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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

2009**Open to Public Inspection****A** For the 2009 calendar year, or tax year beginning **October 1**, 2009, and ending **September 30**, 20 **10****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization**Abilene Industrial Foundation**

Number and street (or P.O. box, if mail is not delivered to street address)

Room/suite

P. O. Box 2281

City or town, state or country, and ZIP + 4

Abilene, TX 79604-2281**D** Employer identification number**75-6035743****E** Telephone number**325-673-7349****F** Group Exemption Number ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method ☐ Cash ☒ Accrual
Other (specify) ► **See sched. attached****I** Website: ► **www.developabilene.com****J** Tax-exempt status (check only one) — ☒ 501(c) (**6**) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ **75,999****Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	73,075
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	2,924
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	6b	Less: direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ► _____)	8		
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	75,999
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	500
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► See schedule attached)	16	50,658
	17	Total expenses. Add lines 10 through 16	17	51,158
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	24,841
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	342,449
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	367,290

Part II **Balance Sheets.** If total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

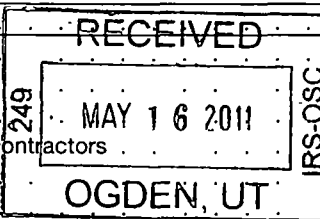
	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	319,157	364,654
23 Land and buildings		
24 Other assets (describe ► Accounts receivable from affiliate)	23,292	2,636
25 Total assets	342,449	367,290
26 Total liabilities (describe ► _____)		
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	342,449	367,290

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2009)

SCANNED JUN 07 2011



95-7,8

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Part III	Statement of Program Service Accomplishments (See the instructions for Part III.)
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What is the organization's primary exempt purpose? See schedule attached

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28	Promotion of Abilene Texas as an industrial site and other activities to create and retain jobs In Abilene.		
	(Grants \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	28a	50,300
29			
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a) ►	32	50,300

Part IV	List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)		
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[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/A
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	N/A
b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	N/A
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		0
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ▶ None		
42a The organization's books are in care of ▶ Frances Williamson Telephone no. ▶ 325-677-7241		
Located at ▶ 174 Cypress St., Suite 200 Abilene, Texas ZIP + 4 ▶ 79601		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country: ▶		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
If "Yes," enter the name of the foreign country. ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here ▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 0		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

N/A

- 46 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 **Yes No**
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II **46 47**
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E **48**
- 49a Did the organization make any transfers to an exempt non-charitable related organization? **49a**
- b If "Yes," was the related organization a section 527 organization? **49b**
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

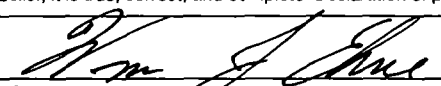
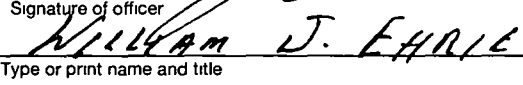
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date <u>4/26/11</u>	
Paid Preparer's Use Only	 Type or print name and title		Date <u>4/11/11</u>	
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>Becky Roberts, CPA</u> <u>104 Pine St, Suite 611, Abilene, TX 79601</u>		Check if self-employed <input checked="" type="checkbox"/>	Preparer's identifying number (See instructions) <u>325-665-5239</u>

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Page 1, Question G - Accounting Method

The basis of accounting was changed from modified cash to accrual under SFAS 116. There was no effect on the prior year's revenues and expenses because of the change.

PART I, LINE 16 - Other Expenses

AMOUNT

Event sponsorship	\$ 5,500
Distributions to industrial operating fund	44,800
Miscellaneous	<u>358</u>
	<u>\$50,658</u>

Part III - Statement of Program Service Accomplishments

The primary exempt purpose of the organization is the promotion of Abilene Texas as an industrial site and other activities to create new jobs.

ABILENE INDUSTRIAL FOUNDATION, INC
75-6035743
FORM 990 - FYE 9/30/10
Part IV - List of Officers, Directors, Trustees and Key Employees

