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OMB No 1545-0052

2009

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements Department of the Treasury Internal Revenue Service

Fo	r cal	endar	year 2009,	or t	ax year beg	inning		12/	01 , 2009,	and end	ing		11/30) , 20 10	
_			hat apply		Initial retu		Initia	l return c	f a former p	ublic cha	rity		Final retur	n	
					Amended	return	X	Addres	s change		\square N	ame change			
_			Name of fou	nda	tion							A Employer identifi	cation number		
ı	Jse th	e IRS									1				
	lab		DELMAN I	MOF	RTENSON (CHARIT	ABLE FOUR	OITADI	N			54-	1739798		
(Other	wise,	Number and	stre	et (or PO box	number if r	mail is not deliver	ed to street	address)	Room/su	ute	B Telephone number (see page 10 of the instructions)			
	pri														
_	or ty	-	2121 JA	MIE	ESON AVEN	NUE, UI	NIT 1004					(70	3442		
	•	ecific tions.	City or town	, sta	ite, and ZIP co	de						C If exemption application pending, check here	tion is	. ▶ 🔲	
••	150,40		1									D 1. Foreign organizat		. ▶ 🔲	
			ALEXAND	RI	A, VA 223	314-57	12					2. Foreign organizations meeting the			
Н	H Check type of organization:			n: Sect	ion 501(c	c)(3) exempt	private fo	oundation			85% test, check h computation •	ere and attach	. ▶ 🔛		
Γ					empt chantabl	e trust	X Other ta	xable pri	vate foundat	tion		E If private foundation status was terminated			
ī	Fair	marke	et value of all	ass	sets at end	J Accou	unting metho	d·∐X Ca	ish 🔙 Acc	rual		under section 507(b		~ I I	
	of ye	ear (fro	m Part II, co	I. (c,), line		her (specify)					F If the foundation is in a 60-month termination			
	16)	▶ \$	5 , 6	12,	,602.	(Part I, e	column (d) m	ust be on	cash basis.)			under section 507(b			
:	'art I	Analy	sis of Reve	nue	and Expens	ses (The	(a) Revenu	e and	(b) Net inve	etment	١,	c) Adjusted net	(d) Disbur for chai		
					nns (b), (c), ar ual the amount		éxpenses	per	incom		, "	income	purpo		
_		colum	n (a) (see pag	je 1	1 of the instruc	tions))	books				ļ		(cash bas	sis only)	
	1			etc ,	received (attach so	hedule) .			* * * * * * * * * * * * * * * * * * * *		<u> </u>	3 3 5	\$7. 12.5		
	2	Check	If the attach	Sch	dation is not req	uired to	, , ,		* * * *, * *		ļ	• •	* 1,4,3	**************************************	
:	3	Interest	t on savings and	i tem	porary cash inve	stments		0 741		70 741	ļ	170 741			
3	4	Divide	nds and inter	est f	rom securities		1/	9,741.	1/	9,741.		179,741.	ATCH ·	.2	
	5 a	Gross	rents										, ,		
ć							1	2 1 4 5			`				
ne i	6a	Net gar	n or (loss) from sales pace for all	sale	of assets not on	line 10	1	3,145	•		-		·		
Revenue	"	assets	on line 6a		238				1	3,145.					
&	7				(from Part IV,		<u>.</u>			.3,143.	 			, , ,	
_	8				aın					 	 	 	-		
<i>•</i>	9		e modificatior ales less retums						^	, ,,				12 743	
تت		and allo	owances · · ·	• •			•				 			*******	
Ž	1		ost of goods sol						<u> </u>			<u> </u>	,	* <	
7)	l				tach schedule)				-				,	r	
	11				chedule)			2,886.	19	2,886.	<u> </u>	179,741		٠,	
_	12	Total.	Addrines	rou	gh 11			0.			i				
	13	Compe	ensation of office	<u> </u>	filectors, trustees	etc.				·					
es	15		on plans, emp			' · · · <i>[</i>									
SUS.	16a	Local	fees attach s	r Hoc	ilial o	70/							<u> </u>		
ğ		Accou	hting fees (at	tach	schedule)	:¦& ∶		500.	···········	500		500		0	
ē E	ء ا				(attach schedu										
돭	17		st .	Ľ	N. IIT				. "						
Administrative Expenses	18) (se	e page 14 of the in	structions) *		3,378.		3,378					
Ξ	19		•		hedule) and d	- 1		·							
퉏	20										1				
٧	1		-		d meetings										
and	22				ıs	- 1									
			•		schedule)	i i									
ā	24				lministrative e										
Operating	.				3			3,878.		3,878	<u> </u>	500	<u> </u>	0	
0	25		_		ints paid			9,000.						239,000	
_	26		_	_	nents. Add lines		2.4	2 , 878.		3,878	┼	500		239,000	
	27	Subtra	act line 26 fro	m lı	ne 12 [.]									,	
	a	Excess	of revenue over e	хреп	ses and disburse	ments		9,992		,					
	b	Net in	vestment inc	:ome	e (if negative, e	enter -0-)			1	89,008	┼	170 041			
	1 .	Adine	ted net incom	na /ı	f negative ent	er -O-V	l .		1		1	179,241	•[

