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# Form **990-PF**

## **Return of Private Foundation**

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

OMB No 1545-0052

		the freasury te Service	N	l <mark>ote</mark> . The fou	indation may l	e able to use a co	py of this	return to sati	sfy state repo	rtıng requ	urements.		1	
oro	alenda	r year 2009,	or tax yea	r beginning	OCT	1, 2009		, and e	nding	SEP	30, 20	10		
ì C	heck all	that apply:		Initial retur		Initial retu	irn of a fo	ormer public o	harity	Name ch	Final re	turn		
Use	the IRS	Name of fo	undation		<u> </u>			9		·	oyer identifica	ition nu	ımber	
	abel. erwise,	ARCHII	BALD	MEMOR	IAL HO	ME INC				35	-08742	60		
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	Specific uctions	I LIDV DI HIWI		nd ZIP code IN 4	6224-3	043				D 1 For	ption application	lions, c	heck here	
<u> </u>	٠, ,	oe of organiza			• • • • • • • • • • • • • • • • • • • •	empt private found				2 For	eign organization ick here and attai	s meetir ch comp	ng the 85% test, utation	
<u> </u>		on <u>4</u> 947(a)(1)				Other taxable priva	_	$\overline{}$		E If priv	ate foundation	status	was terminate	ed
		et value of all		end of year	J Account	_	Cash	Accr	ual	under	section 507(t	)(1)(A	), check here	<b>▶</b> L
		t II, col (c),	•			her (specify)		h = = = 1					month termina	ation
De		nalysis of Re		<u> 12334.</u>		mn (d) must be d					section 507(t	)(1)(B		
Pa	n n	The total of amore ecessarily equal	unts in colui I the amoun	mns (b), (c), an ts in column (a	id (d) may not a))	(a) Revenue expenses per	books	(b) Net in	vestment ome	(c)	Adjusted net income		(d) Disburse for charitable p (cash basis	urposes
		intributions, g					372.			ļ				
	- Inte	eck X if			o attach Sch B	1	701		1701	<del> </del>	170	1		<del></del>
	3 cas	sh investments					701.		1701.		170	<del>-</del> - ├		
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		t rental income	or (lose)	7	4400.	/ 4	<del>1</del> 00•		<u>, 4400 •</u>	<del> </del>	/ 440	<u>v . p</u>	<u>cacemen</u>	I
	_	t gain or (loss) fi	_	, , , , , , , , , , , , , , , , , , , ,										
nge	. Gro	oss sales price l sets on line 6a				<del></del>		<del></del>		<del></del>	a		***	
Revenue		pital gain net ini	come (from	Part IV, line 2)					0.					
Œ	8 Ne	t short-term (	capital gai	n						·				
		come modific												
	10a and	oss sales less re d allowances	eturns											
		ss Cost of good	•											<del></del>
		oss profit or (	(loss)			10	272		11000	-	1007	2 0	L - L	2
		her income	. 1 th.a	h 44			272. 745.		11082. 87183.		8837		<u>tatemer</u>	nt Z
_		otal Add lines		•		00	7 <del>4</del> 5.		<u>0/103.</u> 0.			0.		0
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Expense	c Ot	her professio	nal fees											
ive	<b>17</b> Int	terest	-								_			
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atin	21 Tra 22 Pr 23 Ot 24 To	tapean	EAN adm	inistrative			<u></u>					<del>  </del>		
Operating and	ex	penses. Add	lines 13 t	hrough 23		83	963.		0.		869	4.		0
ō		ontributions, (		-			450.							450
		ital expenses												
_		id lines 24 an			<del></del>	84	413.		0.		869	4.		450
	<b>27</b> Su	ubtract line 26	from line	: 12:		_								
		cess of revenue				4	332.		07100	1	<del></del> .			
		et investment							<u>87183.</u>		70.67	+	<del></del>	
	C Ad	<u>ljusted net in</u>	come (if n	egative, enter	-0-)	l <u> </u>		<u> </u>		L	7967	<u>ا • و</u>		

35-0874260

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Form **990-PF** (2009)

ARCHIBALD MEMORIAL HOME INC

Form 990-PF (2009)

