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# **SCANNED OCT 1 8** 2010

990 • Form

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2009

Open to Public

Department of the Treasury

		enue Service Pine organization may have to use a copy of this return to satisfy state re	<u> </u>		Inspection
	For the	e 2009 calendar year, or tax year beginning $Jul 01$ , 2009, and			30,2010
	applicab		e D Employer id	dentificatio	n number
Ц	Address	<sup>change</sup> label or	76-	03115	50
	Name ch	ange   print or   TFOC Incorporated	E Telephone r	number	
П	Initial ret	urn See	936	-539-	6009
Π	Terminat	ed Specific 334 N Main	G Gross receipts	\$	
Π.	Amende		H(a) Is this a		rn
	Applicati		for affilia	•	··· ☐ Yes 🏻 No
Ļ	pending	334 N Main Conroe TX 77301	1		
1 7	27-070	mpt status	If "No", at	filiates include ttach a list	
	Vebsite	τ γ τι γ τι γ τι σει	(see instr	•	∐ Yes ∐ No
			H(c) Group ex		
			formation 1990	M State of	legal domicileTX
F	art I	Summary			
		Briefly describe the organization's mission or most significant activities		,	
Ð		Promote the welfare and well being of the cit	y of Conr	oe,	
Ĕ		Texas and provided scholarships and donations			
Ĕ	1 1	to local students and non-profits			
Š	2 (	Check this box $ ightharpoonup$ if the organization discontinued its operations or disposed of more t	han 25% of its ne	t assets	
Ü	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	21
Š	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	21
įţį	5	Total number of employees (Part V, line 2a)		5	i
Activities & Governance	6	Total number of volunteers (estimate if necessary)		6	200
Ř	1	Total gross unrelated business revenue from Part VIII, column (C), line 12		7a	
		Net unrelated business taxable income from Form 940-7 line 245 2 8 2009		7b	
_		F SEP 4 0 ZEEP	Prior Year	<del>                                     </del>	Surrent Year
•	8 (		3346		34590.
ž		Program service revenue (Part VIII, line 2g)	3417		26327.
Revenue	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	443		2381.
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9368		8393.
	i .	<u></u>	16574		
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	105/4	· 5 ·	71691.
	ì	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.400		0.000
es	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2498	57.	27391.
ens	1	Professional fundraising fees (Part IX, column (A), line 11e)			
Expenses	1	Total fundraising expenses, (Part IX, column (D), line 25) ▶			
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	9529		84581.
	1	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	12028		111972.
		Revenue less expenses Subtract line 18 from line 12	4546	3.	-40281.
Net Assets or Fund Balances			Beginning of Ye	ar I	End of Year
sets	20	Total assets (Part X, line 16)	27381	7.	237121.
d As	21	Total liabilities (Part X, line 26)	3627	75.	39860.
울분	22 1	Net assets or fund balances Subtract line 21 from line 20	23754	2.	197261.
Pa	art II	Signature Block			
	-	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules	and statements, and	to the best of	my knowledge
		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all info			
				_	, moundage
Sig	ın	Kola a Koai	1 9	7-23.	- 19
He		Signature of officer	Dat		10
	. •	KOBERT BLAIN TREASURER	Dat	e	
		Type or print name and title		<del></del> .	
			Check If	Preparer's	identifying number
Paid	4		self- —	(see instru	ctions)
Pre	parer's	5 , , , , , , , , , , , , , , , , , , ,	employed ▶	·	67258
Use	Only	Firms name (or yours if self-employed).  VanWassehnova & Associates  On the Park Transfer	EIN •		122537
	•	address, and ZIP+4 804 W Dall Conroe TX 77301-	Phone no ▶	• 936-'	760-1600

May the IRS discuss this return with the preparer shown above? (See instructions) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. X Yes No Form **990** (2009)3