222350-108

В	art II	Ralance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	d of year		
<u></u>			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bean	ng	65,750.	138,461.			
	. 2		cash investments	51,503.	2,171.	2,171.		
	3	Accounts receivable		-	£	1		
		Less: allowance for doul	btful accounts					
	4	Pledges receivable ▶_				*, , , **		
		Less: allowance for doub	btful accounts			l		
	5				-			
Ì	6		fficers, directors, trustees, and other					
ı			ich schedule) (see page 16 of the instructions)					
	7		eceivable (attach schedule)	,	, - 7, 1	12 27 2		
	,		btful accounts	·	** *	14		
	8							
Assets	9		eferred charges					
155	_		e government obligations (attach schedule)					
1			stock (attach schedule) ATCH 5	4,928,695.	4,864,547.	5,307,572.		
			bonds (attach schedule) ATCH 6	148,187.	148,187.	164,398.		
	11	Investments - land, buildings	s	,				
		and equipment basis Less: accumulated deprecia	ation		, ,			
	4.0	(attach schedule)	loans					
	12		ach schedule)					
	14	Land, buildings, and	_	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	1 112000000		
		equipment basis Less accumulated deprecia	ation L	Sant 1	/ nit - v	5 12 13 80 8 1 1 2 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5		
		(attach schedule)		607.				
	15	Other assets (describe			<u> </u>	 		
	16		pleted by all filers - see the	5,194,742.	5,153,366	5,612,602.		
_	 	ilistructions Also, see p	age 1, item I)	3/131//12.	3/133/300	3,012,002		
	17		accrued expenses			, , ,		
	18				· -·			
Liabilities	19		· · · · · · · · · · · · · · · · · · ·			* * * * * * * * * * * * * * * * * * * *		
Ē	20		ors, trustees, and other disqualified persons					
Ë	21		otes payable (attach schedule)					
	22	Other liabilities (describe	e ▶)					
	22	Total liabilities (add line	on 17 through 22)					
_	23		es 17 through 22)					
			low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.					
s		· ·	· · · · · · · · · · · · · · · · · · ·					
ည	24 25 26	Unrestricted						
alai	25		<i>.</i>			1		
ĕ	26		· · · · · · · · · · · · · · · · · · ·			1, 5		
un		Foundations that do	not follow SFAS 117,			1 3 Ch 1 3 Back 1		
Ē			plete lines 27 through 31.					
ō	27	•	cipal, or current funds					
Assets	28	• • •	r land, bldg , and equipment fund	5,194,742.	5,153,366			
A SS	29	<u> </u>	ulated income, endowment, or other funds	5,194,142.	3,133,300			
Net /			d balances (see page 17 of the	E 104 740	E 152 266	- 17 17,000		
Ž	ı	instructions)	<u>.</u> <u>.</u>	5,194,742.	5,153,366	-		
	31		t assets/fund balances (see page 17	E 104 740	5 152 266			
_				5,194,742.	5,153,366	•		
			anges in Net Assets or Fund E		<u> </u>			
1			alances at beginning of year - Part II,			F 104 740		
		-				5,194,742		
2	Ente	er amount from Part I,	line 27a		2	-49,992		
			line 27a led in line 2 (itemize) ► ATTACHI	MENT 8	3	8,616		
4	Add	lines 1, 2, and 3			4	5,153,366		
5	Dec	reases not included in	line 2 (itemize) ▶		5			
6	Tota	al net assets or fund b	alances at end of year (line 4 minus li	ne 5) - Part II, column (t	o), line 30 6	5,153,366		
					·	Form 000 PE (2000)		

