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Return of Private Foundation

OMB No 1545-0052

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

Department of the Treasury

c Other professional fees STMT 6 92 \$63.406 2 2011 9 26,850. 17 Interest 18 Taxes STMT 7 1 028.	_			 · · · · · · · · · · · · · · · · · ·	be able to use a copy of this			
See the IRS Name of foundation Address change Name of foundation Address change	For	calend	iar year 2009, or tax year beginni	ng OCT	1, 2009	, and ending	<u>SEP 30, 2010</u>)
Use the IRS Name of foundation A Employer identification number G3-10.55.074	G (heck	··· · · · · · · · · · · · · · · · · ·	_		· · · —		n
Set Ten Hall MEYER CHARITABLE FUND INC			Amende	d return	Address chang	je 📖	Name change	
Text Contributions, gifts, grants, ctr., received Contributions, g	Use	the II	RS Name of foundation				A Employer identificatio	n number
print in the control of the control								_
Section 47(2)(1) nonexpensive science in a first process of the control of the co	Oth							
See Specific City or town, state, and ZiP code instructions MOBILE AL 36601 H Check type of organization: XI Section 501(c)(3) exempt private foundation Section 491/2(c)(1) nonexempt charitable trust Other tisable private foundation		•		nber if mail is not de	livered to street address)	Room/suite		
Instruction More Lie L			E C DOM 123				251-432-5	511
H Check byte of organization: Section 507(0) Sectio		-	ne City of town, State, and ZIP CC				. ,,	
Section 4947(a)(1) nonexempt charable trust			MOBILE, AL 36				2 Foreign organization	is, check here
Far market value of all assess at end of year Accounting method:	H_(_	••	· · · · · · · · · · · · · · · · · · ·			check here and attach of	omputation .
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Part I Angles of Revenue and Expenses Che strat of amounts in column (a) must be on cash basis. Unider section 507(b)(1)(B), check here Part II Angles of Revenue and chapters (he strat of amounts in column (a) Check of Part II Angles of Revenue and chapters (he strat of amounts in column (a) Check of Part II Contributions, gifts, grants, etc., received N/A			•		•	Accruai	i	
Part	•					2000)	-	
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1 Contributions, gifts, grants, etc., received 2 Check ► XI the bunches a different to stock \$1 8 3 interest on among and thereous the memorary shart memor	P	art 1	(The total of amounts in columns (b), (c)	, and (d) may not				for charitable purposes
Check		1	······································		OXPORTIGO POR DOCKO	1		(cash basis only)
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1		-	Interest on savings and temporary	IEU IU AILAUII ƏUII B	101	101	\ · · · ·	СПУПЕМЕНТ 1
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17 Interest 18 Taxes STMT 7 1 028. 19 Depreciation and depletion 20 Occupancy 1 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	Ĭ.	С	Other professional fees	STMT 6	92,1863,	AUG 2 2 2011 93	利	26,850.
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22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) c Adjusted net income (if negative enter -0-)	<u>ב</u> כ	19	·			GUEN UT		
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A)	26	· ·	its.	1 002 220			991 966
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A		07		 	1,034,438.		<u> </u>	334,000.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A		1			_034 700		-	
c Adjusted net income (if negative enter -0-)			•		- 334,100.			
					· · · · · · · · · · · · · · · · · · ·	131,336		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	923				Act Notice see the instru	etions		Form 990-PF (2009)