		C Incorporat		76-0	311550 Pa
			vice Accomplishments		<del></del>
		ie organization's mission Jelfare of Co			
	rarener v	icitate of ce	AIIOC, IX		
	Did the examinati	an undartaka any armifu		which were not listed on	
	the prior Form 99		cant program services during the year v	wnich were not listed on	∏ Yes ☒ N
	•	these new services on S	Schedule O		[ les [A II
	Did the organizati		make significant changes in how it cor	nducts any program services?	Yes X N
	Describe the exer Section 501(c)(3)	npt purpose achievemer and 501(c)(4) organizati	nts for each of the organization's three l ions and section 4947(a)(1) trusts are re and revenue, if any, for each program so	equired to report the amount of gra	
ı	(Code	) (Expenses \$	78519. including grants of \$	) (Revenue	\$
	Promoted	the welfare	and well being of t	he City of Conroe	, TX
			ships and donations		
	and non-p				
				- WL	
	(Code	) (Expenses \$	uncluding grants of \$	) (Revenue	•
	Code	/ (Exheuses a	including grants of \$	) (nevenue	Ψ
				· · · · · · · · · · · · · · · · · · ·	
					· · · · · · · · · · · · · · · · · · ·
			······································	<del></del>	
	(Code	) (Expenses \$	including grants of \$	) (Revenue	\$
			<del></del>		
		···			
			<del></del>		
	Other program se	ervices (Describe in Sch	edule O)		
	Other program se (Expenses \$		edule O) luding grants of \$	)(Revenue \$	)

# Form 990 (2009) TFOC Incorporated Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,			
	Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	_	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,		37	
_	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
•	reported in Part X, line 16° If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain a separate, independent audited financial statement for the tax year? If "Yes," complete			
-	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in a consolidated, independent audited financial statement for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	ls the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Fo	rm <b>990</b>	(2009)

# Form 990 (2009) TFOC Incorporated Part IV Checklist of Required Schedules (continued)

		1	res	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	,		v
~~	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	22	ļ	Х
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employee's? If "Yes,"	22		Х
24-	complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			!
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	245		Х
L	24b through 24d and complete Schedule K. If "No," go to question 25	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24-		
_	to defease any tax-exempt bonds?	24c		
d 25-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction	0.		v
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			v
	990EZ? If "Yes," complete Schedule L, Part I	25ъ		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			v
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	-	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			₹.
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, directly or indirectly			
	(see Schedule L, Part IV instructions for definitions of "direct" and "indirect" and applicable filing thresholds,			
	conditions, and exceptions)			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	004		v
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family	00.		
	member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		^_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	-		- v
0.4	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	22		X
00	If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1,,		<sub>v</sub>
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	24		Х
25	III, IV, and V, line 1	34		Λ.
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	25		X
26	Schedule R, Part V, line 2	35		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	25		X
27	organization? If "Yes," complete Schedule R, Part V, line 2	36		_ ^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37		X
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	-		X
38	Did the organization complete Schedule O and provide explanations for Part VI, lines 11 and 19?	38	90/	2009)

-	Statements Regarding Other IRS Fillings and Tax Compliance		V 1	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		Yes	No_
-	U S Information Returns Enter -0- if not applicable 1a 54		1	
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1 ]		
	gaming (gambling) winnings to prize winners?	1c	1	Χ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1		#	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X_
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			3.7
	organization solicit any contributions that were not tax deductible?	6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		<del></del>
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		
_	and services provided to the payor?  If "Yes," did the graphystics paths the depay of the value of the goods or services provided?	7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1 1		
ŭ	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations Did the supporting organization, or a donor advised fund maintained by a sponsoring organization,			
	have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		
11				
	Gross income from members or shareholders  11a	-  :		i
b	Gross income from other sources (Do not net amounts due or paid to other sources			
10-	against amounts due or received from them )  [11b]  Seation 4947(a)(1) non-exemption them them to be situated to the exemption (them Form 1991) in the exemption to be situated to the exemption of the exemption	12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
0	in res, error the amount of tax-exempt interest received of accrued during the year   120		QQf	(2009)

\*Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Secti	on A. Governing Body and Management	action is	Yes	No
	on A continue of the continue			
1a	Enter the number of voting members of the governing body			
	Enter the number of voting members that are independent  1b 21	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one of more members			
	of the governing body?	7a		X
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following?			
а	The governing body?	8a	Х	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		X
11	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	11	X	
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		X
	Does the organization have a written whistleblower policy?	13		X
	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
	The organization's CEO, Executive Director, or top management official?	15a		
þ	Other officers or key employees of the organization?	15b		
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			-
	with a taxable entity during the year?	16a		X
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		:	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	166	ŀ	
Saat	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
	List the states with which a copy of this Form 990 is required to be filed			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)	·· <del>-</del>		
10	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes it governing documents, conflict of interest			
.5	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶Shirley Hewett 334 N Main CONROE TX 77301 936-539-	600	9	
	<u> </u>			