Part IV   Capital Gains and Losses for Tax on Investment Income  (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					` P	How a - Puro - Don		(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a	_									
b NOI	NE									
C				· · · · · · · · · · · · · · · · · · ·						
_d					ļ					
<u>e</u>					L.,					
(e) Gross sales price		eciation allowed allowable)		st or other basis expense of sale					Gain or (loss is (f) minus	
a										
<u>b</u>										
	- <u>-</u> .						<del></del>			<del></del>
_d	<del></del>									
Complete only for assets showin	o dain in coliii	l hy pour owned by t	he foundation	on 12/31/60				(I) Coino (	Cal (b) gain	minus
Complete only for assets shown						(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or				
(i) F.M.V. as of 12/31/69	(i) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) as of 12/31/69 over col. (j), if any							Losses	s (from col. (	h))
a				· (/// )						
b										<del></del>
C										
d										
e						-				
2 Capital gain net income or (net car	nital loce)	If gain, also enter	in Part I, line	7	}	2				
, , ,	,	•		1	7					
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, or 15 (loss) enter 0, in Part I, line 8		n sections 1222(5) an	d (6):		}					
If (loss), enter -0- in Part I, line 8  Part V Qualification U	nder Sect	ion 4940(e) for	Reduced	Tay on Net	· Inv	estr	nent In	come		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation does not quality.  The Enter the appropriate amount in expressions are sections.	ion 4942 tax o	on 4940(e). Do not co	mplete this pa	ırt.						Yes X No
(a)		(b)		Thanking any onan	(c)					(d)
Base periód years Calendar year (or tax year beginnir	na in) A	djusted qualifying dist	ributions	Net value of no			-use asset	s	Distribution ratio (col. (b) divided by col. (c)	
2008	19 111/		1043.					0.	(001. (0) 01.	.00000
2007			0.			_		0.		.000000
2006			0.					0.		.000000
2005			79481.					0.		.000000
2004			0.					0.		.000000
2 Total of line 1, column (d)								2		.000000
3 Average distribution ratio for the 5	5-year base pe	riod - divide the total o	n line 2 by 5,	or by the number	of ye	ars			İ	
the foundation has been in exister	nce if less than	5 years						3		.000000
4 Enter the net value of noncharitab	le-use assets	for 2009 from Part X, I	ine 5					4		
		·								
5 Multiply line 4 by line 3								5		0.
6 Enter 1% of net investment incom	e (1% of Part	l, line 27b)						6		872.
7 Add lines 5 and 6								7	ļ	872.
8 Enter qualifying distributions from	Part XII, line	4						8_		450.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check	the box in Part VI, line	1b, and comp	olete that part usin	ng a 1	% tax	rate.			

	•			
For	· n 990-PF (2009) ARCHIBALD MEMORIAL HOME INC 35-087	426N		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			
18	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		-	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
ı	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		17	44.
	of Part I, line 27b			
(	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		17	44.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		17	44.
6	Credits/Payments:			
á	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 932.			
t	Exempt foreign organizations - tax withheld at source			
(	Tax paid with application for extension of time to file (Form 8868)			
(	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d		9	<u>32.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		8	12.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Troining to the state of the st			
Pá	art VII-A   Statements Regarding Activities	<del></del>		
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	10		X
(	1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
_	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities.			
3				
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
	o If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b		77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_ 5		<u> X</u>
e	If "Yes," attach the statement required by General Instruction T.  Are the requirements of coston 50%(a) (relating to costons 4041 through 4045) estimated eithers.			
6				
	By language in the governing instrument, or      By state legislation that offertively among the appearance partitions that as mondatory diseases that conflict with the etate legislation.			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	_	v	İ
7	remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year?	7	<u>X</u> X	<del> </del>
'	If "Yes," complete Part II, col (c), and Part XV.			<u> </u>
Ω.	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
0.0	IN			
	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	0.	х	
9		8b		
3	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		y
10	Did any persons become substantial contributors during the tax year? If "yes " attach a schedule listing their names and addresses	10		X

