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793865 12/30/2010 2 32 PM

Department of the Treasury Internal Revenue Service

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)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 2009 Open to Public Inspection

<u>А</u> В	For the 200 Check if applica Address chang	tues IPS			oyer identification number
	Name change	print or Doing Business As		23-	7087285
	Initial return	1 6 1	n/suite E	•	one number
\Box	Termination	Specific 6933 Robertand			-947-8237
		Instruct City or town, state or country, and ZIP + 4 tions. Corpus Christi TX 78414	٩	Gross rece	ipts\$ 29,839
님	Amended return	E News and address of account of the		I/a) la thia	o osove
	Application per	F Name and address of principal officer		affiliate (b) Are all include	affiliates
					attach a list (see instructions)
<u></u>	Tax-exempt	status X 501(c) (5) ◀ (Insert no.) 4947(a)(1) or 527			
J	Website:	vitis-research-and-development-corp.or	Н	I(c) Group	exemption number
K	Type of organi	ration X Corporation Trust Association Other ► L Year of	formation 19		M State of legal domicile TX
F	art I	Summary			
	1 Bne	ly describe the organization's mission or most significant activities:			
FID MAR 0 2 2011 Activities & Governance		The state of the organization discontinued its operations or disposed of more than 25% of	its net assets		
مع مع	3 Num	ber of voting members of the governing body (Part VI, line 1a)		3	5
MA Å ies	4 Num	ber of independent voting members of the governing body (Part VI, line 1b)		4	5
≥ iv	5 Tota	number of employees (Part V, line 2a)		5	0
泛 A	6 Tota	number of volunteers (estimate if necessary)		6	·
*	7a Tota	gross unrelated business revenue from Part VIII, column (C), line 12		7a	
% —	b Net	unrelated business taxable income from Form 990-T, line 34		7b	0
るCMM ドビ Revenue Activi	9 Prog	ributions and grants (Part VIII, line 1h) ram service revenue (Part VIII, line 2g) stment income (Part VIII, column (A), lines 3, 4, and 7d)	Prior Year	,258	Current Year 8 , 735
&		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,509	-28,224
		I revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,767	-19,489
		ts and similar amounts paid (Part IX, column (A), lines 1–3)		,500	10,000
	ı	efits paid to or for members (Part IX, column (A), line 4)			
ø	1	ries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
JS6	1	essional fundraising fees (Part IX, column (A), line 11e)			
sesuedx	1	fundraising expenses (Part IX, column (D), line 25) ▶			
ñ	17 Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	4	,377	1,167
	18 Tota	expenses Add lines 13–17 (must equal Part IX, column (A), line 75 CEIVED		,877	11,167
	19 Reve	enue less expenses. Subtract line 18 from line 12	-70	,644	-30,656
Net Assets or		255ets (Part X line 16)	inning of Currer		End of Year
Sset	20 Tota	assets (Part X, line 16)	622	,787	592,131
et A	21 Tota	liabilities (Part X, line 26)			
		assets or fund balances Subtract line 21 from line 20	622	,787	592,131
F	art II	Signature Block			
Siç		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and state and belief, it is frue, correct, and complete Declaration of preparer (other than officer) is based on all information. **The Including accompanying schedules and state and belief, it is frue, correct, and complete Declaration of preparer (other than officer) is based on all information. **The Including accompanying schedules and state and belief, it is frue, correct, and complete Declaration of preparer (other than officer) is based on all information.		rer has any	
He	ie	Signature of officer Fig. 2.5.5.5.5.6.5.6.5.6.6.6.6.6.6.6.6.6.6.6.	000	Date	
		GORDON L. TOERSTER SECRETARY TREASUR		, P.	<u> </u>
_		Type or print name and title ViTiS RESEARCH		. C'07	·/
Pa Pro	id eparer's	Preparer's signature Carol A. Schmitt, CPA Date 12/30/1	Check if self- employed	×	Preparer's identifying number (see instructions) P00510391
	e Only	Firm's name (or yours Salinas, Allen & Schmitt, L.L.P.		EIN 🕨	74-2517388
		if self-employed), 314 Nolana St		Phone	APA 464 AATA
		address, and ZIP+4 McAllen, TX 78504		no 🕨	956-686-2359