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Check this box if the organization did not compensate any current officer, director, or trustee

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)	(c)						(D)	(E)	(F)
Name and Title	Average		on (cł	1	all t			Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Mike McDougal										
President	10			X				0	0	0
Will Metcalf										
Vice Pres	10			X				0	0	0
S Walls										
Secretary	10			X				0	0	0
Robert Blain										
Treasurer	10	_		X				0	0	0
Anne Hoffman							,			
Historian	10			X				0	0	0
Sandy Apostolo										
Director	5	X						0	0	0
George Feist										
Director	5	X						0	0	0
Leo Hewett										
Director	5	X						0	0	0
Paul Virgadamo	}									
Director	5	X						0	0	0
Mike Ladyman										<u> </u>
Director	5	X						0	0	0
Jay R Martin										<u>.</u>
Director	5	Х						0	0	0
Bob Secrest										
Director	5	Х						0	0	0
Mike White								<u></u>		
Director	5	Х						0	0	0
Kelly Carter			_							
Director	10	Х						4020.	0	0
Howard Galaway										
Director		X						0	0	0
Mark Jefferson										
Director	5	X						0	0	0

Part VII Section A. Officers, Directors,	Trustees	Key !	Emplo	vec		nd Li	nhe:	t Companyated Em	/O-USII		Га	ge <b>o</b>
(A)	(B)	, Rey I	Linbic	yee (C		iiu niţ	gnes	(D)	(E)		(F)	
Name and title	Average	Positi	on (ch			hat ar	vla:	t .	Reportable		(i ) imated	
rane and the	hours per	1						compensation	compensation		ount of	
	week	학	nstit	Officer	Key employee	腹	Former	from	from related		other	
	ĺ	ect idu	utio	쁙	ğ	est	ΕĘ	the	organizations	comp	ensatı	on
		이 의	nal		ş	econ		organization	(W-2/1099-MISC)		m the	
		Individual trustee or director	Institutional truste		ee	Highest compensated employee	ŀ	(W-2/1099-MISC)		orga	ınızatıc	n
		ĕ	tee			nsa	1			and	related	d
						ted				orga	nızatıo	ns
Nancy Johnson												
Director	5	X				L		0	0		0	
Richard Mayer												
Director	5	X						0	0		0	
Keith Miller					ļ							
Director	5	X					ļ	0	0		0	
Charles Tullos	_											
Director	5	X					ļ	0	0		0	
Richard Willis	_	3,7									^	
Director Chirley Heyett	5	X		_	<u> </u>		_	0	0		0	
Shirley Hewett Employee	40				X			35000.			201	00.
Fuibrokee	40				<u>^</u>		<del> </del>	33000.	0		30	00.
	-				1							
							$\vdash$					
	-											
	†											
		<del> </del>					<del>                                     </del>					
	1											
							ļ					
	1											
	1											
				<u> </u>	ļ -							
1b Total							<b>&gt;</b>	39020.	0		30	00.
2 Total number of individuals (including but	not limited	l to tho	se list	ed a	bov	re) wh	o re	ceived more than \$1	00,000 in reportable	compen	sation	
from the organization 🕨												
											Yes	No
3 Did the organization list any former officer						yee, c	r hi	ghest compensated			1	3.7
employee on line 1a? If "Yes," complete Se										3		X
4 For any individual listed on line 1a, is the s	-		-					·				
the organization and related organizations	greater th	an \$15	50,000	? <b>if</b>	Yes	s," con	nple	te Schedule J for suc	ch			37
individual			_							4		X
5 Did any person listed on line 1a receive or services rendered to the organization? If "		•				-		_		5		X
Section B. Independent Contractors	ies, com	hiere 2	crieat	ile J	IOI	such	pers	UII		<u> </u>	<u> </u>	Λ
1 Complete this table for your five highest co	ompensate	ed inde	nend	ent d	cont	ractor	s the	at received more that	n \$100 000 of			
compensation from the organization	p-0110410		. p 01 101	J. 11 V	1 11							

