undistributed income for 2008 Subtract line				
	4a from line 2a. Taxable amount - see page 27 of the instructions				
	Undistributed income for 2009 Subtract lines				
'	4d and 5 from line 1. This amount must be				
_	distributed in 2010				56,815.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	NONE			
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the	370377			
	instructions)	NONE NONE			
9	Excess distributions carryover to 2010.	NONE			
4.5	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9 Excess from 2005 NONE				
a	Excess from 2005 NONE Excess from 2006 NONE				
b	3703777				
	Excess from 2007 NONE Excess from 2008 NONE				
	Excess from 2009 NONE				
<u> </u>	THOME				Form 990-PF (2009)

Pa	rt XIV Private Oper	ating Foundations	(see page 27 of the	instructions and Pa	ert VII-A, question 9)	NOT APPLICABLE			
	If the foundation has								
	foundation, and the ruling	g is effective for 2009, en	ter the date of the ruling	1	<b>"</b> ▶				
b		whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
	•	Tax year Prior 3 years							
2 a		(a) 2009	(b) 2008		(4) 2006	(e) Total			
	justed net income from Part  I or the minimum investment		(b) 2008	(c) 2007	(d) 2006				
	return from Part X for each					•			
	year listed					<del></del>			
b	85% of line 2a			<del>                                     </del>		<u> </u>			
C	Qualifying distributions from Part								
	XII, line 4 for each year listed .								
d	Amounts included in line 2c not used directly for active conduct of exempt activities								
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line								
3	2d from line 2c								
а	"Assets" alternative test - enter								
	(1) Value of all assets (2) Value of assets qualifying under section								
b	4942(j)(3)(B)(i) "Endowment" alternative test-								
	enter 2/3 of minimum invest- ment return shown in Part X,								
С	"Support" alternative test - enter								
	(1) Total support other than								
	gross investment income (interest, dividends, rents,								
	payments on securities	:							
	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)				1				
	(3) Largest amount of sup- port from an exempt								
	organization (4) Gross investment income								
Pa		ary Information (C	omplete this part	only if the found	ation had \$5.000	or more in assets			
		during the year - see			,,,,,,,,				
1	Information Regarding	Foundation Manager	rs:		<del> </del>	<del></del>			
a	List any managers of before the close of any					ed by the foundation			
	N/A	<del></del>				<del> </del>			
b	List any managers of ownership of a partner					large portion of the			
	N/A								
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:					
	Check here ▶ if t	he foundation only i	makes contributions	to preselected chari	itable organizations a	nd does not accept			
	unsolicited requests forganizations under ot				e 28 of the instruction	ins) to individuals or			
а	The name, address, an SEE STATEMENT	,	f the person to whom	applications should b	oe addressed <sup>.</sup>				
	The form in which app	· · · · · · · · · · · · · · · · · · ·	bmitted and informati	on and materials they	should include:				
.,	SEE ATTACHED S			on and materials tries	S. Outa mondo				
c	Any submission deadli		CNTD O	<del></del>					
	SEE ATTACHED S'	TATEMENT FOR LI	INE Z						
d	Any restrictions or li factors:	mitations on awards,	, such as by geogr	aphical areas, charita	able fields, kınds of	institutions, or other			
	SEE ATTACHED S'	TATEMENT FOR L	INE 2						
JSA						- 222 DE			

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Durin	g the Year or Appro		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 12				
				•
				1
				1
				i
				i
				1
				1
		]		
Total			3a	38,750.
b Approved for future payment				
				i
				r
		ļ		
		1		
		1		
Total			,,,,,,,,,,	

Form 990-PF		oina Activ	vitios			Page 12
Part XVI	amounts unless otherwise indicated.	T	ited business income	Evoluded by	section 512, 513, or 514	(e)
	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
a	T Service Tevende					
. —						
_						
d						
е						<del></del>
f						
-	s and contracts from government agencies					
	rship dues and assessments			114	F F00	
	on savings and temporary cash investments			14	5,500. 23,456.	
	ds and interest from securities				23,430.	
	tal income or (loss) from real estate or-financed property					
	debt-financed property	-				
	al income or (loss) from personal property					_
7 Other in	nvestment income					
8 Gain or (	loss) from sales of assets other than inventory			18	2,756.	
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re	evenue a					
b						·
		ļ				
				-		
e	1 Add columns (b) (d) and (c)			<del> </del>	31,712.	
	If Add columns (b), (d), and (e)		<u> </u>			
	heet in line 13 instructions on page 28 t				· · · · · · · · · · · · · · · · · · ·	
Part XVI				xempt Purp	oses	
Line No.	Explain below how each active the accomplishment of the for page 29 of the instructions.)	ity for whi oundation's	ch income is report exempt purposes	ed in columi (other than	n (e) of Part XVI-A con by providing funds for	tributed importantly to such purposes) (See
		· · · · · · · · · · · · · · · · · · ·				
			<del></del>			<del></del>
						· · · · · · · · · · · · · · · · · · ·
	-					
						<del></del>
				•		
			NOT APPLICAE	BLE		
		···				
	<del> </del>					
	<u> </u>	·				
	<del> </del>					