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923511 02-02-10

Part IV Capital Gains a	and Los	ses for Tax on In	vestment	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.)				(b) F	low aco - Purch - Dona	quired lase tion	(c) Date ac (mo., day	equired y, yr.)	(d) Date sold (mo., day, yr.)	
1a QUITCLAIM DEED	OUITCLAIM DEED - SEITER						P (01/01	/06	11/10/09
b QUITCLAIM DEED	– OU	LLIBER]		01/01		02/04/10
c QUITCLAIM DEED	- MA	LONE]		01/01		11/24/09
d QUITCLAIM DEED	- HA	RPER			<u> </u>]	P (01/01	./06	03/10/10_
_e					Ц,					<u> </u>
(e) Gross sales price	` '	epreciation allowed (or allowable)		or other basis pense of sale				(h) Gai (e) plus	in or (loss (f) minus	(g)
a 3,750.										3,750.
ь 7,500.										7,500.
c 22,500.										22,500.
d 7,500.										7,500.
<u>e</u>				10/04/00	_					
Complete only for assets showing							(I)	Gains (Co (k), but no	il. (h) gair nt less tha	n minus
(i) F.M.V. as of 12/31/69) Adjusted basis as of 12/31/69		cess of col. (i)				Losses (from col.	(h))
a						_				3,750.
b										7,500.
C		<u> </u>								22,500.
d										7,500.
e										
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter	n Part I, line i - in Part I, line	7 7	}	2				41,250.
3 Net short-term capital gain or (los	ss) as defin									
If gain, also enter in Part I, line 8,			(0).		Ĵ					
If (loss), enter -0- in Part I, line 8	•	•			<u></u>	3_			<u> N/</u>	4
Part V Qualification U	Inder Se	ection 4940(e) for	Reduced	Tax on Net	t inv	estn	nent Inc	ome		
(For optional use by domestic private If section 4940(d)(2) applies, leave to Was the foundation liable for the sec	hıs part bla	nk.	.,							Yes X No
If "Yes," the foundation does not qua	lify under s	section 4940(e). Do not co	mplete this pa	rt						
1 Enter the appropriate amount in	each colun	nn for each year; see instr	uctions before	making any entr	ies.					
(a) Base period years Calendar year (or tax year beginni	ing in)	(b) Adjusted qualifying dis	tributions	Net value of n	(c oncha) iritable-	-use assets		Dıstr (col. (b) d	(d) ibution ratio ivided by col. (c))
2008		42	8,928.		21	,02	5,450			.020400
2007		46	8,218.				3,183			.022714
2006		2,15	5,000.		21	,54	4,363			.100026
2005		2	0,000.	·	21	, 20	7,177	•		.000943
2004			0.			14	0,506	•		.000000
2 Total of line 1, column (d)					•			2_		.144083
3 Average distribution ratio for the the foundation has been in existe	-	•	on line 2 by 5,	or by the numbe	er of y	ears		3		.028817
4 Enter the net value of noncharital	ble-use ass	sets for 2009 from Part X,	line 5					4		22,143,932.
5 Multiply line 4 by line 3			•					5		638,122.
6 Enter 1% of net investment incor	me (1% of	Part I, line 27b)						6		1,575.
7 Add lines 5 and 6			_					7		639,697.
8 Enter qualifying distributions from	m Part XII.	line 4	·					8		994,866.
If line 8 is equal to or greater tha	-	•	e 1b, and comi	olete that nart us	א חחו	1% tax	rate.	<u></u> :		
See the Part VI instructions.										
923521 02-02-10										Form 990-PF (2009)

	n 990-PF (2009) ERIE HALL MEYER CHARITABLE FUND INC 63- art VI: Excise-Tax-Based on-Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948.	1055 see ii			Page 4
	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)		· ·		
Þ	o Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b	i	,	. , 5	<u>75.</u>
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			-: '	. 3
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			. , 5	<u>75.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u>		<u>L,5</u>	<u>75.</u>
6	Credits/Payments:	'-	1	٠,	(
	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,456.	:	· /	1	-
	b Exempt foreign organizations - tax withheld at source 6b	~_	 	·1,	
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d 6d		٠, -",	- '	- 1-
	Total credits and payments. Add lines 6a through 6d	' -	-	. 1	56.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			., .	50.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>		8	81.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax				0.
Pa	art VII-A Statements Regarding Activities				
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		- 1	Yes	No
	any political campaign?		1a		X
b	b 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.		77	·	2.7
	c Did the foundation file Form 1120-POL for this year?		1c		X
a	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			1	
	(1) On the foundation. \(\bigs\) \(\				
·	managers. > \$ 0 .		7	'	ĺ .
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		x
	If "Yes," attach a detailed description of the activities.			٠ ,,	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			- ``	7 7 7
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	o If "Yes," has it filed a tax return on Form 990-T for this year?	I/A	4b		<u> </u>
5	The state of the s		5		X
_	If "Yes," attach the statement required by General Instruction T		- ",		- "
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			11	- ,
	By language in the governing instrument, or Protected languages that off about a proceed of the constraint of the		1 7	- 9	
	 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	1.
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.			Λ	
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)			٠	
	AL			•	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			7 :	
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addresses		10		X
		For	m 990 -	·PF	(2009)