(A)	(B)	(c)
Name and business address	Description of services	Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Pari	VIII	Statement of Reve	nue			-		
					(A) Total revenue	( <b>B</b> ) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	1a	Federated campaigns	1a					
unt	ь	Membership dues	1b	1340.				
ΒĒ	c	Fundraising events	1c					
affs Ir a	d	Related organizations	1d					
S, S	e	Government grants	1e	29000.				
lo lis	f	(contributions) All other contributions, gifts,						
but Free	'	grants, and similar amounts not included above	1f	4250.				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions	\$					
မှ ပ	h	Included in lines 1a-1f  Total. Add lines 1a-1f	Ψ -		34590.			
		Total. Add lines 1a-11			34370.			<b></b>
Program Service Revenue	2-	City Concerts		Business Code 711130	26327.	26327.		
	2a _	city concerts		_   /11130	20327.	20327.		
e e	b _		-					
25	<sup>c</sup>	<del></del>						
Se	d _							
аЩ	e _							
ģ	f	All other program service re	evenue					
_₫	g	Total. Add lines 2a-2f		<u> </u>	26327.	,		
	3	Investment income (includi	ng dividi	ends, interest, and				
		other similar amounts)		<b>&gt;</b>	2381.	2381.		
	4	Income from investment of tax-e	exempt bo	nd proceeds 🕨				
	5	Royalties		<b>&gt;</b>			1	
		(1) 1	Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b>•</b>				
	7a	Gross amount from (i) Sec	curities	(II) Other				
		sales of assets other than inventory						
	ь	Less cost or other						
		basis and sales expenses						
	l c	Gain or (loss)		1				
	d	Net gain or (loss)		<b>•</b>	ĺ	·		
	1	Gross income from fundraising e	vents [					
a)		(not including \$						
a.		of contributions reported on line	1c)					
ě		See Part IV, line 18	a	512008.				
ē	ь	Less direct expenses	b	503615.				
Other Revenue	c	Net income or (loss) from fi			8393.	8393.		
Ŭ	9a	Gross income from gaming		ig everits	0000.	0373.		
	Ja	activities See Part IV, line						
		Less direct expenses	19 a   b					
	Ь	Net income or (loss) from g	L					
	100	Gross sales of inventory, le		ctivities				
	IVa	returns and allowances						
			a					
	b	Less cost of goods sold	, p[					
	С	Net income or (loss) from s		<del></del>				
	112	Miscellaneous Reven	ue	Business Code	İ			1
	11a	*****		_	•		- I	
	b			<del></del>			<u> </u>	
	C	All sales		_				
	d	All other revenue					<b>,</b>	
	e	Total. Add lines 11a-11d	41- 0 -	<b>▶</b>				
	12	Total Revenue Add lines	ın, 2g, 3	5, 4, 5, 6d, /d, 8c,	71.601	20121		
	l	9c, 10c, and 11e		▶	71691.	37101.		1

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete of				
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1 (	Grants and other assistance to governments and		•		······································
c	organizations in the U.S. See Part IV, line 21				
2 (	Grants and other assistance to individuals in				
t	he U.S. See Part IV, line 22			į	
3 (	Grants and other assistance to governments,				
c	organizations, and individuals outside the				
ι	J S See Part IV, lines 15 and 16				
<b>4</b> E	Benefits paid to or for members				
5 (	Compensation of current officers, directors,				
t	rustees, and key employees				
6 (	Compensation not included above, to disqualified				
F	persons (as defined under section 4958(f)(1)) and				
F	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	27391.	20543.	6848.	
	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
	Other employee benefits				
	Payroll taxes				
	Fees for services (non-employees)				
	Management				
<b>b</b> l	Legal				
c /	Accounting	4000.		4000.	
d l	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
	Advertising and promotion				
	Office expenses	1454.		1454.	
	Information technology		<del></del>		
	Royalties				
	Occupancy				
	Travel				
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates	2500	1050	1050	
	Depreciation, depletion, and amortization	2500.	1250.	1250.	
	Insurance	1110.	111.	999.	
	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below) SEE_STMT	3000.			
	SEE SIMI	247.			
Ь.		21896.		-	
d .		18800.			<del></del>
		2923.			
e f	All other expenses	28651.	<u></u>		
	All other expenses  Total functional expenses. Add lines 1 through 24f	111972.	78519.	33453.	
	Joint Costs Check here If following	111212.	70019.	2222.	
	SOP 98-2 Complete this line only if the org				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
BCA	Copyright form software only, 2009 Universal Tax Systems, 1	<u></u>	US990\$10 Rev 1	<u> </u>	Form <b>990</b> (200

