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# SCANNED MAY 0 3 2011

### **Return of Private Foundation**

# or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

		nt of the Treasury venue Service • Note. The foundation may	be able to use a copy of this		rting requirements.	2009
For	caler	ndar year 2009, or tax year beginning JUN			MAY 31, 2010	<u> </u>
G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change						
	the abel erwi			,	A Employer identification 84-1464582	number
0	print r type	1101 VILLAGE ROAD LLA	•	Room/suite	B Telephone number 970-704-11	01
	Spe- ruction		<b>;</b>		C if exemption application is pe D 1. Foreign organizations,	
H_(	heck	type of organization: X Section 501(c)(3) e	xempt private foundation	•	Foreign organizations mee     check here and attach cor	ating the 85% test, putation
			Other taxable private founda	ition	E If private foundation state	us was terminated
		arket value of all assets at end of year   J   Account	-	Accrual	under section 507(b)(1)(	A), check here
			ther (specify)	\	F If the foundation is in a 6	
_	·\$ irt l	4594770 . (Part I, colu			under section 507(b)(1)(	
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	0.		N/A	
	2	Check \[ \bigsec \bigs	245	245		<u></u>
	3	cash investments  Dividends and interest from securities	245.	245.		Statement 1
		Gross rents				
_		Net rental income or (loss)				
	١ ـ	Net gain or (loss) from sale of assets not on line 10				
Revenue	Gross sales price for all					
ě	7	Capital gain net income (from Part IV, line 2)		0.		
č	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
		Gross profit or (loss)				
	11	Other income	245.	245		
	12 13	Total, Add lines 1 through 11	0.	245. 0.		0.
	14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	86690.	0.		0.
	15	Pension plans, employee benefits	000301			
ses		Legal fees				
ë	b	Accounting fees				
Ä	С	Other professional fees			_	
tive	17	Interest				
Operating and Administrative Expenses	18	Taxes Stmt 2	6935.	0.		0.
ij	19	Depreciation and depletion	5040			<u> </u>
β	20 21	Occupancy Travel, conferences, and meetings	5940.	0.	<b></b>	0.
þ	22	Printing and publications			(4) N	$\rightarrow$
g	23	Other expenses Stmt 3	36796.	0.	/¿ÇŸ/ 🔊	/\$/ 0.
atin	24	Total operating and administrative			77.00 /	
per		expenses Add lines 13 through 23	136361.	0.	1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	<u> </u>
0	25	Contributions, gifts, grants paid				
	26	Total expenses and disbursements			100 O	
	<u> </u>	Add lines 24 and 25	136361.	0.		0.
	27	Subtract line 26 from line 12:	10010			
		Excess of revenue over expenses and disbursements				
	1	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)		245.	N/A	·
9235		HA For Privacy Act and Panerwork Reduction	Act Natice see the instruct	tions	1 1N/ FA	Form <b>990-PF</b> (2009)

CROSSLAND FOUNDATION

84-1464582

Form **990-PF** (2009)

	1990-PF (2009) R. H. CROSSLAND FOUNDATION				1464			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940)	(a), 4940(b), 4940(e),	or 4	948	- see ir	ıstrı	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter	er "N/A" on line 1.					_	
	Date of ruling or determination letter: (attach copy of letter if neces	ssary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			1				5.
	of Part I, line 27b		- 1					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% o	of Part I, line 12, col. (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -O-)		2				0.
3	Add lines 1 and 2	,		3				5.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	iers enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5				5.
6	Credits/Payments:							
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a						
b	Exempt foreign organizations - tax withheld at source	6b						
	Tax paid with application for extension of time to file (Form 8868)	6c						
	Backup withholding erroneously withheld	6d						
	Total credits and payments. Add lines 6a through 6d			7	1			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ned		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9				5.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	Refunde	d 🗖	11				
	rt VII-A Statements Regarding Activities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> 1</u>		·			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislat	tion or did it participate or int	ervene	ın			Yes	No
	any political campaign?				ŀ	1a		х
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	s (see instructions for definiti	00)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of			d or	•			
	distributed by the foundation in connection with the activities.	,						
c	Did the foundation file Form 1120-POL for this year?					1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ear:			İ			
_	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers.		0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure							
	managers. ▶ \$ 0.		•					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	57				2		х
	If "Yes," attach a detailed description of the activities.				Ì			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	strument, articles of incornora	ition. o	r	,			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		, -			3		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				Ì	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				' I	5		X
	If "Yes," attach the statement required by General Instruction T				Ì			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	er:			ì			
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory of the state	directions that conflict with th	e 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?				Ì	7	x	
	If "Yes," complete Part II, col. (c), and Part XV.				Ì	· ·		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions	s) <b>&gt;</b>						
	CO	·						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	orney General (or designate)						
-	of each state as required by General Instruction G? If "No," attach explanation	, (5. 223.8)				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of secti	ion 4942(1)(3) or 4942(1)(5) f	or cale	ndar	ŀ			
-	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," cor					9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule					10		X