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Form **990-PF** (2009)

0.

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art.X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	 ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	-	
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	3,664,662.
c	Fair market value of all other assets	1c	18,816,487.
d	Total (add lines 1a, b, and c)	1d	22,481,149.
e	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	22,481,149.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	337,217.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	22,143,932.
6	Minimum investment return. Enter 5% of line 5	6	1,107,197.
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.)	nd certai	
1	Minimum investment return from Part X, line 6	1	1,107,197.
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	1,575.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,105,622.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,105,622.
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	1,105,622.
į P	art XII- Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	994,866.
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:	7.	
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b_	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	994,866.
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_	<u> </u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	993,291.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies	s for the section

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		-		
line 7		,		1,105,622.
2 Undistributed income, if any, as of the end of 2009		- ,	:	* ,
a Enter amount for 2008 only	-		939,208.	4 .
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:		-	-	,
a From 2004		-2		-
b From 2005				
c From 2006	- : :			
d From 2007				i ,
e From 2008		A		. <u></u>
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from	1 4 1	A SAN STORY	. 4	· · · · · · · · · · · · · · · · · · ·
Part XII, line 4: ►\$ 994,866.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
a Applied to 2008, but not more than line 2a			939,208.	
b Applied to undistributed income of prior				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
years (Election required - see instructions)		0.	<u> </u>	F
c Treated as distributions out of corpus		T FITT HIS TO	, 5 _{4,1} 2- 3	
(Election required - see instructions)	0.		- 117	
d Applied to 2009 distributable amount				55,658
e Remaining amount distributed out of corpus	0.	No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Fr. Jr. Jan.
5 Excess distributions carryover applied to 2009	0.		1 1 2 1 = 2	0.
(If an amount appears in column (d), the same amount	- ,			
6 Enter the net total of each column as	-		in the second	
indicated below:	'			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	7 - 1-		
b Prior years' undistributed income. Subtract	The state of the s			
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	. 1	<u> </u>		1,049,964
7 Amounts treated as distributions out of		-	1	-
corpus to satisfy requirements imposed by				-
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.	1.	,	
9 Excess distributions carryover to 2010.				-
Subtract lines 7 and 8 from line 6a	0.	-		
10 Analysis of line 9:	_			-
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	11	-	1	1 -

923581 02-02-10

		HARITABLE FU			3-1055074 Page 1
Part XIV Private Operating Fo	undations (see 17	nstructions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	at it is a private operating			
foundation, and the ruling is effective for	2009, enter the date of	the ruling	▶	_	
b Check box to indicate whether the founda	ition is a private operat	ing foundation described	ın section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
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					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)				<u></u>	
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section				ŀ	
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	mation (Compl	ete this part only	if the foundation	on had \$5,000	or more in assets
at any time during th	ne year-see the	instructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who			ntributions received by t	he foundation befor	e the close of any tax
year (but only if they have contributed me	ore than \$5,000). (See	section 507(a)(2).)			
NONE					
b List any managers of the foundation who other entity) of which the foundation has			ı (or an equally large po	rtion of the ownersh	up of a partnership or
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loa	n, Scholarship, etc., F	Programs:		
					cited requests for funds. If
the foundation makes gifts, grants, etc. (see instructions) to inc	lividuals or organizations	under other conditions,	, complete items 2a,	b, c, and d.
a The name, address, and telephone numb	er of the person to wh	om applications should b	e addressed:		
SEE STATEMENT 10					
b The form in which applications should be	submitted and inform	nation and materials they	should include:		
c Any submission deadlines:					 .
d Any restrictions or limitations on awards	, such as by geograph	ıcal areas, charıtable field	s, kınds of ınstitutions, (or other factors:	
			,		
923601 02-02-10					Form 990-PF (200
					,, 200