Form	990-PF (							30-60259					ge 13
Pa	rt XVII	Information F Exempt Orga		Transfers T	o and T	ransa	ctions	and Relat	ionships	With I	Vonc	harit	able
1	ın sec	ne, organization directly stion 501(c) of the Co	de (other than	section 501(	c)(3) orga	nizations	g with ) or in	any other org section 527,	ganization relating to	described political		Yes	No
а	Grgani	zations? ers from the reporting fou	indation to a no	ncharitable exer	mpt organiz	ation of							
	(1) Ca	ısh									1a(1)		X
ь		her assets			• • • • •				• • • • •		1a(2)		X
		eles of assets to a nonchar	ritable exempt o	organization							15(1)		Х
		irchases of assets from a									1b(2)		Х
		ental of facilities, equipme									1b(3)		X
		eimbursement arrangemei									1b(4)		X
		ans or loan guarantees .										·	X
		rformance of services or i											<u>X</u>
		g of facilities, equipment,										<u>.                                    </u>	X
	value	answer to any of the of the goods, other and transaction or	assets, or sen	vices given by	the repo	rting fo	undation	n. If the found	dation rec	eived less	than	fair r	narke
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exe	mpt organiza	tion	( <b>d</b> ) De	escription of transf	ers, transacti	ons, and shar	ıng arra	ngeme	nts
				<del></del>									
			······································										
									•				
							L .						
	section	foundation directly or n 501(c) of the Code (oth ," complete the following	er than section								Y6	es 🔯	No
	<u> </u>	(a) Name of organization		(b) T	ype of organ	ization			(c) Description	on of relation	ship		
					···								
													_
	•								<del> </del>				
_		· · · · · · · · · · · · · · · · · · ·		1									-
	Under belief,	penalties of perjury, I decla it is true, correct, and comp	re that I have ex lete/ Declaration	cammed this return of preparer (other	rn, including r than taxpay	accompa er or fidi					of my ki r has ar	nowled ny knov	ge and wledge
	<b>-</b>	//4	Y W V VY JVV		DIDON.		•	<u>/13/201</u> 0	Truste	ee			
ere	r Si	gnature of officer or trustee	MICHA	шь∽ъ. COM.	PTON	I Date	Date		Title	Preparer's	identify	/IDC	
Sign Here	er's	Preparer's				Date		Check if self-employ	ed ►	number (So page 30 of t	e Signa	ature o	
S	Paid Preparer's Use Only	signature Firm's name (or yours if				L			EIN ▶				
	ڏ ڇَ	self-employed), address,	<b>)</b>		•								

Form **990-PF** (2009)

Phone no

and ZIP code

### 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

Maine of the organization		Employer identification fidinger
COMPTON FAMILY FOU	NDATION	30-6025966
Organization type (check or	ie).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ition
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(instructions.	covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
General Rule		
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	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% support ter and 170(b)(1)(A)(vi), and received from any one contributor, during the year 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, lin	, a contribution of the greater
the year, aggregate	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a e contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitab ses, or the prevention of cruelty to children or animals. Complete Parts I, II, a	le, scientific, literary, or
the year, contribut aggregate to more year for an <i>exclusi</i> applies to this orga	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a ions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these cone than \$1,000. If this box is checked, enter here the total contributions that welly religious, charitable, etc., purpose. Do not complete any of the parts unleading the parts unleading the contribution of the parts unleading the contribution of the parts unleading the contribution of the parts unleading the contribution of the contribution	tributions did not vere received during the ess the <b>General Rule</b> outions of \$5,000 or more
990-EZ, or 990-PF), but it m	ot is not covered by the General Rule and/or the Special Rules does not file S ust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H PF, to certify that it does not meet the filing requirements of Schedule B (For	of its Form 990-EZ,
Ear Privacy Act and Panenwork Res	duction Act Notice see the Instructions Schedule	B (Form 990, 990-F7 or 990-PF) (2009)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page	of	_ of Par
Name of organization	Employer identificat	tion numb	er
CONDUCT FANTA O FORDAMION	1 20 60056		