	990-PF (2009) R. H. CROSSLAND FOUNDATION 84  ort VII-A Statements Regarding Activities (continued)	<u>-14645</u>	82	Page 5
				<del></del>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			١,,,
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	<u> </u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		.	
12	August 17, 2008?		12 13 }	<u> </u>
ıs	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	L	13   3	<u> </u>
44	Website address ► rhcfoundation.org The backs are not set ► I EPOCH MEDITORIN CDA.  Interbacks are not set ► I EPOCH MEDITORIN CDA.	70 704	110	11
14	The books are in care of J. FROST MERRIOTT CPA  Telephone no. > 9'		<u>'                                    </u>	
4-		+4 <b>►</b> 816	<u> </u>	
10	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1	BT / 7	
Da	and enter the amount of tax-exempt interest received or accrued during the year  Int VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		N/F	
Га			V.	n No
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Ye	s No
12	During the year did the foundation (either directly or indirectly):	l		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	& NO		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	l		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	& No ]		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	K⊥ No		İ
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	K No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
		N/A	1b	
	Organizations relying on a current notice regarding disaster assistance check here	▶└──		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	<u> </u>	1c	X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?	X No		
	If "Yes," list the years $\blacktriangleright$ ,,,,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	N/A 🔯	2b	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	X No		
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	е [		
	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)	N/A 📑	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	Х
b	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?		4b	x_
		Form 9	990-P	<b>F</b> (2009)

Part VII-B   Statements Regarding Activities for Which	11 Offit 4720 Way Be	Required (contin	ued)	<del></del>
5a During the year did the foundation pay or incur any amount to:			(55)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	, <i></i>		s X No	
(2) Influence the outcome of any specific public election (see section 4955)	; or to carry on, directly or indir	• • • • • • • • • • • • • • • • • • • •	( <b></b> )	
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpos	•	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organiza	ion described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, litera	y, or educational purposes, or		[ <del></del> ]	
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify i		in Regulations	/-	
section 53.4945 or in a current notice regarding disaster assistance (see ins	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check			▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption				
expenditure responsibility for the grant?		I/A ∐ Ye	s L No	
If "Yes," attach the statement required by Regulations section 53.49	, ,			
Ga Did the foundation, during the year, receive any funds, directly or indirectly,	o pay premiums on	<b></b>	. 🔻	
a personal benefit contract?	noroonal hanafit as -t	Ye	s X No	e   .
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	i personai denenii contract?		-	6b X
If "Yes" to 6b, file Form 8870.	aboltor transaction?		s X No	
7a At any time during the tax year, was the foundation a party to a prohibited ta		TE	. –	7b
b If yes, did the foundation receive any proceeds or have any net income attrib		nagere Highly		70 ;
Part VIII Paid Employees, and Contractors	stees, i duitation wie	magers, riiging		
List all officers, directors, trustees, foundation managers and the				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
ALPH H CROSSLAND JR	_DIRECTOR			
101 VILLAGE ROAD				
ARBONDALE , CO 81623	<u>5</u> .00	0.	0.	0.
	_DIRECTOR		<u></u>	<u> </u>
NN BOND CROSSLAND 101 VILLAGE ROAD			<u></u>	
101 VILLAGE ROAD ARBONDALE, CO 81623	2.00	0.	0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT		0.		
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD	2.00 DIRECTOR		0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD	2.00	0.		
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD	2.00 DIRECTOR		0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD	2.00 DIRECTOR		0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623	2.00 DIRECTOR 5.00	0.	0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those in the second employees)	2.00 DIRECTOR 5.00	0 • enter "NONE."	0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623	2.00 DIRECTOR 5.00	0.	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	0.	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those in the second employees)	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.
101 VILLAGE ROAD ARBONDALE, CO 81623 FROST MERRIOTT 101 VILLAGE ROAD ARBONDALE, CO 81623  Compensation of five highest-paid employees (other than those i	2.00 DIRECTOR 5.00	0 • enter "NONE."	O .  (d) Contributions to employee benefit plans and deferred	0.