► 3b 0. Form **990-PF** (2009)

Total

923611 02-02-10

				_	
Part XVI-A	Analys	is of Inc	ome-Pr	oducing	Activities

nter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tanodon mount
a	_		-		
b	_				
c	_		<u> </u>		
d					ļ
e					
f			_		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	İ				
investments			ļ		101 13,716
4 Dividends and interest from securities					13,716
5 Net rental income or (loss) from real estate:	*	al a constant		1 r 1	1000
a Debt-financed property					
b Not debt-financed property					102,471
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					41,250
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a			1		
b					
c		1			
d	l				
e					
12 Subtotal. Add columns (b), (d), and (e)		0		0	. 157,538
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.	.)	•		•	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.				
	the foundation's exempt purposes (other than by providing funds for such purposes).			
	THE ASSETS OF THE FOUNDATION ARE INVESTED IN CASH, MARKETABLE			
	SECURITIES AND REAL ESTATE. THE FOUNDATION EXISTS TO PROVIDE			
	CHARITABLE CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS OF SOUTH BALDWIN			
	COUNTY, ALABAMA. REVENUES GENERATED FROM THESE INVESTMENTS WILL BE			
	USED TOGETHER WITH THE FOUNDATION'S CORPUS TO SUPPORT THESE CHARITABLE			
	CAUSES.			
-				

			<u>HALL MEYER CHARITABLE FUND 1</u>				ge 13
:Pa	rt X\	/ll⊡⊡Information Re Exempt Organi	garding Transfers To and Transactions ar izations	nd Relationships With Nonchar	itable	•	
1	Did th	e organization directly or indir	ectly engage in any of the following with any other organization	described in section 501(c) of	Ŀ	Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?						
а	a Transfers from the reporting foundation to a noncharitable exempt organization of:						<u> </u>
	(1) C	ash			1a(1)		_X_
	(2) 0	ther assets			1a(2)		<u> </u>
þ	Other	transactions:			1, =		٠.
	(1) S	ales of assets to a noncharitat	ole exempt organization		1b(1)		X
	(2) P	urchases of assets from a nor	ncharitable exempt organization		1b(2)		X
	(3) R	ental of facilities, equipment, o	or other assets		1b(3)		X
	(4) R	eimbursement arrangements			1b(4)		X
		oans or loan guarantees			1b(5)		X
			mbership or fundraising solicitations	-	1b(6)	<u> </u>	<u> </u>
		•	ling lists, other assets, or paid employees		1c		X
	or ser	vices given by the reporting form (d) the value of the goods, ("Yes," complete the following schedule. Column (b) should alw bundation. If the foundation received less than fair market value other assets, or services received.				
(a) L	ine no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	nts
			N/A				
				<u> </u>			
_							
							-
							
2a			tly affiliated with, or related to, one or more tax-exempt organiz r than section 501(c)(3)) or in section 527?	zations described	Yes	X	□No

2a	Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		
Under penalties of perjun, I declare that I have examined this return, incl and complete Declaration of preparer other than parpayer or (duciary) is		

Signature of officer or trustee Date 8-2-11 Preparer's signature RUSSELL THOMPSON

Check if self-employed Preparer's identifying number

EIN > Phone no. <u>251-473-5550</u>

Form **990-PF** (2009)