Part	X	Balance Sheet					
			-		(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			223692.	1	173616.
İ	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net		'		3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, d	rectors, truste	es, key			
		employees, and highest compensated employe	es Complete l	Part II of Sch L		5	
	6	Receivables from other disqualified persons (as	defined unde	r section			
		4958(f)(1)) and persons described in section 49	58(c)(3)(B) C	omplete			
		Part II of Schedule L		6			
က္က	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
¥	9	Prepaid expenses and deferred charges				9	15180
	10a	Land, buildings, and equipment cost or other	1 1				
		basis Complete Part VI of Schedule D	10a	80621.			
	Ь	Less accumulated depreciation	10b	32996.	50125.	10c	47625.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities See Part IV, line	Ì		12		
	13	Investments - program-related See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15	700.		
	16	Total assets Add lines 1 through 15 (must equ	273817.	16	237121		
	17	Accounts payable and accrued expenses		7275.	17	9860.	
	18	Grants payable		18			
ł	19	Deferred revenue			29000.	19	30000.
	20	Tax-exempt bond liabilities				20	
.	21	Escrow or custodial account liability Complete	Part IV of Scho	edule D		21	
Liabilities	22	Payables to current and former officers, directo					
Ϊġ		employees, highest compensated employees, a		•			
ן בֿי		persons Complete Part II of Schedule L	•			22	
	23	Secured mortgages and notes payable to unrel	ated third part	ies		23	
1	24	Unsecured notes and loans payable to unrelate	-			24	
	25	Other liabilities Complete Part X of Schedule D	-			25	
	26	Total liabilities Add lines 17 through 25			36275.	26	39860.
		Organizations that follow SFAS 117, check h	ere ▶ X an	d	5 - 515.0		
ဖွ		complete lines 27 through 29, and lines 33 a	—			<u> </u>	
ည်	27	Unrestricted net assets			237542.	27	197261.
aga	28	Temporarily restricted net assets			28		
B P	29	Permanently restricted net assets			29		
5		Organizations that do not follow SFAS 117, o	heck here 🕨				
o		and complete lines 30 through 34.					
its	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or	equipment fun	d		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated ii				32	
ž	33	Total net assets or fund balances			237542.	33	197261
	34	Total liabilities and net assets/fund balances			273817.	34	237121

Form **990** (2009)

Rev 1

Pa	t XI Financial Statements and Reporting	-	-	
			Yes	No
1	Accounting method used to prepare the Form 990 🔯 Cash 📗 Accrual 🦳 Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Ì	X
ь	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			
	audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements of the year were			
	issued on a consolidated basis, separate basis, or both	2d		
	Separate basis consolidated basis both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1	İ	
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits?	3b		
		Form	990	(2009)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organizations or a section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ.

▶See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization 76-0311550 TFOC Incorporated Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II ) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Complete Part III ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally integrated d | Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (III) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) Is the (vii) Amount of (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organ-(v) Did you organization (described on lines 1-9 notify the organization in ization in col support above or IRC section (i) listed in your organization in col (i) cal (i) of your (see instructions)) governing organized support? document? in the US? Yes Yes No No Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2009