orm	m 990-PF (2009) ARCHIBALD MEMORIAL HOME INC	35-0874	1260	Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	X
12	2 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?		12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X
	Website address ► <u>N/A</u>			
14	The books are in care of ► <u>STEVEN STULTZ</u> Telephon			
	Located at ► 6008 HOLLISTER DRIVE, SPEEDWAY, IN	ZIP+4 <b>▶4</b> 6	<u> 5224 -</u>	3043
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	<u> N/</u>	<u>A</u>
Pε	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Y	es No
1a	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?	Yes X No	1	
	(6) Agree to pay money or property to a government official? (Exception Check "No"		1 1	
	ıf the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	Yes X No		
b	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/ <u>A</u>	1b	
	Organizations relying on a current notice regarding disaster assistance check here			
C	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correct	ed		
	before the first day of the tax year beginning in 2009?		10	X
2	? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating found	lation		
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) be	<del>-</del>		
	before 2009?	Yes X No		
	If "Yes," list the years >,,,			
b	<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to inc			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and			ļ
	statement - see instructions.)	N/A	2b	
C	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	Yes X No		
b	b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified person			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sched			
	Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3ь	
	la Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	<u>X</u> _
b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable p	urpose that		
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		I 4h I	ΙX

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Part VII-B   Statements Regarding Activities for Which I		Dominad ( )	<u>35-08742</u>	60 Page 6
	orm 4/20 May be r	required (contin	ued)	<del></del>
5a During the year did the foundation pay or incur any amount to:		<u></u>	(T.)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		es X No	
(2) Influence the outcome of any specific public election (see section 4955); o	ir to carry on, directly or indire			
any voter registration drive?	•		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		L Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section	<u></u>	( <del>.</del>	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t		[ <del>1</del> 2]	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	· ·	in Regulations	37/3	5.
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			l	
expenditure responsibility for the grant?		I/A L Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 494	• •			
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	(TT)	
a personal benefit contract?		Ye	es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribute				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higniy	<b>y</b>	
List all officers, directors, trustees, foundation managers and their	compensation			
. List all silicology and otter of a discoord, real real managers and a real	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other allowances
	to position	enter -0-)	compensation	allowarices
See Statement 10		0.	0.	0.
Dee Deacement 10		0.	<u> </u>	<del>                                     </del>
				<del> </del>
· · · · · · · · · · · · · · · · · · ·				
				1
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		1
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	devoted to position		compensation	dilowalices
NONE				
		<u> </u>		
		<del> </del>		
		<del> </del>		<del> </del>
Total number of other employees paid over \$50,000		·		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
7.1		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the	Expenses
1 THE ORGANIZATION SUPPORTS AND PROVIDES MONETAR		· ·
DEAF AND AGING RESIDENTS LIVING AT A LOCAL RET		
COMMINITARY	INDIANI	84413.
2		
3		
4		
D. IV D. C.	<u> </u>	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 <u>N/A</u>		
0		<del> </del>
2		
All other program-related investments. See instructions.		
3		
<u> </u>		
*		
Total. Add lines 1 through 3	<b>•</b>	0.

0 . Form **990-PF** (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6_	Minimum investment return Enter 5% of line 5	6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1744 <u>.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	450. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	450.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	450.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2009			_	
a Enter amount for 2008 only			0.	· · · · · · · · · · · · · · · · · · ·
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2009:		0.	· · · · · · · · · · · · · · · · · · ·	
a From 2004 22538.				
b From 2005 80000.				
c From 2006 750.				
d From 2007 2100.				
e From 2008 1975.				
f Total of lines 3a through e	107363.			
4 Qualifying distributions for 2009 from	2075051			
Part XII, line 4: ►\$ 450.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	· · <del>- · ·</del> · · ·		<u> </u>	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	0.			0.
e Remaining amount distributed out of corpus	450.			<u> </u>
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	•			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	107813.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	22538.	·		
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	85275.			
0 Analysis of line 9:				
a Excess from 2005 80000.				
b Excess from 2006 750.				
c Excess from 2007 2100.				
d Excess from 2008 1975.	ļ			
e Excess from 2009 450.				

	ALD MEMORIAL				374260 Page 10
Part XIV Private Operating I	<del></del>		I-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for		<del>-</del>	▶ └		
b Check box to indicate whether the four		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0000	Prior 3 years	40,0000	4.1
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for		ļ			
each year listed				<u> </u>	
<b>b</b> 85% of line 2a				_	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter:					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying</li></ul>					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities learns (securities)	:				
512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					_
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w year (but only if they have contributed			ributions received by th	e foundation before the cl	ose of any tax
None					
b List any managers of the foundation w other entity) of which the foundation has	no own 10% or more of thas a 10% or greater intere	ne stock of a corporation st.	(or an equally large port	tion of the ownership of a	partnership or
None					
2 Information Regarding Contribut Check here  if the foundation the foundation makes gifts greate etc.	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.				complete items 2a, b, c, ar	10 O.
a The name, address, and telephone nur	iber of the person to who	m applications should be	addressed.		
b The form in which applications should	be submitted and informa	tion and materials they s	nould include:		
c Any submission deadlines:				·	<del></del>
d Any restrictions or limitations on	lo quab as by assessed	al areas should be to the	lundo of instal 4	ather feet	<del></del>
d Any restrictions or limitations on award	is, such as by geographic	ai areas, charitadie fields,	KINGS OF INSTITUTIONS, OF	omer factors.	