09340801 769506 34860

P O BOX 70106

NGS AND TEM	ORARY CA	SH IN	VESTMENTS	STATEMENT	1
				AMOUNT	
			•	10)1.
LINE 3, COI	LUMIN A		:	10)1.
S AND INTERI	EST FROM	SECUR	ITIES	STATEMENT	2
GROSS	AMOUNT			COLUMN (A) AMOUNT)
	13,716.		0.	13,71	L6.
N 4	13,716.		0.	13,71	L6.
RENTAL IN	COME			STATEMENT	3
			ACTIVITY NUMBER	GROSS RENTAL INCO	OME
			1	102,47	71.
LINE 5A				102,47	71.
LEGAL	FEES			STATEMENT	4
LEGAL (A) EXPENSES PER BOOKS	FEES (B) NET INV		(C) ADJUSTEI NET INCOM	(D) CHARITAI	BLE
(A) EXPENSES	(B) NET INV		ADJUSTEI	(D) CHARITAI	BLE ES
	LINE 3, COI S AND INTERI GROSS N 4	LINE 3, COLUMN A S AND INTEREST FROM GROSS AMOUNT 13,716. N 4 13,716. RENTAL INCOME	LINE 3, COLUMN A S AND INTEREST FROM SECUR GROSS AMOUNT DI 13,716. N 4 13,716. RENTAL INCOME	GROSS AMOUNT CAPITAL GAINS DIVIDENDS 13,716. 0. 13,716. 0. RENTAL INCOME ACTIVITY NUMBER 1	AMOUNT LINE 3, COLUMN A S AND INTEREST FROM SECURITIES GROSS AMOUNT CAPITAL GAINS DIVIDENDS AMOUNT 13,716. 0. 13,73 N 4 13,716. RENTAL INCOME ACTIVITY NUMBER RENTAL INCOME 1 102,47

PORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
)ESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	8,302.	0.		6,178.	
TO FORM 990-PF, PG 1, LN 16B	8,302.	0.		6,178.	
FORM 990-PF C	THER PROFES	SIONAL FEES	S	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ASSOCIATION DUES MANAGEMENT FEES SUBMERGED LAND LEASE APPRAISALS INSURANCE MISCELLANEOUS	6,250. 36,670. 7,271. 26,850. 14,989. 333.	0. 0. 0. 0.		0. 0. 0. 26,850. 0.	
TO FORM 990-PF, PG 1, LN 16C	92,363.	0.		26,850.	
FORM 990-PF	TAX	ES	S	TATEMENT 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROPERTY TAXES	1,028.	0.		1,028.	
TO FORM 990-PF, PG 1, LN 18	1,028.	0.		1,028.	

ORM 990-PF OTHER INCREASES IN N	ET ASSETS OR FUN	D BALANCES	STATE	EMENT 8
)ESCRIPTION			Al	MOUNT
COST IN EXCESS OF BASIS-CONTRIBUTI	ON TO CITY OF GU	LF SHORES		45,000.
COTAL TO FORM 990-PF, PART III, LI	NE 3			45,000.
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI		STATI	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
/IVIAN G JOHNSTON JR ? O BOX 123 (OBILE AL	DIRECTOR/PRESIDE	DENT 0.	0.	0.
VEIL C JOHNSTON PO BOX 123 MOBILE AL	DIRECTOR/VICE-F 5.00	PRESIDENT 0.	0.	0.
HERBERT J MALONE JR O DRAWER 457 BULF SHORES AL	DIRECTOR/ASST V 5.00	VICE-PRES 0.	0.	0.
NORMAN D PITMAN III 3800 AIRPORT BOULEVARD SUITE 306 MOBILE AL	DIRECTOR/TREASU	JRER 0.	0.	0.
KENNETH E NIEMEYER PO DRAWER 1628 MOBILE AL	DIRECTOR/SECRET	TARY	0.	0.
POTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

ORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

/IVIAN G JOHNSTON JR ? O BOX 123 10BILE AL

CELEPHONE NUMBER

251-432-5511

FORM AND CONTENT OF APPLICATIONS

10 SPECIFIC FORM IS REQUIRED. ORGANIZATIONS SHOULD PROVIDE WRITTEN EVIDENCE OF EXEMPT STATUS.

ANY SUBMISSION DEADLINES

10NE

RESTRICTIONS AND LIMITATIONS ON AWARDS

JENERALLY LIMITED TO CHARITABLE ORGANIZATIONS LOCATED IN THE SOUTH BALDWIN COUNTY AREA.