Total

## Schedule A (Form 990 or 990-EZ) 2009 TFOC Incorporated Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

<u> 260</u>	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	( <b>b</b> ) 2006	( <b>c</b> ) 2007	( <b>d</b> ) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and			-			
	membership fees received (Do not						
	include any "unusual grants ")		14000.	30000.	32500.	32000.	108500.
2	Gross receipts from admissions, merchan-			•			
	dise sold or services performed, or facilities						
	furnished in any activity that is related to						
_	the organization's tax-exempt purpose	436361.	653836.	725881.	703138.	539565.	3058781.
3	Gross receipts from activities that are not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
_	its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	10.50.51					
6	Total. Add lines 1 through 5	436361.	667836.	755881.	735638.	5/1565.	3167281.
7 a	Amounts included on lines 1, 2, and 3						
_	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disgualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						2165001
8	Public support (Subtract line 7c from line 6 )						3167281.
	ction B. Total Support	()	(1) 2222	( )	(1)	1 / )	(0) =
	lendar year (or fiscal year beginning in) ▶	(a) 2005 436361.	( <b>b</b> ) 2006 667836.	(c) 2007 755881.	( <b>d</b> )2008 735638.	(e) 2009	(f) Total 3167281.
9	Amounts from line 6	436361.	66/836.	/55881.	/35638.	5/1565.	316/281.
iva	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	493.	509.	2365.	4432.	2381.	10180.
_	Sources Unrelated business taxable income (less	493.	509.	2365.	4432.	2381.	10180.
D	·						
	section 511 taxes) from businesses						
_	acquired after June 30,1975 Add lines 10a and 10b	493.	509.	2365.	4432.	2381.	10180.
		493.	509.	2365.	4432.	2301.	10180.
• • • • • • • • • • • • • • • • • • • •	Net income from unrelated business						
	activities not included in line 10b, whether						
12	or not the business is regularly carried on Other income. Do not include gain or					<del>-</del>	<del></del>
12	loss from the sale of capital assets						
	(Explain in Part IV )	2310.	5200.	1505.	960.	1340.	11315.
12	Total support. (Add lines 9, 10c, 11, & 12)	2310.	3200.	1303.	500.	1340.	3188776.
	First five years. If the Form 990 is for the org	anization's first	second third to	urth or fifth tax	l	E01(a)(3)	p100//0.
17	organization, check this box and <b>stop here</b>	garnzation's mst,	Second, ama, io	uitii, oi iiitii tax	year as a section	11 50 1(0)(3)	
500	ction C. Computation of Public Sur	nort Percen	tage				
	Public support percentage for 2009 (line 8, co			mp (f))		15	99.33 %
	Public support percentage from 2008 Schedu		•	1111 (17)		16	99.37 %
	ction D. Computation of Investmen				· · · · · · · · · · · · · · · · · · ·	1101	JJ.J1 /6
17				3 column (f))		17	0.32 %
18	Investment income percentage for 2009 (line Investment income percentage from 2008 Sc		-	s, column (f))		18	0.32 %
	a 33 1/3 % support tests - 2009. If the organiz			no 14 and line 1	IE is mare than	L	
170	not more than 33 1/3 %, check this box and:						F
j.	33 1/3 % support tests - 2008. If the organiz		-				
D	is not more than 33 1/3 %, check this box an						/o, ariu iine 18
20	Private foundation. If the organization did no					•	
20	Tivate roundation. If the organization did no	or clieck a DOX O	11 1111 <del>0</del> 14, 134, 01	130, CHECK INS	DOX AND SEE IN	311 UC110115	<u> </u>

Schedule A (Forn	n 990 or 990-EZ) 2009 TFOC Incorporated	76-0311550	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by F	art II, line 10,	
	Part II, line 17a or 17b, or Part III, line 12 Provide any other additional information (see instruction	ons)	
Mombozah	in Duog		
Membersh	ip bues		<del></del>
<del></del>			
		<del></del>	
		<del> </del>	
<del> </del>			
			<del></del> -

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	· -	Employer identification number
TFOC Incorporated		76-0311550
	nor Advised Funds or Other Similar Ful	nds or Accounts.
Complete if the organization answered "		
<b></b>	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
_	advisors in writing that the assets held in donor adv	vised funds
are the organization's property, subject to the organization		∐ Yes Ϫ No
	and donor advisors in writing that grant funds may be	
	the donor or donor advisor or other impermissible p	
Part II Conservation Easements. Con		30, Part IV, line 7
Purpose(s) of conservation easements held by th	· · · · · · · · · · · · · · · · · · ·	
Preservation of land for public use (e.g., recr	· H	n of an historically important land area
Protection of natural habitat	Preservation	n of certified historic structure
Preservation of open space		
2 Complete lines 2a-2d if the organization held a c	qualified conservation contribution in the form of a co	onservation easement on the last day of the
tax year		F
		Held at the End of the Year
a Total number of conservation easements		2a
<b>b</b> Total acreage restricted by conservation easeme		2b
c Number of conservation easements on a certified		2c
d Number of conservation easements included in (		2d
	insferred, released, extinguished, or terminated by th	ne organization during
the taxable year ▶		
4 Number of states where property subject to cons		
-	rding the periodic monitoring, inspection, reporting c	of violations,
and enforcement of the conservation easements		∐ Yes ∐ No
	inspecting, and enforcing conservation easements	
	ecting, and enforcing conservation easements during	
•	ne 2(d) above satisfy the requirements of section 17	
and section 170(h)(4)(B)(ii)?		∐ Yes ∐ No
	ts conservation easements in its revenue and expen-	
	he organization's financial statements that describes	the organization's accounting for
conservation easements		
Part III Organizations Maintaining Col	·	Other Similar Assets.
Complete if the organization answered "		
1 a If the organization elected, as permitted under S	•	·
	exhibition, education, or research in furtherance of p	bublic service, provide, in Part XIV, the
text of the footnote to its financial statements that	t describes these items	
	FAS 116, to report in its revenue statement and bala	
•	bition, education, or research in furtherance of publi	c service, provide the following amounts
relating to these items	•	
(i) Revenues included in Form 990, Part VIII, lin	e 1 .	<b>&gt;</b> \$
(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
	historical treasures, or other similar assets for financ	ial gain, provide the following amounts
required to be reported under SFAS 116 relating	to these items	
a Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
<b>b</b> Assets included in Form 990, Part X		<b>▶</b> \$