	rganization DN FAMILY FOUNDATION		Employer identification number 30-6025966
Part 1	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	MARY K COMPTON  1955 SALEM-DALLAS HIGHWAY NW #605  SALEM, OR 97304	\$\$	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	STUART COMPTON  1955 SALEM-DALLAS HIGHWAY NW #605  SALEM, OR 97304	\$170,000	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	STUART COMPTON  1955 SALEM-DALLAS HIGHWAY NW #605  SALEM, OR 97304	\$43,693.	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	STUART COMPTON  1955 SALEM-DALLAS hIGHWAY NW #605  SALEM, OR 97304	\$19,202	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
		\$(1)	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		_	Person

(Complete Part II if there is a noncash contribution)

Noncash

Name of organization
COMPTON FAMILY FOUNDATION

Employer identification number

30-6025966

Part II	Noncash	<b>Property</b>	(see	instructions)
---------	---------	-----------------	------	---------------

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3_	746 SHARES PEPSICO INC COMMON STOCK	_	
		\$\$\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4_	400 SHARES WYETH COMMON STOCK	_	
		\$\$ <u>19,202.</u>	
(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
		<del></del>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

C/	APITAL GAI	<u>NS AND LO</u>	SSES FUL	K IAX ON	INVESTI	<u>/   </u>	FINE INCOM	<u>  E</u>
Kind of Property		Property Description			이	Date acquired	Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of	Р -	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	İ	or (loss)	
		TOTAL SHORT					2,433.	
		746. PEPSICO		TES			08/04/2009	08/07/2009
43,045.00		43,693.00	II. DECORT	1110			-648.00	
		394. PFIZER PROPERTY TY		ידטפ			10/15/2009	12/08/2009
6,973.00		6,901.00	PE: SECURI	IIES			72.00	
		400. WYETH		T DC			09/25/2009	10/15/2009
20,101.00		PROPERTY TY 19,202.00	PE: SECURI	1165			899.00	
TOTAL GAIN(L	oss)						2,756.	
							:	
						ŀ		
							:	
							:	
AZL		<u> </u>						

STATEMENT

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

ADJUSTED NET INCOME	333. 5,167. 5,500.
NET INVESTMENT INCOME	333. 5,167. 5,500.
REVENUE AND EXPENSES PER BOOKS	333. 5,167. 5,500.
	TOTAL
DESCRIPTION	CORPORATE INTEREST MONEY MARKET & CD INTEREST

ADJUSTED NET INCOME	1,549. 5,549. 14,328. 34. 119. 1,877. 23,456.
NET INVESTMENT INCOME	1,549. 5,549. 14,328. 34. 119. 1,877. 23,456.
REVENUE AND EXPENSES PER BOOKS	1,549. 5,549. 14,328. 34. 119. 1,877. 23,456.
DESCRIPTION	FOREIGN DIVIDENDS DOMESTIC DIVIDENDS OTHER INTEREST U.S. GOVERNMENT INTEREST (FEDERAL TAXABLE NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS

STATEMENT

FORM 990PF, PART I - TAXES 

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS
FED EXCISE TAX OREGON FILING FEES FOREIGN TAXES		350. 173. 162.
	TOTALS	685.

	ENDING FMV 	487,882. 195,248. 204,537. 213,885. 63,855. 70,061. 1,235,468.
	ENDING BOOK VALUE	462,957. 224,600. 229,800. 229,956. 82,000. 84,868. 1,314,181.
	BEGINNING BOOK VALUE	398,524. 153,600. 172,800. 153,956. 48,000. 49,868.
ORM 990PF, PART II - OTHER INVESTMEN	DESCRIPTION  C OR F	PIMCO TOTAL RETURN FUND II  DODGE & COX STOCK FUND  T ROWE PRICE EQUITY INCOME FUN C  T ROWE PRICE GROWTH STOCK FUND C  ARTIO INT'L EQUITY FUND II  DODGE & COX INT'L FUND

30-6025966

. COMPTON FAMILY FOUNDATION

STATE(S) WHERE THE FOUNDATION IS REGISTERED OR

STATEMENT 5

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

Michael S Compton

ADDRESS:

PO Box 2305

Salem, OR 97308

TITLE:

Trustee

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

S Randoph Compton

ADDRESS:

PO Box 2305

Salem, OR 97308

TITLE:

Trustee

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

Kathryn C Collins

ADDRESS:

PO Box 2305

Salem, OR 97308

TITLE:

Trustee

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

RECIPIENT NAME:

Michael S Compton

ADDRESS:

PO BOX 2305

Salem, OR 97308

RECIPIENT'S PHONE NUMBER: 503-363-3136

FORM, INFORMATION AND MATERIALS:

Follow general application guidelines: Description of project,

budget, tax exempt status & EIN, etc.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE

AMOUNT OF GRANT PAID .....