3 Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  None	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Total			<b>▶</b> 3a	0.
b Approved for future payment  None				
Total			<b>▶</b> 3b	0.

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

Enter gross amounts unless otherwise indicated.		business income		ed by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
<u>a</u>	-	·				
b	1 1			•		
<u> </u>	1 1					
d						
e	· <del>  -</del>		<del>  </del>			
g Fees and contracts from government agencies		<del></del> .				
Membership dues and assessments		1190.				
3 Interest on savings and temporary cash		1170.	<del>                                     </del>			
investments					1701.	
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:					<del>.</del>	
a Debt-financed property					74400.	
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income					11082.	
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue:						
a						
b						
c						
d			<u> </u>			
e		1100			0.71.00	
2 Subtotal. Add columns (b), (d), and (e)		1190.		0.		
3 Total Add line 12, columns (b), (d), and (e)				13	88373.	
See worksheet in line 13 instructions to verify calculations.)	-					
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	æmpt	Purposes		
Line No. Explain below how each activity for which inc	ome is reported in	column (a) of Part XVI-A	contribi	ited importantly to the accom	nlichment of	
the foundation's exempt purposes (other than			COMMIND	neu importantiy to the accom	piistiment oi	
and realisation o exempt purposes (exiter that	r by providing land	40 101 00011 parpoocoj.				
		•				
			<del></del>		<del></del>	
					<del></del>	
	-					
	<del> </del>					
				· · · · · · · · · · · · · · · · · · ·		
<del></del>						

For	· m 990-l	PF (2009) <b>ARCHI</b>	BALD MEMORIA	AL HOME INC				35-	0874260	Pa	ae 13
$\overline{}$	art X	Information R	egarding Transfer	s To and Transaction	s an	d Relatio	nships W				.go 10
		Exempt Organ								\ <u></u>	
1				following with any other organi			section 501(c)	of		Yes	NO
				ction 527, relating to political or	rganıza	ations?					
а		ifers from the reporting found	ation to a noncharitable ex	empt organization of:					1		77
	(1) (								1a(1)		X
		Other assets							1a(2)		Х
b		transactions:	<b></b> .						4,44,		₹.
		Sales of assets to a noncharita							1b(1)		X
		Purchases of assets from a no		zauon					1b(2)	_	X
		Rental of facilities, equipment,							1b(3):		X
		Reimbursement arrangements	,						1b(4)		X
		oans or loan guarantees. Performance of services or me	ambarahin ar fundraisina s	olinitationa					1b(5)		X
C		ng of facilities, equipment, ma	· · · · · · · · · · · · · · · · · · ·						1b(6)		X
d			_	ng schedule. Column ( <b>b)</b> shoul	d alwa	ve chow the f	air market valu	ia of the c		ate	- 22
u				n received less than fair market						cis,	
		nn (d) the value of the goods,			Value	in any transac	Alon or snaring	y arrange	mont, anow in		
(a)	Line no	(b) Amount involved	<del>,</del>	haritable exempt organization		(d) Descri	otion of transfers	transactic	ons, and sharing arr	anceme	nts
<u>· · ·</u>			<del></del>	N/A		, , , , , , , , ,			<u> </u>		
_			•	.,							
				<u>.</u>							
				<del></del>				-			
								<del></del>			
				•							
_								•		•	
_											
2 a	ın sed	foundation directly or indirection 501(c) of the Code (othe s," complete the following sch	r than section 501(c)(3)) o	to, one or more tax-exempt or r in section 527?	ganıza	tions describe	ed .		Yes	X	No
		(a) Name of or		(b) Type of organizati	on		(c) Descrip	otion of re	elationship		
		N/A									
_											
				ding accompanying schedules and st based on all information of which prej		as any knowledg		dge and be	elief, it is true, corre	ct,	
ere	S	gnature of officer or trustee		Øate		Title					
Sign Here	<b>(</b> 0	Preparer's	7		Dat	te	Check if		Preparer's identify	ying nun	nber
Sig	aid arer's Only	signature	las date		01	/13/11	self- employed	<b>■</b> X	P00807	<u>718</u>	
	Paid Preparer Use Only	Firm's name (or yours LENT	S ACCOUNTING	3			EIN ▶	35-	1897899		
	Prep S	if self-employed),	W MAIN ST -	PO BOX 361				,		2.2	40

Form **990-PF** (2009)

(765)522-3348

Phone no.