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Schedule D (Form 990) 2009

Pa	rt III Organ	zations Maintaining	Collections of Ar	t, Historical Treasu	ires, or Other Sim	ilar Assets	3
3	<del></del>	n's accession and other	records, check any of the	following that are a sign	nificant use of its collection	n items (chec	k all that
	apply)		•	3		(	
а	Public exhibition			d Loan or exchange	ge programs		
b	Scholarly research	:h		e Other			
С	Preservation for	uture generations					
4	Provide a description	of the organization's coll	ections and explain how	they further the organiza	ition's exempt purpose in	n Part XIV	
5		the organization solicit or					
		than to be maintained as				Yes	☐ No
Pa	rt IV Trust,	Escrow and Custon ed an amount on Form 9	dial Arrangements.		on answered "Yes" to Fo	rm 990, Part	IV, line 9,
1a		n agent, trustee, custodiai		r contributions or other a	assets not included		
	on Form 990, Part X					Yes	☐ No
b	If "Yes," explain the a	rrangement in Part XIV a	nd complete the following	a table			
		_	•			Amou	ınt
С	Beginning balance				1c		
	Additions during the	year			1d		
е	Distributions during t				1e		
f	Ending balance	•			1f		
2a	_	include an amount on Fo	rm 990, Part X, line 21?		LI	Yes	X No
		rrangement in Part XIV					
		ment Funds. Comp	olete if organization answ	ered "Yes" to Form 990,	Part IV, line 10		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year			•			
	balance				<b>.</b>		
b	Contributions				777	1-7-mir	1. 1/7/7/
С	Investment earnings						
	or losses						
d	Grants or scholarships						<del></del>
	Other expenditures						<del></del>
_	for facilities and						
	programs						
f	Administrative					<u></u>	
•	expenses						
a	End of year balance	-				<u> </u>	
_	•	percentage of the year	and halance held as		L	l	
		quasi-endowment >					
	Permanent endowme						
	Term endowment ▶	0.00%					
		t funds not in the posses	sion of the organization th	hat are held and adminis	tored for the organization	n hv [	Yes No
- Ou	(i) unrelated organi		sion of the organization ti	nat are rield and adminis	nered for the organization	3a(i)	163 140
	(ii) related organizat					3a(ii)	
h	•	he related organizations l	istad as required on Sch	odulo P2		3b	
4		the intended uses of the o	· ·			30	
7		ments - Land, Build			Port V. line 10		
L E	Description of		(a) Cost or other	(b) Cost or other	1	( <b>d</b> ) Boo	le value
	pescription (	n mycouncill	basis (investment)	basis (other)	(c) Depreciation	(0) 800	n value
12			· · · · · · · · · · · · · · · · · · ·	Dasis (Other)		40	,000.
	Land			i	F .	. 4U	
	Land		40,000.		10 075		
	Buildings	onts	20,000.	· · · · · · · · · · · · · · · · · · ·	12,375.		,625.
c	Buildings Leasehold improvem	ents	20,000.				
c d	Buildings Leasehold improvem Equipment	ents	20,000. 8,060.		8,060.		
c d e	Buildings Leasehold improvem Equipment Other	ents olumn (d) should equal Fo	8,060. 12,561.	(D) line 10(a)		7	