RECIPIENT NAME:
Oregon State Chapter PEO
ADDRESS:
86057 DRUMMOND DRIVE
Eugene, OR 97405
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
OPERATIONAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:

RECIPIENT NAME:
Beta Theta Pi Foundation

ADDRESS:
PO BOX 6277
Oxford, OH 45056

RELATIONSHIP:
NONE

PURPOSE OF GRANT:
OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

500.

FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

P.E.O. International Peace Scholarship

ADDRESS:

3700 GRAND AVE

Des Moines, IA 50312-2889

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:

St Paul's Episcopal Church

ADDRESS:

1444 LIBERTY ST SE

Salem, OR 97302

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MUSIC PROGRAM

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

RECIPIENT NAME:

Trinity United Methodist

ADDRESS:

590 ELMA AVE SE

SALEM, OR 97317-2696

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

NON-PROFIT

FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

Willamette Valley Genealogical Soc

ADDRESS:

PO BOX 2083

Salem, OR 97308

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

RECIPIENT NAME:

Riverside Community Church

ADDRESS:

PO BOX 656

Hood River, OR 97031

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MUSIC PROGRAM

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

AMOUNT OF GRANT PAID ...... 500.

RECIPIENT NAME:

Oregon Public Broadcasting

ADDRESS:

7140 SW MACADAM AVE

Portland, OR 97219

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

COMPTON FAMILY FOUNDATION 30-6025966 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: Walton Guest House ADDRESS: 1444 HIGH ST SE Salem, OR 97302 **RELATIONSHIP:** NONE PURPOSE OF GRANT: OPERATIONAL SUPPORT FOUNDATION STATUS OF RECIPIENT: TAX EXEMPT AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: Family Building Blocks ADDRESS: 2425 LANCASTER DR NE Salem, OR 97305 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATIONAL SUPPORT FOUNDATION STATUS OF RECIPIENT: TAX EXEMPT AMOUNT OF GRANT PAID ..... 1,500. RECIPIENT NAME: Parks Tradition Fund City of Salem Parks Division

ADDRESS:

555 LIBERTY ST. SE

Salem, OR 97301

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

OPERATIONAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

TAX EXEMPT

COMPTON FAMILY FOUNDATION 30-6025966 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: Assistance League of Salem ADDRESS: 1095 SAGINAW STREET S Salem, OR 97302 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATIONAL SUPPORT FOUNDATION STATUS OF RECIPIENT: TAX EXEMPT AMOUNT OF GRANT PAID ...... 2,000. RECIPIENT NAME: Mission Mill Museum Association ADDRESS: 1313 MILL ST SE Salem, OR 97301 RELATIONSHIP: NONE PURPOSE OF GRANT: OPERATIONAL SUPPORT FOUNDATION STATUS OF RECIPIENT: TAX EXEMPT AMOUNT OF GRANT PAID ..... 1,000.

STATEMENT 12

TOTAL GRANTS PAID:

38,750.

==============

# SCHEDULE 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

Name of estate or trust						Employer identification number 30-6025966			
	COMPTON FAMILY FOUNDATION s: Form 5227 filers need to complete only Pa	arts I and II.			30-602	<u> </u>	0		
Par			Held One Ye	ar or Less					
	(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 b (see page 4 of ti instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
1a									
	SHORT-TERM CAPITAL GAIN DIVIL	DENDS	STMT 1				2,433		
				-					
							<del></del>		
ь	Enter the short-term gain or (loss), if any, fi	rom Schedule D-	1, line 1b			<b>1</b> b	323.		
2	Short-term capital gain or (loss) from Form	s 4684 6252 f	3781 and 882	1		2			
-						-			
3 4	Net short-term gain or (loss) from partners! Short-term capital loss carryover. Enter the					3			
4	Carryover Worksheet					4	( )		
5	Net short-term gain or (loss). Combine lin	es 1a through 4	in column (f). I	Enter here and on li	ne 13,				
Par	column (3) on the back	- Assets Held	More Than On		▶ ↓	5	2,756.		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	I	(d) Sales price	(e) Cost or other b (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
6a									
					·				
b	Enter the long-term gain or (loss), if any, fro	om Schedule D-	1, line 6b			6b			
						_			
7	Long-term capital gain or (loss) from Forms	s 2439, 4684, 6	252, 6781, an	d 8824	• • • • • • • •	7			
8	Net long-term gain or (loss) from partnersh	ips, S corporatio	ons, and other o	estates or trusts		8			
9	Capital gain distributions					9			
10	Gain from Form 4797, Part I					10			
11	Long-term capital loss carryover. Enter the	amount, if any,	from line 14 of	the 2008 Capital L	oss				
12	Carryover Worksheet	s 6a through 11	in column (f)	Enter here and on I		11	)		
	column (3) on the back	_				12			
For I	Paperwork Reduction Act Notice, see the Instru					edule	D (Form 1041) 2009		