Film's name (or yours defi-employed).

1 Self-employed).

Address, and ZIP code

BAINBRIDGE, IN 46105

2009 DEPRECIATION AND AMORTIZATION REPORT FORm  $990-\mathrm{PF}$  Page 1

990-PF

Asset No	Description	Date Acquired Me	Method	Life   Nc	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
7	LAND - 80 ACRES	100111L				16000.			16000.			0
- 17	2LAND - 25 ACRES	100116L			. <u>.</u>	5000.			5000.			0
<del>- E</del>	LAND - 242 ACRES	100127L				63404.			63404.	·		0
4	4LAND IMP - DRAINAGE	DRAINAGE100184SL		15.0016		1219.			1219.	1219.		0
-13	5LAND IMP - DRAINAGE	DRAINAGE100185SL		5.0016		2560.			2560.	2560.		0
-6	6LAND IMP - DRAINAGE	DRAINAGE100194SL	<u>l</u>	5.0016	10	.899			.899	668.		0
7	LAND IMP - TREES	100101	•	.000 16		5240.			5240.			0
쎲		100102		.000 16		5005.			5005			0
<del>18.</del>	IMP - KGROUND	ELECTRI100103SL	<u> </u>	5.0016		7828.			7828.	3393.		522.
1 <del>111</del>	- R	100104SL		5.0016		5775.			5775.	2118.		385.
<del>       </del>	1	100157SL		31.5017		.0066			.0066	.0066		0
<del>- 27</del>	ı	100169SL		31.5017		19900.			19900.	19900.		0
<del>- ਲ</del>	I	SL	<u> </u>	1.5017		2000.			2000.	2000.		0
1.44.	- 5NTO	SL		31.5017		4300.			4300.	4300.		0
اري ايج	IMP - 3 HOUSE	100192SL		5.0016		2835.			2835.	2835.		0
<del>-1 62 1</del>	IMP FLES	100192SL		5.0016		947.			947.	947.		0
175 175	IMF - KOOF	100193SL		5.0016		1970.			1970.	1970.	-	0
19-	BLDG IMP – NEW DOOR – WHITE HOUSE	100199SL		5.0016		214.			214.	149.		14.

928102 06-24-09

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

# 2009 DEPRECIATION AND AMORTIZATION REPORT FORM $990-\mathrm{PF}$ Page 1

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Date Acquired	Method	Life	No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
YEL100199SL 15	2	.001	91	2128.	-	_	2128.	1490.		142
YELLO100100SL 15	L)	5.001	91	11195.			11195.	7089.		746.
100100SL 15.0	5	00	91	3800.			3800	2405.		253.
100101SL 15.	υ.	00	91	1650.	-		1650.	935.		110.
REPLACEME100102SL 15.	5	00	91	12380.			12380.	6189.	•	825.
ROOFING/SIDING100103SL 15.		00	91	23130.			23130.	10023.		1542.
00103SL 15.0		00	91	16430.			16430.	7118.		1095.
4SL 15.0	2	001	91	498			498.	182.		33.
2SL 5.00	.00	<del></del>	91	304.			304.	304.		0.
2SL 7.00	0.	0	91	157.			157.	157.		0.
00195SL 7.00	0.	0 	9 7	5000.			5000.	5000.		0.
YELL100195SL 7.00	0.	_ <del></del> _	9 7	596.			596.	596.		0.
100195SL 7.00	0.	0 1	91	220.			220.	220.		0.
100196SL 7.00	0	0	91	199.			199.	199.		0
3SL 7.00	0.	<u> </u>	9 1	170.			170.	157.		13.
3SL 7.00	0	0	9 7	311.			311.	287.		24.
100103SL 3.00	0.	0		167.			167.	167.		0
BLA100104SL 7.00	•	0 1	91	2687.		-	2687.	2112.		384.