+u	Other program service	es. (Describe in Sch	eaule O.
	(Expenses \$	11,167	ıncludir

ng grants of \$

10,000) (Revenue \$

Total program service expenses

11,167

				Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			163	
	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		<u> </u>		
	Schedule C, Part II		4		
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		_		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		7		
Ü	complete Schedule D, Part III				_~
9	·		8		X
3	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,"		_		.
40	complete Schedule D, Part IV		9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or				٠,,
44	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,			7.	
	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	ĺ			
•	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 related 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				
40	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete				
404	Schedule D, Parts XI, XII, and XIII	' 1	12		X_
12A		Yes No			
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	X		:	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		13		_ <u>x</u> _
14a	Did the organization maintain an office, employees, or agents outside of the United States?		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,				
4-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	,	14b		<u> </u>
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	_	<u> </u>
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services				
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	ļ	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	ļ	18		_X_
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	ļ	19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		20		X
			Form	990	(2009)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	X
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			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			٠,
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
	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	. !		
	to defease any tax-exempt bonds?	24c		
	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	25-		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	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			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	230		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			l
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			.
	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,			x
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		_
JZ	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		-
-	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,			
-	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		L
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		X

F G	Statements Regarding Other IKS Filings and Tax Compliance						
10	Enter the number reported in Poy 2 of Form 1006. Applied Summer, and Transmitted of			ſ		Yes	No
ıa	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		8				
ь	U.S. Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1a					
C		1b					
٠	Did the organization comply with backup withholding rules for reportable payments to vendors and rep gaming (gambling) winnings to prize winners?	ortable			4.		
22] [1c		
La	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	0				
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return	-			25		
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see	15'			2b		
	instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	hv					
	this return?	- Cy		i	3a	ſ	X
b	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 a	ıthority		ľ			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina						
	account)?				4a		x
b	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 B	ank					
	and Financial Accounts						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a	ĺ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transacti	on?		[5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regar	dıng					
	Prohibited Tax Shelter Transaction?				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	;					
	organization solicit any contributions that were not tax deductible?				6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or					
	gifts were not tax deductible?				6b		
7	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 go	ods			- 1		
	and services provided to the payor?			ļ	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	;			_		
	required to file Form 8282?	1 ſ			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pe- benefit contract?	rsonai			1	ŀ	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	42		-	7e 7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	At :		-	7g	-	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as		•	'y		
	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				- 1	l	
	organization, have excess business holdings at any time during the year?				8	Ì	
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	Section 501(c)(7) organizations. Enter				Ī		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			I		
11	Section 501(c)(12) organizations. Enter	, ,					
а	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1		
	amounts due or received from them)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1			ļ	12a	ļ	
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			1		

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	mi 990 (2009) Vitis Research & Developme						age (
₽ŧ	Part VI Governance, Management, and Disclosur						
	for a "No" response to line 8a, 8b, or 10b b	pelow, describe the circumstances,	process	es, or ch	anges	in	
	Schedule O. See instructions.						
Sec	ection A. Governing Body and Management						
				_	·····	Yes	No
1a	, 3 · · · · · · · · · · · · · · · · · ·		1a	5	_		
b	5 · ··································		_1b	5	_		
2	, , , , , , , , , , , , , , , , , , , ,	lationship or a business relationship with					
_	any other officer, director, trustee, or key employee?				2	X	
3	5 5general general and a	-					
	supervision of officers, directors or trustees, or key employees to				3		X
4	, , , , , , , , , , , , , , , , , , , ,	•	s filed?		4		X
5	5	diversion of the organization's assets?			5		X
6	•				6		_X
7a	Fare Park	ons who may elect one or more members			_		v
	of the governing body?	omboro stockholdere er ether er er e			7a	<u> </u>	X
ь 8	,	•			7b	-	
0	Did the organization contemporaneously document the meetings the year by the following:	neid or written actions undertaken during					
а						х	
b		ndu2			8a 8b	X	
9					80	1	
•	at the organization's mailing address? If "Yes," provide the names				9		X
Sec	ection B. Policies (This Section B requests information	* ***	Interna	i	3		
	evenue Code.)	Trabbat ponoico not roquirou by the	moma	•			
						Yes	No
l0a	a Does the organization have local chapters, branches, or affiliates?	>			10a		X
	b If "Yes," does the organization have written policies and procedure				100		
	affiliates, and branches to ensure their operations are consistent v	- · · ·			10b		
1		•					
	form?				11		X
1a	a Describe in Schedule O the process, if any, used by the organizati	ion to review this Form 990					
					12a		X
b	b Are officers, directors or trustees, and key employees required to	disclose annually interests that could give					
	rise to conflicts?				12b		
С	c Does the organization regularly and consistently monitor and enfo	rce compliance with the policy? If "Yes,"					
	describe in Schedule O how this is done				12c		
3	Does the organization have a written whistleblower policy?				13		X
4	Does the organization have a written document retention and dest	truction policy?			14		X
5							
	independent persons, comparability data, and contemporaneous s		7				
а	, ,	official			15a		X
b	, , ,				15b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (S	, , , , , , , , , , , , , , , , , , ,					
6a	, , , , , , , , , , , , , , , , , , , ,	n a joint venture or similar arrangement					
	with a taxable entity during the year?				16a		X
Ь		-					
	its participation in joint venture arrangements under applicable fed						
	the organization's exempt status with respect to such arrangement	ts' ⁷			16b		
	ection C. Disclosure	CL. I. No.					
7	List the states with which a copy of this Form 990 is required to be	filed None					