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			-
	describe the kind(s) of property sold (click warehouse, or common stock, 200	•	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE			5 55,155511		
b					
С					
d	······································				
е					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а					
<u>b</u>					
<u>c</u>			<u> </u>		
_d				 	
e Complete polyfor posts of					
Complete only for assets sr		ned by the foundation on 12/31/69		Gains (Col (h) g (k), but not less t	
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI.	Losses (from co	
<u>a</u>					
<u>b</u>			ļ		
С			ļ		
<u>d</u>			<u> </u>		
<u>e</u>	. 15	ania also antonia Bost I lina 7			
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		13,145.
	or (loss) as defined in sections 12				
=	line 8, column (c) (see pages 13	T .			
if (loss), enter -0- in Part I, I	ine 8	<u> </u>	3		
		uced Tax on Net Investment Inc e section 4940(a) tax on net investi			
		outable amount of any year in the b Do not complete this part.	ase perio	d?	Yes X No
		; see page 18 of the instructions be	efore mak	ing any entries.	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets	İ	Distribution ratio (col (b) divided by	
2008	171,000.	4,839,017.			0.035338
2007	64,000.	4,765,342.			0.013430
2006	115,000.	3,617,039.			0.031794
2005	75,000.	1,912,354.			0.039219
2004	65,000.	1,505,335.	<u> </u>		0.043180
			ł I		
2 Total of line 1, column (d)			2		0.162961
_	for the 5-year base period - divide				
number of years the found	dation has been in existence if less	s than 5 years	3		0.032592
4 Enter the net value of non	charitable-use assets for 2009 fro	m Part X, line 5	4	5,	449,803.
			_		177 (00
5 Multiply line 4 by line 3			5		177,620.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		1,890.
7 Add lines 5 and 6			7		179,510.
8 Enter qualifying distribution If line 8 is equal to or great VI instructions on page	eater than line 7, check the box	in Part VI, line 1b, and complete t	8 that part	using a 1% ta	239,000. x rate. See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see p	page	18 of th	e ins	tructio	ns)
1a	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 ruling letter if necessary - see instructions)					•
þ	Domestic_foundations that meet the section 4940(e) requirements in Part V, check	1			1,8	90.
•	here X and enter 1% of Part I, line 27b				<i>(</i> • •	•
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	ļ				÷ ,
	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-)	2				
3	Add lines 1 and 2	3			1,8	90.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			1,8	90.
6	Credits/Payments:	′ -	'z' ,			2
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 3, 360.			` 5 }	· · · · · ·	
þ	Exempt foreign organizations-tax withheld at source			` ;	, ,	*(v)
c	Tax paid with application for extension of time to file (Form 8868) 6c 6.		î girtî		· · · · · · · · · · · · · · · · · · ·	
d	Backup withholding erroneously withheld	~ >		ĸĊ.	ົ່າ ×	**
7	Total credits and payments Add lines 6a through 6d	7				$\frac{60.}{11.}$
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1 /	59.
10		10			1,4	
11		11				
	t VII-A Statements Regarding Activities		1		Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		ŀ	1a	163	X
_	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
D				1 b		Х
	of the instructions for definition)?				٠.,	`
	published or distributed by the foundation in connection with the activities			,, , , , ,	,	
_	Did the foundation file Form 1120-POL for this year?			1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				3N _3	
_	(1) On the foundation >\$(2) On foundation managers >\$			(^ 4-	1
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed				2.7
	on foundation managers. \$			*	~ 2.	W
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.			, (2)	* * *	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	of		* ' x .	,	·
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			(v *		ر ئى
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			٠,	,	3
	By language in the governing instrument, or			<i>*</i>	,	* * * * * * * * * * * * * * * * * * * *
	By state legislation that effectively amends the governing instrument so that no mandatory directions to				Ϋ́	, .
	conflict with the state law remain in the governing instrument?			_6	X	\vdash
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and		κν	7		\vdash
8a		the				
	instructions) ► VA,			•		1
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			0.4	x	-
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494:			-	3	1.
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV			9		X
	27)? If "Yes," complete Part XIV					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list			10		х
	names and addresses	• • •				

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	t 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			х
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		
1.2	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	i		х
	August 17, 2008?	12		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address N/A The bodie are placed THE FOUNDATION Talebase N 703-548	7-73	<u></u>	
14	The books are in care of ▶ THE FOUNDATION Telephone no. Located at ▶2121 JAMIESON AVENUE, UNIT 1004 ALEXANDRIA, VA ZIP+4 ▶ 22314-5			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	• • •	>	ш
Par	t 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		, . x	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	, :	4.7,	~ v ;
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	, , ;	3,33	ر م کجها
	disqualified person?	1		17.5
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	,		P 2
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	3.4	r · **
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	ž, .	. , '	, ,
	the benefit or use of a disqualified person)?Yes X No		5	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	8	, 12 (18) , 120	
	the foundation agreed to make a grant to or to employ the official for a period after	9,	` /* .53/	3
	termination of government service, if terminating within 90 days) Yes X No	**		ئىرىر 3 - دو
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	* *	7 - 3	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	ļ	
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		4	-
	were not corrected before the first day of the tax year beginning in 2009?	1 c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		١٠,	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		, , , , , , , , , , , , , , , , , , ,	- ;
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tax year(s) beginning before 2009? Yes. X No.	\ \ \ .	, , ,	* **
	de, Fait XIII) for tax year(s) beginning before 2000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	1,70%	[×*.
	If "Yes," list the years	`	ų.	r, 8
Ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1	*** **	4.4.4
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2b	' -	
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	١,		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business	`	,	ľ
04	enterprise at any time during the year?	1.	. *	-
ь	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	1.75	\ \ \ \ \ \	. `
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		,	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse		; · .	1
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1 .	3	
	foundation had excess business holdings in 2009)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		-	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