Part X Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

#### **SCHEDULE G** (Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18,

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization TFOC Incorporated						identification number 311550
Part I Fundraising Activities.	Complete if the oi	ganization ansv	vered "Yes" to Form 990,	Part IV, line 1	7	
1 Indicate whether the organization a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a writte Form 990, Part VII) or entity in coil b If "Yes," list the ten highest paid in at least \$5,000 by the organization	n or oral agreem nnection with pro idividuals or entif	e Solici Solici g Specient with any ind fessional fundra	itation of non-governmer itation of government gra ial fundraising events ividual (including officers iising services? ) pursuant to agreements	nt grants nts , directors, true s under which	stees or key	Yes X No
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund- raiser have custody or control of contributions?	(iv) Gross receipts from activity	(V) Amount retained by)	fundraiser	(vi) Amount paid to (or retained by) organization
		Yes No	_			
	· · · ·					
···	· · · · · · · · · · · · · · · · · · ·					
***						
Total  3 List all states in which the organiz	ation is registere	d or licensed to	solicit funds or has been	notified it is e	xempt from	registration or licensing

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000

			(a) Even			Event #2 S-Texas	(c) Oth	er Events	( <b>d</b> ) To (Add col	tal Even	
			(event ty	/pe)		nt type)	(total	number)		ol (c)	
Revenue	1 2	Gross receipts Less (Charitable contributions)	439,	,373.		72,635.			51	.2,00	8.
	3	Gross revenue (line 1 minus line 2)	439,	,373.		72,635.			51	.2,00	8.
	4	Cash prizes	·····								
uses	5	Non-cash prizes									
Direct Expenses	6	Rent/facility costs									
Direc	7	Food and beverages									
	8	Entertainment		. —							
	9	Other direct expenses		,543.		33,072.	<u> </u>		50	3,61	5.
	10 11	Direct expense summary Net income summary Co		•				<b>&gt;</b>	50	3,61 8,39	
Pa	rt I					orm 990, Part IV, I	ine 19, or rep	orted more than	1 n \$15,000 o		
		line 6a							·		
Revenue	1	Gross revenue	(a) Bin	ngo	1	tabs/Instant ogressive bingo	(c) Oth	ner gaming	(d) Total col (a) th	-	
es	2	Cash prizes				37					
Direct Expenses	3	Non-cash prizes									
Direct	4	Rent/facility costs								<u> </u>	····
	5	Other direct expenses									
	6	Volunteer labor	Yes No	0.0%	Yes No	0.0%	Yes No	0.0 %			
	7   8	Direct expense summary Net gaming income sumi						<b>•</b>			
		ivet garning income sum	riary Combine II	ines i and i i	n column (a)			<u> </u>	ł	Yes	No
9	En	ter the state(s) in which the	e organization of	perates gamır	ng activities					1.00	1
		the organization licensed to	o operate gamin	g activities in	each of these	e states?			9	a	
	b If "	No," Explain									
		ere any of the organization	's gaming license	es revoked, s	uspended or	terminated during	g the tax year	?	10	a	Х
		Yes," Explain								,	
11 12		es the organization operat				er of a partnership	p or other ent	tity formed to		1	Х
	ad	minister charitable gaming	?						1	2	X

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

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Name of the organization TFOC Incorporated	Employer identification number 76-0311550						
Page 6, Part VI, Question 2							
The organizations secretary is the spouse of a b	oard member						
In addition their daugter occasionally works par	t time						
	<del></del>						
	44.00-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-						

US 990 C	Other Functional	Expenses: Page	e 2, Line 43	2009
		Program	Management	<u> </u>
Description of the Asset	Total	Services	and General	Fundraising
Auto Allowance	3,000		3,000.	
Bank Fees	247		247.	
City Concerts	21,896	21,896		
Donations	18,800		.	
Kidzfest	2,923	2,923	.	
Memberships	678		678.	
Miscellaneous	3,110		3,110.	
Parade	10			
Postage	350		350.	4
Rental & Site Supp	ly 12,927			
Scholarships				
	7,500		•	
Supplies	315			l
Telephone	2,312	<del>}</del> -	2,312.	
Utilities	1,449		1,449.	
	75,517	56,615.	18,902.	
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