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: ▶ GORDON L FOERSTER 6933 ROSELAND

TX 78414

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

- 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) Name and Title Average				(chec	C) k ali t	hat a	(vlac	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	or director		Officer	Key employee	Highest compensated employee		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
JAMES H FOERSTER	2.00	x		x				5 000	0	
PRES GORDON L FOERSTER		^		^	-	_		5,000	U	C
S/T	5.00	x		x				5,000	0	C
CHARLES M FOERSTE	R 3.00	x						5,000	0	C
WILLIAM E FOERSTE DIRECTOR		x						5,000	0	0
CAROLYN F LYONS								3,000		
DIRECTOR	4.00	X				_		5,000	0	0
										. —.
								'		
									_	
					_					
					_					<u>. </u>
						<u> </u>			,	

Part	(A) Name and Title	(B) Average hours per	Pos	ition	(chec	C) k all t	hat a	pply)	(D) Reportable compensation	(E) Reportable compensation		(F) stimated mount of		
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	cor or aı	other compensation from the organization and related organizations		
	·		_											
	<u></u> .													
			-											
												_		
	-													
								-						
4					L	<u> </u>		Ļ	25 000					
2 T	otal otal number of individuals (in eportable compensation from	•		d to t	hose	e liste	ed at	oove	25,000 e) who received more than S	•			. , , = -	
	· · · · ·				•				·			Ye	s No	
е	Did the organization list any for imployee on line 1a? If "Yes," For any individual listed on line	complete Sched	ule J	for	such	ındı	vidua	1				3	x	
ti ır	ne organization and related or ndividual	rganizations grea	iter t	han :	\$150	,000)? If "	'Yes	," complete Schedule J for	such		4	x	
	old any person listed on line 1 ervices rendered to the organ											5	x	
1 0	on B. Independent Contractor Complete this table for your five compensation from the organia	e highest compe	nsat	ed ır	ndep	ende	ent co	ontra	actors that received more th	nan \$100,000 of				
		(A) business address							Descrip	(B) tion of services		Compe	nsation	
		_												
		· .										-		
			_			· · · ·		<u> </u>		 				
														
	otal number of independent of						d to t	L	e listed above) who receive	ed			i	
DAA	nore than \$100,000 in comper	isauon irom the	orga	nizai	uon I	_					L	0 Form 9 9	90 (2009	