928102 06-24-09

(D) - Asset disposed

\*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

# 2009 DEPRECIATION AND AMORTIZATION REPORT FORm $990-\mathrm{PF}$ Page 1

990-PF

Date Acquired Me	≊	Method	Life	Se	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
MOWER 100104SL 7.00 16	7.00 1	<u>Т</u>			290.			290.	226.		41.
	5.00 1	.00	16		250.			250.	250.		0
100197SL 10.0016	10.001	믕	16		290.			290.	290.		0
100197SL 5.00 16	5.00 1	.00			306.			306.	306.	·	0
100197SL 5.00 16	5.00 1				229.			229.	229.		0
WALKER 100198SL 5.00 16	5.00 1	.00			469.			469.	469.		0
100100SL 5.00 16	5.00 1				140.			140.	140.		0.
COULER, RACA, 100102SL 5.00 16	5.00 1				253.			253.	253.		0
E350 MINIBUS 100100SL 7.00 16	7.00 1				44800.			44800.	44800.		0
050106 .000 16	000	000			4057.			4057.			0
60FLOOR/SIDEWALK 030106SL 15.0016	15.001	믕	16		3103.			3103.	742.		207.
	7.00 1				975.			975.	510.		139.
66SPRAY TANK ON WHEEL030107SL 7.00 16	7.00 1				750.			750.	277.	. –	107.
RIDING MOWER 030107SL 7.00 16	7.00 1				6100.			6100.	2250.		871.
030107SL 5.00 16	5.00 1				300.			300.	155.		.09
070107SL 7.00 16	7.00 1				329.		·	329.	106.		47.
010108SL 5.00 16	5.00 1				759.			759.	266.		152.
030108SL 7.00 16	7.00 1	-4	16	Į.	437.		:	437.	98.		62.

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF Page 1

990-PF

Current Year Deduction	389.	71.	389.	71.	0	8694.	
Current Sec 179						0	
Accumulated Depreciation	421.	77.	389.	71.		148914.	
Basis For Depreciation	5837.	200	5837.	500.	1719.	314017.	
Reduction In Basis						0	
Bus % Excl							
Unadjusted Cost Or Basis	5837.	500.	5837.	500.	1719.	314017.	
Š o Š	16	16	16	16	16		
Life	15.0016	7.00	15.0016	7.00	000.		
Method					<del></del>	•	
Date Acquired	090108SL	090108SL	100108SL	100108SL	050110		
Description	ELECTRIC FURA - YELLOW HOUS	WALER REALER - YELLOW HOUSE	EDECTRIC FURANCE/AC - WHITE HOUSE	WAIEK HEAIEK - 75WHITE HOUSE	7	iotai 330-ff fg epr	
Asset No	72	73	74	75	16		

(D) Asset disposed

928 102 06-24-09

To Form 990-PF, Pg 1, ln 16b 250.

Form 990-PF	Rental	Ind	come	·····	Sta	atement	1
Kind and Location of Property	,			Activity Number	Rei	Gross	ome
				1		744	00.
Total to Form 990-PF, Part I,	line 5a					744	00.
Form 990-PF	Other	· Iı	ncome		Sta	atement	2
Description		]	(a) Revenue Per Books	(b) Net Invest- ment Income		(c) Adjusted Net Incom	
PICNIC PROCEEDS WINTER STORAGE FEES HORIZON WIND AGREEMENT WHEELCHAIR RENTAL FEE Membership Dues and Assessmen	ıts		282. 100. 10650. 50. 1190.	282 100 10650 50	•	106! 106!	82. 00. 50. 50.
Total to Form 990-PF, Part I,	line 11		12272.	11082	 - =	122	72.
Form 990-PF	Accour	ntin	ng Fees		Sta	atement	3
Description	(a) Expenses Per Book					(d) Charital Purpose	
ACCOUNTING	25	50.	0	•	0.		0.
<del>-</del>							

0.

0.

0.