MM	FIRST	LAST	ADDRESS	CITY	ST	ZIP	TITLE	AVG HRS/WEEK	COMPENSATION	CONTRIBUTIONS		EXPENSE	
										TO EMPLOYEE BENEFIT PLANS & DEFERRED COMP.	OTHER ALLOWANCES	ACCOUNT &	OTHER ALLOWANCES
Mr	Bill	Ehre	P O Box 2281	Abilene	TX	79604	President, 5 hours/week		\$0		\$0	\$0	\$0
Mr	Mike	McMahan	P O Box 2281	Abilene	TX	79604	Ex-Officio Director President, Abilene Chamber of Commerce	1 hour/week	\$0		\$0	\$0	\$0
Mr	Dave	Copeland	P O Box 2791	Abilene	TX	79604	Chair, < 2 hours/week		\$0		\$0	\$0	\$0
Mr	Ron	Butler	400 Pine Street	Abilene	TX	79601	Chair-elect, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Charles	Black	P O Box 360	Abilene	TX	79604	Past Chair, < 1 hour/week		\$0		\$0	\$0	\$0
Ms	Yvonne	Batts	4110 S Treadaway	Abilene	TX	79602	Sec-Treas, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Grady	Barr	P O Box 629	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Jim	Barr	P O Box 629	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Charles	Black	P O Box 360	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Greg	Blair	301 Cypress	Abilene	TX	79601	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Jackson	Boen	4002 Loop 322	Abilene	TX	79602	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Gray	Bridwell	10527 FM 600	Abilene	TX	79601	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Tucker	Bridwell	P O Box 1616	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Paul	Cannon	P O Box 3679	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Tony	Conder	4150 Southwest Drve, Suite 202	Abilene	TX	79606	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Mike	Denny	2825 Pine Street	Abilene	TX	79601	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Scott	Dueser	P O Box 701	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Mike	Dunnahoo	1395 S Danville	Abilene	TX	79605	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Dr	Carol	Dupree	717 E Industrial Blvd	Abilene	TX	79602	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Billy	Edwards	993 N 3rd Street	Abilene	TX	79601	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Billy	Enriquez	2049 Park Avenue	Abilene	TX	79603	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Brian	Etchison	P O Box 3017	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Steve	Fehr	5425 North First	Abilene	TX	79603	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Ray	Ferguson	993 N 3rd Street	Abilene	TX	79601	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Gary	Galbraith	P O Box 267	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Larry	Gill	P O Box 176	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Woody	Gilliland	4601 Hartford	Abilene	TX	79605	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Scott	Hibbs	P O Box 3097	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Seaton	Higginbotham	P O Box 5166	Abilene	TX	79608	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Mark	Horn	P O Box 2703	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Fred Lee	Hughes	P O Box 1100	Abilene	TX	79604	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	David	Jones	650 Colonial Dr	Abilene	TX	79603	Director, < 1 hour/week		\$0		\$0	\$0	\$0
Mr	Kelly	Kinard	P O Box 6317	Abilene	TX	79608	Director, < 1 hour/week		\$0		\$0	\$0	\$0

ABILENE INDUSTRIAL FOUNDATION, INC

75-6035743

FORM 990 - FYE 9/30/10

Part IV - List of Officers, Directors, Trustees and Key Employees

MM	FIRST	LAST	ADDRESS	CITY	ST	ZIP	TITLE	CONTRIBUTIONS		EXPENSE	
								TO EMPLOYEE BENEFIT PLANS & DEFERRED COMP.	OTHER ALLOWANCES	ACCOUNT &	OTHER ALLOWANCES
Mr	Bill	King	P O Box 1761	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Ms	Marla	Knight	1 Village Drive, Suite 102	Abilene	TX	79606	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Tim	Lancaster	1242 N 19th Street	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Peter	Lauve	3005 So Treadaway	Abilene	TX	79602	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jim	Leonard	6799 Hwy 277	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jerry	Love	400 Pine Street, Suite 600	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Ken	Liles	3005 S Treadaway	Abilene	TX	79602	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Raymond	McDaniel, Jr	P O Box 6169	Abilene	TX	79608	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Burrell	McKelvain	650 E Hwy 80	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jim	McNeer	4400 Buffalo Gap Rd , Ste 4500	Abilene	TX	79606	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Dr	Royce	Money	ACU Station, Box 29100	Abilene	TX	79699	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Dr	Virginia	Mosier	P O Box 981	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Mike	Murphy	6250 Highway 83/84	Abilene	TX	79606	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Ms	Kim	Nussbaum	P O Box 30	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	David	Ohre	1902 Industrial Blvd	Abilene	TX	79602	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Charlie	Pigeon	1801 Hwy 36	Abilene	TX	79602	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Harold	Preston	Box 16005 HSU Station	Abilene	TX	79698	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jack	Reniz	5025-A East Hwy 80	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Ms	Vicki	Reynolds	P O Box 6058	Abilene	TX	79608	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Gary	Robnett	P O Box 2281	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jim	Rose	P O Box 1598	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Ms	Mary	Ross	400 Oak Street	Abilene	TX	79602	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Darryl	Schnver	P O Box 250	Merkel	TX	79536	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Bill	Senter	P O Box 6868	Abilene	TX	79608	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	John	Snapp	5417 Knollwood Drive	Abilene	TX	79606	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Bob	Surovik	P O Box 3679	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Randy	Teakell	366 Cypress	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Jimmy	Title	340 Beech	Abilene	TX	79601	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Enc	Thomas	P O Box 5309	Abilene	TX	79608	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Dr	James	Webster	6 Glen Abbey Court	Abilene	TX	79606	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Cleve	Whitener	P O Box 1761	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	H C	Zachry	P O Box 1739	Abilene	TX	79604	Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mayor	Norm	Archibald	P O Box 60	Abilene	TX	79604	Ex-Officio Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Richard	Burdine	P O Box 60	Abilene	TX	79604	Ex-Officio Director, < 1 hour/week	\$0	\$0	\$0	\$0
Mr	Joe	Crawford	2850 Airport Blvd	Abilene	TX	79602	Ex-Officio Director, < 1 hour/week	\$0	\$0	\$0	\$0