•		Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaigns	1a					
b	Membership dues	1b					
С	Fundraising events	1c					
d	Related organizations	1d					
e	Government grants (contributions	i) 1e		İ			
f	All other contributions, gifts, grani			l			
	and similar amounts not included	above 1f					
l a	Noncash contributions included in		\$	1			
h	Total. Add lines 1a-1f		· •	1			
1a b c d e f d c d e f G			Busn. Code		*****	-	
2a							
Ь							
c							
ď	•						
e						·	
f	All other program service	e revenue					
٦	Total. Add lines 2a-2f	0.10101100	•			· · · · · · · · · · · · · · · · · · ·	
	Investment income (incl	udına dıvıden					
	other similar amounts)		•	6,235	6,235		
4	Income from investment	of tax-exemi	· -				
5	Royalties	. or an onom	b l		-		
Ĭ) Real	(II) Personal			······································	
6a		,	21,104				
b			49,328				
			-28,224		I		
d d		-c)	20,221	-28,224	-28,224		
	Croce amount from	ecunties	(II) Other	-20,224	-20,224		
	sales of assets		2,500				
L	other than inventory Less cost or other		2,300				
В	basis & sales exps						
_	· · · 		2,500				
	Gain or (loss)		2,500	2 500	2 500		
d	U (,			2,500	2,500		
ва	Gross income from fundraisi	ng events	·		1		
	(not including \$	lor a 4 a)	į				
	of contributions reported on	-	-				
	See Part IV, line 18	a .					
	Less direct expenses	b			1		
	Net income or (loss) from	7	events				-
yа	Gross income from gaming a					-	
	See Part IV, line 19	a					
	Less direct expenses	ÞΙ					
	Net income or (loss) from		ivities				
10a	Gross sales of inventory				1		
	returns and allowances	a			1		
	Less: cost of goods sold	•			1		
<u> </u>	Net income or (loss) from				······································		
	Miscellaneous R	evenue	Busn. Code		1	,	
11a							_
b							
C							
d	All other revenue						
e	Total. Add lines 11a-11	d	•				
12	Total Revenue. See ins	taictions		-19,489	-19,489		

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	(D) Fundraising
7b	8b, 9b, and 10b of Part VIII.	Total expenses	expenses_	Management and general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	10,000	10,000		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroli taxes				
11	Fees for services (non-employees).				
a	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology			-,	
15	Royalties				<u> </u>
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,167	1,167		
23	Insurance				
			· · · · · ·		
24	Other expenses. Itemize expenses not		1		
	covered above. (Expenses grouped together		1		
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а				·	
b					
С					
d					
6				- -	
f	All other expenses	11 16	11 1 2	••	
25	Total functional expenses. Add lines 1 through 24f	11,167	11,167		
26	Joint costs. Check here ▶ if following SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
DAA	fundraising solicitation				Form 990 (2009)
					. 5.111 555 (2003)

art :	•	(A)		(B)
Τ.		Beginning of year		End of year
1	Cash—non-interest bearing	201,721	1	172,232
2	Savings and temporary cash investments	201,721	2	1/2,23
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		- 1	
1	employees, and highest compensated employees Complete Part II of			
	Schedule L		5	
6	Receivables from other disqualified persons (as defined under section			
1	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
. [Part II of Schedule L		6	
7 8	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or			
	other basis Complete Part VI of Schedule D 10a 425, 4	11		
t	Less: accumulated depreciation 10b 5,5	44 421,034	10c	419,86
11	Investments—publicly traded securities		11	
12	Investments—other securities See Part IV, line 11	32	12	3
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	622,787	16	592,13
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified			
	persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	·	23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25		26	
	Organizations that follow SFAS 117, check here ▶ and			
27 28	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	•	27	
28	Temporanly restricted net assets		28	
29	Permanently restricted net assets		29	
29	Organizations that do not follow SFAS 117, check here ▶ X			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
30 31 32	Retained earnings, endowment, accumulated income, or other funds	622,787	32	592,13
33	Total net assets or fund balances	622,787	33	592,13
34	Total liabilities and net assets/fund balances	622,787	34	592,13

Form **990** (2009)

Form	990(2009) Vitis Research & Development Corp. 23-7087285		P <u>ag</u>	ge 1 <u>2</u>
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
C	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		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O		. 1	
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	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			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990	(2009)

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.