Form 990-PF (2009) R. H. CROSSLAND FOUNDATION	84-1	464582	Page 7
Part VIII • Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE	(-/-)		<u>.                                    </u>
	7		
<del></del>			
	_		
Total number of others receiving over \$50,000 for professional services		<b></b>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the uced, etc.	Expenses	<b>S</b>
1 THUNDER RIVER THEATRE			
			0.
2 ASPEN VALLEY COMMUNITY FOUNDATION			
			0.
3 AMERICAN CANCER SOCIETY			<u> </u>
<u></u>			
			0.
4 THE BUDDY PROGRAM			
			_
Part IX-B   Summary of Program-Related Investments			0.
Describe the two largest program-related investments made by the foundation during the tax year on the state of the two largest program-related investments made by the foundation during the tax year on the state of the state o	ines 1 and 2	Amount	
1 N/A	into Fano E.	, anount	
2			
<del></del>			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	<b>&gt;</b>		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	12928.
C	Fair market value of all other assets	1c	4770350.
ď		1d	4783278.
	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4783278.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	71749.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4711529.
6	Minimum investment return. Enter 5% of line 5	6	235576.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	235576.
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.)		
_	Add lines 2a and 2b	2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	235571.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	235571.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	235571.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		_
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

Part XIII · Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				235571.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			-98282.	
<b>b</b> Total for prior years:				
<u>2007</u> , <u>2006</u> , <u>2005</u>		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
d From 2007				
e From 2008			İ	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$0 .				
a Applied to 2008, but not more than line 2a			-98282.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				98282.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				· · · · · · · · · · · · · · · · · · ·
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				137289.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	-			
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Form 990-PF (2009) R. H. ( Part XIV   Private Operating F	CROSSLAND FO		II-A guestion 9)	84-14 N/A	64582 Page 1
1 a If the foundation has received a ruling			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/ A	
foundation, and the ruling is effective fo					
b Check box to indicate whether the foun	•	• •	un acetion	4942(j)(3) or 49	942(j)(5)
		ing roundadon described T		1 4942(J)(3) UI 48	342(J)(3)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(a) Total
income from Part I or the minimum	(a) 2003	(0) 2000	(6) 2007	(4) 2000	(e) Total
investment return from Part X for					
each year listed		•			
<b>b</b> 85% of line 2a			ļ		
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets				_	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 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 support from					
an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Info	ormation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during	the year-see the i	instructions.)		. ,	
1 Information Regarding Foundation	on Managers:	<del></del>			
List any managers of the foundation will year (but only if they have contributed)	no have contributed more		tributions received by the	e foundation before the clo	se of any tax
None					
<b>b</b> List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a p	artnership or
None					
	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	
the foundation makes gifts, grants, etc.				Omplete items 2a, b, c, and	J U.
a The name, address, and telephone nun CARLY MERRIOTT, 970- 1101 VILLAGE ROAD,	•	, CO 81623	e addressed;		
b The form in which applications should			hould include:	<del></del>	
NARRATIVE LETTER FOR c Any submission deadlines:		-		CIARY	
NA	la anali an his asses a d	-1	tunda af mass s		
d Any restrictions or limitations on award <b>NA</b>	is, such as by geographic	ai areas, charitable fields	, kinds of institutions, or	other factors:	

Form 990-PF (2009) R. H. CROSS  Part XV Supplementary Information	LAND FOUNDATION		84-146	4582 Page 11
3 Grants and Contributions Paid During th		Day	<u>-</u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Conalibation	
a Paid during the year SCHEDULE ATTACHED	NONE			
		i		
Total			<b>&gt;</b> 3a	0.
b Approved for future payment				
None				

### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C				· -	
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			į		
3 Interest on savings and temporary cash					
investments			14		245.
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			ļ		
7 Other investment income	· · · ·				
8 Gain or (loss) from sales of assets other					
than inventory			18		
9 Net income or (loss) from special events			1 - 0		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
· · · · · · · · · · · · · · · · · · ·					
C					
d					
e		0.			245.
12 Subtotal. Add columns (b), (d), and (e)		U •			
13 Total. Add line 12, columns (b), (d), and (e)				13_	245.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	ne is reported	ın column (e) of Part XVI-A	contri	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other than b	y providing fu	inds for such purposes).			
NOT APPLICABLE				<u> </u>	
				_	
				<u>.</u>	
<del></del>					
		<del>, , , , , , , , , , , , , , , , , , , </del>			<del> </del>
		<u> </u>		<del>-</del>	
		<del></del>			
		<u> </u>			
<del>-  </del>					
<del></del>					
		<del></del>			
	_	_			

Yes No

X

X Х

X

X

Х

X

X

2	a Is the	foundation directly or indirectly	affiliated with, or related to, o	one or more tax-exempt org	anızatıons descri	bed		
	ın sec	tion 501(c) of the Code (other th	han section 501(c)(3)) or in s	section 527?				Yes X No
	o If "Yes	," complete the following schedu	ule.					
		(a) Name of organ	iization	(b) Type of organization	n	(c) Description	n of relationship	
		N/A						
						<u> </u>		
		enalties of perjury, I declare that I have plete Declaration of preparer (other the					and belief, it is true	, correct,
	a		11/1	11/5/11			· ·	
a	<b>D</b> =	THE THOUSE	<del>///</del>	4/15/11	-	SIDENT >	sec .	
Ě	Si	gnature of officer or trustee	1	Date	Title			
Sign Here	<b>ω</b> _	Preparer's			Date	Check if self-	Preparer's i	dentifying number
ૹ૽ૼ	Paid Preparer's Use Only	signature 🗸 🗸 🗸	VUVVUV		11/1/14	employed ► L		
	Paid pare	Firm's name (or yours $oldsymbol{J}oldsymbol{\cdot} oldsymbol{FR}$	OST MERRIOTT	INC CPA		EIN ►		
	£3	, <b>,</b> , , , , , , , , , , , , , , , , ,	VILLAGE ROAD	LLA2				
_		address, and ZIP code CARBO	NDALE, CO 816	523		Phone no.		704-1101
							Form	990-PF (2009)

(Rev. April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Interna	I Revenue Service	► File a separate application for each return.		I						
• If y	● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box									
• If y	ou are filing for an Ado	litional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this fo	rm)	•						
•	-	less you have already been granted an automatic 3-month extension on a previously filed	-	m 8868.						
Par	rt I Automati	3-Month Extension of Time. Only submit original (no copies needed)								
A cor	poration required to file	e Form 990-T and requesting an automatic 6-month extension - check this box and compl	ete							
Part I										
	her corporations (include income tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an e.	xten	sion of time						
noted (not a you n	d below (6 months for a automatic) 3-month ext nust submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical ension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consumpleted and signed page 2 (Part II) of Form 8868. For more details on the electronic filing on e-file for Charities & Nonprofits	ally if solida	(1) you want the ated Form 990-T.	additional					
Туре		t Organization E	Empl	oyer identificati	on number					
print		OSSLAND FOUNDATION	8	4-1464582	?					
File by due da filing ye	the te for Number, street,	and room or suite no. If a P.O. box, see instructions LAGE ROAD LLA2								
return ınstruc	See	est office, state, and ZIP code. For a foreign address, see instructions.		·						
	CARBONDA	LE, CO 81623								
Chec	k type of return to be	filed (file a separate application for each return).								
	Form 990	Form 990-T (corporation)	0							
	Form 990-BL	Form 990-T (sec 401(a) or 408(a) trust) Form 5227								
$\mathbf{x}$	Form 990-EZ	Form 990-T (trust other than above)	9							
	Form 990-PF	Form 1041-A Form 8870	0							
<b>▲</b> T⊢	o books are in the ear	J. FROST MERRIOTT CPA  e of ► 1101 VILLAGE ROAD LLA2 - CARBONDALE, CO	Ω1	623						
	elephone No. > 970		01	025						
	·	not have an office or place of business in the United States, check this box								
		rn, enter the organization's four digit Group Exemption Number (GEN)	s for	the whole aroup	. check this					
		t of the group, check this box  and attach a list with the names and EINs of all me								
1		3-month (6-months for a corporation required to file Form 990-T) extension of time until		<b>*</b>						
	is for the organization	15 , $2011$ , to file the exempt organization return for the organization named about the form	ve	i ne extension						
	calendar year									
	► X tax year begin									
	Land task your bog.									
2	If this tax year is for le	ss than 12 months, check reason Initial return Final return	(	Change in accour	nting period					
<b>3</b> a		r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
L	nonrefundable credits		3a	<u> </u>						
b		r Form 990-PF or 990-T, enter any refundable credits and estimated nclude any prior year overpayment allowed as a credit	3b	œ						
С		ct line 3b from line 3a. Include your payment with this form, or, if required,	30	_\$						
•		pon or, if required, by using EFTPS (Electronic Federal Tax Payment System).								
	See instructions.		3c	\$	N/A					
Cauti	ion. If you are going to	make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88	 379.f	O for payment in	estructions					