To Form 990-PF, Pg 1, ln 23

Form 990-PF	Tax	es	St	atement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
PERSONAL PROPERTY TAXES REAL ESTATE TAXES	93. 4781.	0.	0.	0.
To Form 990-PF, Pg 1, ln 18	4874.	0.	0.	0.
Form 990-PF	Other E	xpenses	St	catement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
MAINTENANCE (PROPERTIES) EQUIPMENT RENTAL REALTOR MANAGEMENT FEES INSURANCE AND BONDS RESIDENT ENTERTAINMENTS UTILITIES REPAIRS AND MAINTENANCE MAINTENANCE (MINIBUS) OFFICE EXPENSE STAFF CHRISTMAS GIFTS RENT ASSISTANCE PAYMENTS DUES AND FEES FLOWERS ADVERTISEMENTS SAFETY DEPOSIT BOX PAYROLL SERVICES	13596. 321. 2016. 3165. 1972. 3288. 2597. 10000. 116. 225. 7200. 5110. 119. 75. 50.	0. 0. 0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0.

68860.

0.

0.

0.

Form 990-PF U.S. and State/	City Gov	ernment	Obligations	Statement 6
Description	U.S. Gov't	Other Gov't	Book Value	Fair Market Value
	X		10000.	3416.
Total U.S. Government Obligations		•	10000.	3416.
Total State and Municipal Governme	ent Oblig	ations		
Total to Form 990-PF, Part II, lir	ne 10a	:	10000.	3416.
Form 990-PF Depreciation of Asse	ets Not H	eld for	Investment	Statement 7
Description	Cost Other B	-	Accumulated Depreciation	Book Value
LAND - 80 ACRES		16000.	0.	16000.
LAND - 25 ACRES		5000.	0.	5000.
LAND - 242 ACRES		63404.	0.	63404.
LAND IMP - DRAINAGE		1219.	1219.	0.
LAND IMP - DRAINAGE		2560.	2560.	0.
LAND IMP - DRAINAGE		668.	668.	0.
LAND IMP - TREES LAND IMP - TREES		5240. 5005.	0.	5240. 5005.
LAND IMP - INCES LAND IMP - UNDERGROUND		5005.	0.	5005.
ELECTRICITY		7828.	3915.	3913.
LAND IMP - ASPHALT PAVING -		7020.	3313.	3713.
DRIVEWAYS AT BOTH HOUSES		5775.	2503.	3272.
BUILDING - YELLOW HOUSE		9900.	9900.	0.
BUILDING - WHITE HOUSE		19900.	19900.	0.
BUILDING - 32'X90' SHED		2000.	2000.	0.
BUILDING - 56'X110' SHED		4300.	4300.	0.
BLDG IMP - SIDING - WHITE		0005	2025	0
HOUSE BLDG IMP - ROOF SHINGLES		2835. 9 <b>4</b> 7.	2835. 947.	0.
BLDG IMP - ROOF SHINGLES BLDG IMP - ROOF SHINGLES		1970.	1970.	0.
BLDG IMP - NEW DOOR - WHITE				
HOUSE		214.	163.	51.
BLDG IMP - NEW DOORS/WINDOWS -				
YELLOW HOUSE		2128.	1632.	496.
BLDG IMP - SIDING/ROOF -		44405	5005	22.52
		11195.	7835.	3360.
YELLOW HOUSE				
BLDG IMP - ROOFS - WATER/MILK		2000	2659	1140
BLDG IMP - ROOFS - WATER/MILK HOUSES		3800.	2658. 1045.	
BLDG IMP - ROOFS - WATER/MILK		3800. 1650.	2658. 1045.	1142. 605.