2009
Open to Public Inspection

Name of the organization Employer identification number Vitis Research & Development Corp. 23-7087285 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (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) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 Vitis Res	<u>earch & Deve.</u>	<u>lopment Co</u>	rp.	<u> 23-70</u>	<u> </u>	Page 2
Pa	rt III 'Organizations Maintaining	Collections of Art,	Historical Trea	sures,	or Other	Similar Asse	ets (continued)
3	Using the organization's acquisition, accessio collection items (check all that apply):	n, and other records, che	ck any of the follow	ng that ar	e a significa	nt use of its	
а	Public exhibition	d 🗌 Loan	or exchange progra	ıms			
b	Scholarly research	e Other	•				
С	Preservation for future generations						_
4	Provide a description of the organization's col Part XIV.	lections and explain how	they further the orga	anization's	s exempt pu	rpose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of art, l	historical treasures, the organization's co	or other s	sımılar		☐ Yes ☐ No
Pa	TESCROW and Custodial Arra IV, line 9, or reported an an	angements. Comple	te if the organiz	zation a		"Yes" to For	
12	Is the organization an agent, trustee, custodia				c not		
ıa	included on Form 990, Part X?	in or other intermediary to	Contributions of ou	iler asset	5 1101		□ vaa □ Na
_							☐ Yes ☐ No
D	If "Yes," explain the arrangement in Part XIV a	and complete the following	table			L	
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?					Yes No
b	If "Yes," explain the arrangement in Part XIV						
Pa	rt V Endowment Funds. Compl	ete if organization a	nswered "Yes"	to Forr	n 990, Pa	rt IV, line 10	
	•	(a) Current year	(b) Pnor year	(c) Tw	o years back	(d) Three years	back (e) Four years back
1a	Beginning of year balance		· · · ·		•		
	Contributions			<u> </u>	***************************************	1	
c	Net investment earnings, gains,		-		••••		
-	and losses					‡	
а	Grants or scholarships					†	
	Other expenditures for facilities			 		<u> </u>	
٠	·	1				ļ	
	and programs			-			
T	Administrative expenses						
g	End of year balance					ł	
2	Provide the estimated percentage of the year						
	Board designated or quasi-endowment ▶	%					
	Permanent endowment ▶ %						
C	Term endowment ▶ %						
3a	Are there endowment funds not in the possess	sion of the organization th	at are held and adm	nınıstered	for the		
	organization by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(II), are the related organizations	listed as required on Scho	edule R?				3b
4	Describe in Part XIV the intended uses of the	· · · · · · · · · · · · · · · · · · ·					
Pa	rt VI Investments—Land, Buildi			0. Part	X. line 10).	······································
	Description of investment	(a) Cost or other basis	(b) Cost or o			cumulated	(d) Book value
	Decemples of investment	(investment)	basis (other		1	reciation	(d) Book value
1-	Land	(3,116	<u> </u>	,	A10 114
	Land		+10	,,110	 		418,116
	Buildings			··	 		
	Leasehold improvements				 		
	Equipment	ļ	 		ļ		
	Other	<u> </u>		7,295	1	5,544	1,751
otal.	Add lines 1a through 1e. (Column (d) must eq	jual Form 990, Part X, col	umn (B), line 10(c)))		▶	419,867

Schedule D (Form 990) 2009 VICIS Research & Deve		23-7087285	Page 3
Part VII Investments—Other Securities. See Form 9	<u> </u>		
(a) Description of security or category	(b) Book value	(c) Method of value	
(including name of security)		Cost or end-of-year m	arket value
Financial derivatives			
Closely-held equity interests			
Other			
	-		
	-		
	-		
	<u> </u>		
	<u> </u>		
	-		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 9			-
(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year marks	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 15.	·		
(a) Description			(b) Book value
	· · · · · · · · · · · · · · · · · · ·		
·			

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)			
Part X Other Liabilities. See Form 990, Part X, line		<u> </u>	
1 (a) Description of liability	(b) Amount	4	
Federal income taxes		4	
		4	
		4	
		4	
		1	
		1	
		1	
		<u>'</u>	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the orga	anization's financial statemen	ts that reports the	
organization's liability for uncertain tax positions under FIN 48			

	edule D (Form 990) 2009 Vitis Research & Develop		-7087285	Page 4
P	art XI Reconciliation of Change in Net Assets from Form	<u>1990 to Audited Financi</u>	al Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine line		10	
_Pa	art XII Reconciliation of Revenue per Audited Financial S	Statements With Revenu	ie per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	_4b		
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5	
	art XIII Reconciliation of Expenses per Audited Financial	Statements With Expen	ses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1		
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
ď	Other (Describe in Part XIV.)	2d		
9	Add lines 2a through 2d		2e	
3 4	Subtract line 2e from line 1	1 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.)	4a		
		4b		
c	Add lines 4a and 4b	<u> </u>	4c	
с 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 1	<u> </u>	4c 5	
c 5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1set XIV Supplemental Information	8)	5	
c 5 Pa Comp	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	
5 Pa Comp and 2	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1st XIV Supplemental Information plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; I 2b; Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Pa	8)	5 Ines 1b	

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

Vitis Research & Development Corp.