Schedule D (Form 1041) 2009				Page <b>2</b>
Part III Summary of Parts I and II		(1) Beneficiaries	s' (2) Estate	e's
Caution: Read the instructions before completing this	s part.	(see page 5)	or trust	
13 Net short-term gain or (loss)	13			2,756.
14 Net long-term gain or (loss):			_	
a Total for year	14a			
b Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b			
c 28% rate gain				
15 Total net gain or (loss). Combine lines 13 and 14a				2,756.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or F		T. Part I. line 4a) If	lines 14a and 15	
o Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete	Part IV a	and the Capital Loss	Carryover Worksh	eet, as necessary.
Part IV Capital Loss Limitation				
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T,				İ
a The loss on line 15, column (3) or b \$3,000  Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pa			1	6 ( )
<b>Note</b> : If the loss on line 15, column (3), is more than \$3,000, <b>o</b> r if Form 1041, pa Carryover Worksheet on page 7 of the instructions to figure your capital loss carryo	age 1, lın	e 22 (or Form 990-	T, line 34), is a los	s, complete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rat		-		
<del></del>		\		and an Dark Law Dark Hand
form 1041 filers. Complete this part only if both lines 14a and 15 in content here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is m			amount is enter	ed in Part I or Part II and
Caution: Skip this part and complete the worksheet on page 8 of the instr				
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or	uctions	11		
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero	<b>)</b> .			
Form 990-T trusts. Complete this part only if both lines 14a and 15 a		s, or qualified div	udends are incl	uded in income in Part I
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this p				
either line 14b, col. (2) or line 14c, col. (2) is more than zero.		•	, , ,	
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)	34/	• • • • • • • • • • • • • • • • • • • •	<del></del>	
, , <b>I</b> I				
		- 1		
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T) 19		<b>⊣</b>		
20 Add lines 18 and 19				
21 If the estate or trust is filing Form 4952, enter the				
amount from line 4g; otherwise, enter -0 ▶ 21				
Subtract line 21 from line 20. If zero or less, enter -0		22		
Subtract line 22 from line 17. If zero or less, enter -0		23		
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 2				
Yes. Skip lines 25 and 26; go to line 27 and check the "No" bo				
No. Enter the amount from line 23				
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		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Subtract line 28 from line 27		29		
30 Multiply line 29 by 15% (15)				30 l
Figure the tax on the amount on line 23. Use the 2009 Tax Ra				
(see the Schedule G instructions in the instructions for Form 1041)				11
,				
32 Add lines 30 and 31			2	12
Figure the tax on the amount on line 17. Use the 2009 Tax Ra				_
(see the Schedule Ginstructions in the instructions for Form 1041)			· · · · · · · · · · · · · · · · · · ·	13
Tax on all taxable income. Enter the smaller of line 32 or line 33				+
G, line 1a (or Form 990-T, line 36)				34
		. <u></u>		· ·

Schedule D (Form 1041) 2009

#### SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

▶ See instructions for Schedule D (Form 1041).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

COMPTON FAMILY FOUNDATION

Employer identification number 30-6025966

COMPTON FAMILY FOUNDATION	30-6025966				
Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less					
(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)
1a 746. PEPSICO INC COM	08/04/2009	08/07/2009		43,693.00	-648.00
394. PFIZER INC COM	10/15/2009	12/08/2009	6,973.00	6,901.00	72.00
400. WYETH COM	09/25/2009	10/15/2009	20,101.00	19,202.00	899.00
<del></del>					

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . . .

Schedule D-1 (Form 1041) 2009

FEDERAL CAPITAL GAIN DIVIDENDS 

SHORT-TERM CAPITAL GAIN DIVIDENDS -----

> SHORT-TERM CAPITAL GAIN DIVIDENDS NONQUALIFIED SHORT-TERM CAPITAL GAIN DIVIDEND 2,432.00

TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS

2,433.00 =========