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

Form 8868 (Rev. 4-2009)

Form 8	3868	(Rev. 4-2009)					Page 2
Note.	Only	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and a complete Part II if you have already been granted an automatic 3-month extension on a properties on the page 1).			3868.	<b>&gt;</b>	X
Par		Additional (Not Automatic) 3-Month Extension of Time. Only file the	onginal (no co	pies n	eeded).		
Type print	t y the ded ate for	Name of Exempt Organization					cation number
File by t extended due dat filing the		R. H. CROSSLAND FOUNDATION  Number, street, and room or suite no. If a P O. box, see instructions.  1101 VILLAGE ROAD LLA2	, - <u></u>	For IR	4 – 1464 S use only	582	
return S	See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  CARBONDALE, CO 81623	per to	-1	المحاجب المستراج المساء		TO THE
	Form		1041-A [ 14720 [	=	m 5227 m 6069	For	rm 8870
STOP	! Do	not complete Part II if you were not already granted an automatic 3-month extension	on a previous	sly file	d Form 88	68.	
Tel • If ti • If ti box 1 4 5 6 7	he on his is left this state.	s tax year is for less than 12 months, check reason. Initial return Final e in detail why you need the extension  CORDS ARE UNAVAILABLE TO FILE A COMPLETE AND	If the left of all in the left o	s is for membe	the whole ers the extension and the extension an	ension is for	or
b	noni If thi tax p	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less refundable credits. See instructions.  s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and est payments made. Include any prior year overpayment allowed as a credit and any amount payrously with Form 8868.	ımated	8a 8b	\$\$		
		ince Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See		8c	\$	N/	'A
		Signature and Verification					
t is tru	e, co	////// L/1 ////// <del>/_///</del>			de	lge and beli IA 1.1	ief,
<u>Signatı</u>	טונ 🏴	Title ► SECRETARY TREASURER		Date		<b>8868</b> (Rev	v. 4-2009)

Form 990-PF Interest on Sav	ings and Tem	porary Cash I	nvestments	Statement	1	
Source				Amount		
CHASE ACCOUNT			-	2	45.	
Total to Form 990-PF, Part I	, line 3, Co	lumn A	-	2	45.	
Form 990-PF	Tax	es	Statement 2			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income			
PAYROLL	6935.	0.			0.	
To Form 990-PF, Pg 1, ln 18	6935.	0.			0.	
Form 990-PF	Other E	xpenses		Statement	3	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income			
OFFICE SUPPLIES OFFICE INSURANCE TRAVEL BANK CHARGES UTILITIES	6759. 5766. 14275. 5803. 375. 3818.	0. 0. 0. 0.			0. 0. 0. 0.	
To Form 990-PF, Pg 1, ln 23	36796.	0.	·		0.	

3:03 PM

# R. H. Crossland Foundation Transaction Detail By Account June 2009 through May 2010

**Accrual Basis** 

Type Date		Name	Debit	Balance	
Contributions					
Check	6/10/2009	The Buddy Program	10,000 00	10,000 00	
Check	8/31/2009	Courage Classic	300 00	10,300 00	
Check	8/31/2009	Music for Meghan	500 00	10,800 00	
Check	11/30/2009	Thunder River Theater	1,500 00	12,300 00	
Check	12/30/2009	Thunder River Theater	20,000 00	32,300 00	
Check	4/26/2010	Thunder River Theater	5,000 00	37,300 00	
Total Contributions			37,300 00	37,300 00	
TOTAL			37,300.00	37,300.00	