Employer identification number 23-7087285

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1545-004	30	
MB No	20	٦
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			Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(h) Purpose of grant or assistance									
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	ဗ	ection	் நோ ஜ	(a) Name and address of organization or government									100
		Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	=										Enter total number of section 501/c)/3) and government organizations
	Parti	- 2 Q#Q	Part II	_								•	
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Schedule I (Form 990) 2009

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

3 Enter total number of other organizations

Schedule I (Form 990) 2009 Vitis Research & Development Corp. 23-7087285

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22:
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Pagé 2

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	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Part IV	Supplemental Information. Complete this part to provide the information required in Part I. line 2. and any other additional information.	omplete this part to p	provide the informatic	on required in Part I. I	ine 2. and any other addition	onal information.

Schedule I (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury

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.

OMB No 1545-0047
2009
Open to Public

Inspection

Internal Revenue Service
Name of the organization

Vitis Research & Development Corp.

Employer identification number

23-7087285

Form 990, Part III, Line 4d - All Other Achievements
TO FURTHER AGRI, HORT, VITICULTURAL EXPERIMENTATION

Form 990, Part VI, Line 2 - Related Party Information Among Officers

JAMES H FOERSTER

GORDON L FOERSTER

PRES

S/T

FAMILY RELATIONSHIP

CHARLES M FOERSTER

WILLIAM E FOERSTER

DIRECTOR

DIRECTOR

FAMILY RELATIONSHIP

CAROLYN F LYONS

JAMES H FOERSTER

DIRECTOR

PRES

FAMILY RELATIONSHIP

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form **4562**

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return

OMB No 1545-0172

2009

Attachment 67

Identifying number

Vitis Research & Development Corp. 23-7087285 Business or activity to which this form relates Indirect Depreciation Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 250,000 Maximum amount. See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800,000 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 5 (a) Description of property (c) Elected cost 6 (b) Cost (business use only) 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions. Part III Section A 1,167 MACRS deductions for assets placed in service in tax years beginning before 2009 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property g 25-year property 25 yrs. S/L h Residential rental 27 5 yrs. S/L MM property MM 27 5 yrs S/L MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L c 40-year MM S/L 40 vrs Part IV Summary (See instructions.) Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions 1,167 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

FYE: 9/30/2010

793865 Vitis Research & Development Corp.
23-7087285 Federal Asset Report Form 990, Page 1

12/30/2010 2:09 PM

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
3	MACRS: PRINTER Sold/Scrapped 9/10/10 FARM EQUIPMENT Sold/Scrapped: 9/10/10	3/30/02	196 2,056	X	196 1,439	5 HY 200DB	196 2,056	0
5 6 7	TOYOTA Sold/Scrapped. 12/09/09 COMPUTER COMPUTER COMPUTER	2/15/09 2/27/09 3/20/09	23,140 3,319 2,346 1,630	X X X X	16,198 1,659 1,173 815		23,140 1,991 1,408 978	531 375 261
Other l	Depreciation: COMPUTER Sold/Source to 0/20/10	8/30/98	1,390	,	21,480 1,390		1,390	1,167
	Sold/Scrapped: 9/30/10 Total Other Depreciation	-	1,390		1,390		1,390	0
	Total ACRS and Other Deprec	iation =	1,390 34,077		1,390 22,870		1,390 31,159	1,167
	Less: Dispositions and Transfer Less: Start-up/Org Expense Net Grand Totals	rs - -	26,782 0 7,295		19,223 0 3,647		26,782 0 4,377	1,167

793865 Vitis Research & Development Corp.
23-7087285 Bonus Depreciation Report

12/30/2010 2:09 PM

FYE: 9/30/2010

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: F	orm 990, Page 1							
4 TOY 5 CON 6 CON	NPUTER NPUTER NPUTER	3/30/02 11/29/01 2/15/09 2/27/09 3/20/09 orm 990, Page 1	2,056 23,140 3,319 2,346 1,630 32,491		0 0 0 0 0 0	0 0 0 0 0	617 6,942 1,660 1,173 815	1,439 16,198 1,659 1,173 815
	*Less: Disposition		25,196		0	0	7,559	21,284 17,637
	Net Fo	orm 990, Page 1	7,295	:	0	0	3,648	3,647
	Less: Disposition	Grand Total s and Transfers	32,491 25,196		0 0	0	11,207 7,559	21,284 17,637
	N	et Grand Total	7,295		0	0	3,648	3,647