STATEMENT 11

FORM 990-PF

	ID DURING THE YEAR	SIAIEMENI II		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
ALABAMA COASTAL FOUNDATION	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	15,000.	
ALABAMA GULF COAST EDUCATIONAL FOUNDATION	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	15,000.	
AMERICAN HEART ASSOCIATION	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	25,000.	
CARE HOUSE INC	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	20,000.	
GULF SHORES ELEMENTARY SCHOOL	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	75,000.	
GULF SHORES HIGH SCHOOL	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	75,000.	
GULF SHORES MIDDLE SCHOOL	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	75,000.	
CITY OF GULF SHORES	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	45,000.	

GRANTS AND CONTRIBUTIONS

ERIE	HALL	MEYER	CHARITABLE	FUND	INC
•					

63-1055074

	<u> </u>		
CHRISTIAN LIFE CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
ORANGE BEACH ELEMENTARY SCHOOL	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	75,000.
FIRST BAPTIST OF ORANGE BEACH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
ST ANDREWS BY THE SEA	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	39,500.
FIRST BAPTIST OF GULF SHORES	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
FIRST PRESBYTERIAN CHURCH	SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
GRACE FELLOWSHIP PRESBYTERIAN	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
GRACE LUTHERN CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
GULFWAY ASSEMBLIES OF GOD	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
GULF SHORES UNITED METHODIST	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.

ERIE HALL MEYER CHARITABLE FUND	INC		63-1055074
HOLY SPIRIT EPISCOPAL	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
LAGOON BAPTIST CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
OUR LADY OF THE GULF	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
DYSTER BAY BAPTIST CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
ORANGE BEACH PRESBYTERIAN	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
ORANGE BEACH UNITED METHODIST	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
PEACE LUTHERAN CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	6,000.
ROMAR BEACH BAPTIST CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	3,000.
SHELL BANKS BAPTIST CHURCH	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	3,000.
3T ANTHANASIOS CREEK ORTHODOX	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	3,000.

ERTE	HAT.T.	MEVER	CHARITABLE	CINIT	TNC
RIVIE	TOTI	MEIER	CUMULINDID	LUND	TMC

C 2	4	\sim	_	_	\sim		4
D.3	-1	u	ח	ר	()	•	4

ST. JUDES BY THE SEA	NONE	—PUBLIC —	6.,000.
T THOMAS BY THE SEA	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	9,000.
INITED WAY OF BALDWIN COUNTY	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	62,000.
CHRISTIAN SERVICE CENTER	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	70,000.
3IG BROTHERS / BIG SISTERS	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	10,000.
JSS ALABAMA BATTLESHIP FOUNDATION	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	25,000.
SOUTH BALDWIN CHAMBER FOUNDATION	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	180,000.
AAITI RELIEF FUND	NONE SUPPORT FOR OPERATING EXPENSES	PUBLIC	500.
COTAL TO FORM 990-PF, PART XV, LI	NE 3A		945,000.