			33 0071200
BLDG IMP - CLOSED SHED			<u> </u>
	23130.	11565.	11565.
BLDG IMP - BOTH RENTAL HOUSES		8213.	
BLDG IMP - GUTTERS/DOWNSPOUTS		<b>V</b>	<b>V</b> , <b>V</b>
REPLACEMENTS - WHITE HOUSE	498.	215.	283.
EQUIP - AIR COMPRESSOR	304	304	0.
EQUIP - TOOLS	498. 304. 157.	157.	0.
EQUIP - DIXON RIDING MOWER	5000.		0.
	5000.	5000.	0.
EQUIP - REFRIGERATOR - YELLOW	<b>50</b> 6	T.O.C	•
HOUSE	596.		0.
EQUIP - TOP RANGE - MILK HOUSE		220.	0.
EQUIP - TRAILER	199.	199.	0.
EQUIP - LAWN ROLLER	170.	170.	0.
EQUIP - PRESSURE WASHER EQUIP - USED REF - WHITE HOUSE	311.	311.	0.
EQUIP - USED REF - WHITE HOUSE	167.	167.	0.
EOUIP - CUB CADET GARDEN			
TRACTOR, BLADE, BUMPER, ETC EQUIP - SEARS PUSHING MOWER MSLC - DIALOGUE I TTY	2687.	2496.	191.
EOUIP - SEARS PUSHING MOWER	290.	267.	23.
MSLC - DIALOGUE I TTY	250.	250.	0.
MSLC - FOLDING TABLES	290.	290.	0.
MSLC - 3 SMOKE DETECTORS	306.	306.	0.
MSLC - 2 SMOKE DETECTORS	229.	229.	0.
MSLC - WALKER	460		
	469.	469.	0.
MSLC - PANASONIC FAX	140.	140.	0.
MSLC - COOLER, RACK, BURNERS,	0.50	0.50	•
CART	253.	253.	0.
MSLC VEHICLE - 2000 FORD E350			
MINIBUS	44800.	44800.	0.
TREES	4057.	0.	4057.
CONCRETE PATIO FLOOR/SIDEWALK	3103.	949.	2154.
COMPUTER/PRINTER - DELL	975.	649.	326.
SPRAY TANK ON WHEEL	750.	384.	366.
COMPUTER/PRINTER - DELL SPRAY TANK ON WHEEL DIXON RIDING MOWER	6100.	3121.	2979.
SHELVES	300.	215.	85.
RANGE - YELLOW HOUSE	329.	153.	176.
CHAINSAW AND WEEDEATER	759.	418.	341.
SEARS RANGE - WHITE HOUSE	437.	160.	277.
ELECTRIC FURANCE/AC - YELLOW	437.	100.	211•
HOUSE	5837.	010	E027
		810.	5027.
WATER HEATER - YELLOW HOUSE	500.	148.	352.
ELECTRIC FURANCE/AC - WHITE			
HOUSE	5837.	778.	5059.
WATER HEATER - WHITE HOUSE	500.	142.	358.
TREES	1719.	0.	1719.
Total To Fm 990-PF, Part II, ln 14	314017.	157608.	156409.

Form 990-PF	Other Assets		State	ement	8
Description	Beginning of Yr Book Value			Marke alue	t
PET/SECURITY DEPOSITS	0.	175	50.		0.
To Form 990-PF, Part II, line 15	0.	175	50.	<del></del>	0.
Form 990-PF 0	ther Liabilities		State	ement	9
Description		BOY Amount	EOY	Amount	
PET/SECURITY DEPOSITS		200	00.	17	50.
Total to Form 990-PF, Part II, 1	ine 22	200	00.	17	50.
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib		
TABITHA BYRUM	PRESIDENT				
WINCHESTER IN	15.00	0.	0.		0.
LEONA NORROD	VICE PRESIDENT		0		0
INDIANAPOLIS IN	2.00	0.	0.		0.
MICHAEL REIS	SECRETARY 10.00	0.	0.		0.
INDIANAPOLIS IN	10.00	0.	0.		0.
STEVEN STULTZ	TREASURER	0.	0.		0.
SPEEDWAY IN	13.00	•	<b>.</b>		٠.
BETTY LAWSON	BOARD MEMBER 2.00	0.	0.		0.
FISHERS IN	2.00	•	•		٠.

ARCHIBALD MEMORIAL HOME INC			35	-0874260
LARRY BAKER	BOARD MEMBER	_		
GREENWOOD IN	2.00	0.	0.	0.
PAUL HOCKER	BOARD MEMBER	0	0	0
INDIANAPOLIS IN	2.00	0.	0.	0.
SHARON WESLEY-DUNN	BOARD MEMBER 2.00	0.	0.	0.
INDIANAPOLIS IN	2.00	0.	0.	0.
Totals included on 990-PF, Page 6,	Part VIII	0.	0.	0.

# Archibald Memorial Home, Inc.

# Incorporated 1911 SERVING DEAF SENIOR CITIZENS OF INDIANA

# 2009 Form 990-PF Estimated Tax Installments Paid to Federal Agent

- 1. \$233.00 by check #3643 on 1/13/2010
- 2. \$233.00 by check #3651 on 3/1/2010
- 3. \$233.00 by check #3687 on 6/1/2010
- 4. \$233.00 by check #1244 on 9/10/2010

Total = \$932.00

Balance Due Paid to Federal Agent

1. \$812.00 by check #3756 on 2/4/2011

Total Payments = \$1,744.00