Form 8868 (Rev ·1-2011)	•				Page 2
If you are filing for an Additional (Not Automatic) 3-Month E	xtension. c	omplete only Part II and check this be	0X	- <u> </u>	<u> </u>
Note. Only complete Part II if you have already been granted ar					
If you are filing for an Automatic 3-Month Extension, comp	lete only Pa	rt I (on page 1).			
Part II Additional (Not Automatic) 3-Month	Extensio	of Time. Only file the original (no c	opies n	eeded).	
Name of exempt organization			Empl	oyer identification	number
orint			ے ا	0 1055051	
EKIE HALL MEYEK CHARITABLE			6.	3-1055074	
Number, street, and room or suite no. If a PO box, due date for PO BOX 123	see instruc	tions			
filing your return See City, town or post office, state, and ZIP code For a	foreign add	ress see instructions			
MOBILE, AL 36601	loroigit add	roos, see mandenene.			
11031111) 1111 00001					
Enter the Return code for the return that this application is for (file a separa	te application for each return)			0 4
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990	01		. ' -		1
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720	_		09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) STOP! Do not complete Part II if you were not already grant	06	Form 8870			12
 The books are in the care of ► <u>VIVIAN G JOHN</u>: Telephone No. ► <u>251-432-5511</u> If the organization does not have an office or place of business. 		FAX No 🕨)BIL	E, AL 3000	<u>/ </u>
 If this is for a Group Return, enter the organization's four dig 			 his is fo	r the whole group (check this
box ▶ ☐ If it is for part of the group, check this box ▶		ach a list with the names and ElNs of a			
4 I request an additional 3-month extension of time until		т 15, 2011			
5 For calendar year, or other tax year beginning			SEP	30, 2010	
6 If the tax year entered in line 5 is for less than 12 months			Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED TO	GATHE	R INFORMATION NEEDE	D TO	COMPLETE	AN
ACCURATE TAX RETURN					
On If the confication is for Form 000 RL 000 RE 000 T 470	0 05 6060 4	anter the tentative toy long any		·	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720 nonrefundable credits. See instructions.	U, UI 0009, E	enter the tentative tax, less any	8a	s :	1,575.
b If this application is for Form 990-PF, 990-T, 4720, or 606	9 enter any	refundable credits and estimated	Ja		<u>.,.,.</u>
tax payments made Include any prior year overpayment	-		1		
previously with Form 8868			8b	s :	2,456.
c Balance due. Subtract line 8b from line 8a. Include your	payment wi	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See ins	structions		8c	\$	0.
Sig	nature aı	nd Verification			
Under penalties of perjury, I declare that I have examined this form, inc		panying schedules and statements, and to t	he best o	of my knowledge and	belief,
it is true, correct, and complete, and that I am authorized to prepare this			_		
Signature Title	- CPA		Date		
				Form 8868 (F	lev 1-2011

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	Form 8868 (Rev. 1-2011)					Page 2
Ideo, Only complete Part If If you have already been granted an automatic 3-month extension on a previously flied Form 8868.		th Extension, o	complete only Part II and check this b	OX		
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the onginal (no copies needed). Name of exempt organization Employer Identification number rint is a type of the property of						
Name of exempt organization RETLE HALL MEYER CHARITABLE FUND INC 83-1055074 Number, street, and room or suite no. if a P.O. box, see instructions. 90 BOX 123 City, town or post office, state, and ZIP code, For a foreign address, see instructions. MOBILE, AL 36601 Since the Return code for the return that this application is for (file a separate application for each return) 10 4 Application Si For 10 1 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8						
ype or intit tall ype and the property of the	Part II Additional (Not Automatic) 3-Mon	th Extension	n of Time. Only file the original (no	copies n	eeded).	
ERIE HALL MEYER CHARITABLE FUND INC Return Reverted Revert	Name of exempt organization			Empl	oyer identi	fication number
Number, street, and room or suite no. If a P.O. box, see instructions. P O BOX 123 City, town or post office, state, and ZIP code. For a foreign address, see instructions. MOBILE, AL 36601 Inter the Return code for the return that this application is for (file a separate application for each return) D 4 Application From 900 D 10 D 2 Form 1041.A D 3 Form 990-BL D 2 Form 1041.A D 3 Form 4720 D 9 D 9 D 10 D 9 D 10	print	E EIMIN	ING	ے ا	2 1055	.074
Do BOX 123 City, town or post office, state, and ZIP code. For a foreign address, see instructions. MOBILE, AL 36601 Inter the Return code for the return that this application is for (file a separate application for each return) Do 4 Application Breturn For Code Code Code Com 990 Do 11 Com 990-BL Do 22 Form 1041-A Do 8 Do 990-BC Do 90-BC D	File by the			<u> </u>	3-1055	00/4
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