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Total number of other employees paid over \$50,000

All other program-related investments See page 24 of the instructions

NONE

NONE

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

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Amount

Total. Add lines 1 through 3.

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreities page 24 of the instructions.)	gn foundatio	ns,
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	5,393,428.
b	Average of monthly cash balances	1b	139,367.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1d	5,532,795.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	- :	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,532,795.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	82,992.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,449,803.
6	Minimum investment return. Enter 5% of line 5	6	272,490.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this		
1	Minimum investment return from Part X, line 6	1	272,490.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 1,890.		
b		1	
С	Add lines 2a and 2b	2c	1,890.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	270,600.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	270,600.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	270,600.
=	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		222 222
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	239,000.
þ	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		•
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.
þ	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	239,000.
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 (see page 26 of the instructions)	5	1,890.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	237,110.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	vhether the fo	undation

Form 990-PF (2009)

Pa	rt XIII Undistributed Income (see page	26 of the instructio	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				270,600.
2	Undistributed income, if any, as of the end of 2009		-	**	\$, , ,\$
	Enter amount for 2008 only		ÿ	238,515.	
b	Total for pnor years 20 07 20 06 20 05				
3	Excess distributions carryover, if any, to 2009				A
а	From 2004	-	4	`	
	From 2005	•			
	From 2006	,	•		
	From 2007		*		
	From 2008		,		~ ,^ ,
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII,				1
	line 4 ▶ \$ 239,000.			ı	•
а	Applied to 2008, but not more than line 2a			238,515.	,
ь	Applied to undistributed income of prior years (Election				4 1/2 1/2
_	required - see page 26 of the instructions)			, ,	· * * * * * * * * * * * * * * * * * * *
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)			,	
d	Applied to 2009 distributable amount				485.
е	Remaining amount distributed out of corpus	0.			' '
5	Excess distributions carryover applied to 2009	0.			0.
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:		· ·		• • • • • • • • • • • • • • • • • • • •
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			, , , , , , , , , , , , , , , , , , ,
	Prior years' undistributed income Subtract line 4b from line 2b				
С	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	,			
d	Subtract line 6c from line 6b Taxable			٠,	* .4 * * * * * * * * * * * * * * * * * *
е	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
f	Undistributed income for 2009 Subtract lines			5	
•	4d and 5 from line 1. This amount must be			ĺ	
	distributed in 2010				270,115.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the			-	
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				-
9	Excess distributions carryover to 2010.				, .
	Subtract lines 7 and 8 from line 6a	0.	uru ar		
	Analysis of line 9 ⁻	·			,
а	Excess from 2005		1		
b					1
С					,
d					
е	Excess from 2009 0 .			<u> </u>	

1 a	if the foundation has a foundation, and the ruling				erating			
ь	Check box to indicate wh				·· ►	4942(յ)(3) or	4942(J)(5)
•		Tax year	d private operating roar	Prior 3 years	<u> </u>	1 43420		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 20	06	(e)	Total
	or the minimum investment return from Part X for each year listed							
b	85% of line 2a	54. 4						
С	Qualifying distributions from Part							
d	XII, line 4 for each year listed . Amounts included in line 2c not used directly for active conduct of exempt activities							
	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.							
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter							
	(1) Value of all assets (2) Value of assets qualifying under section					<u> </u>		
b	4942(j)(3)(B)(i)							
	line 6 for each year listed		 	<u> </u>		·	ļ	
С	"Support" alternative test - enter (1) Total support other than							
	gross investment income (interest, dividends, rents, payments on securities							
	loans (section 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		-					
Pa	rt XV Supplement		Complete this par ee page 28 of the i		dation had	\$5,000	or more	in assets
1	Information Regarding							
а	List any managers of before the close of any	tax year (but only if	have contributed mo they have contributed	more than \$5,000).	tal contributio (See section 50	ns receiv 07(d)(2).)	ed by the	foundation
_	EDWARD A. I		100/ 22 7222	of the stock of a sec		بالمديمة		rtion of the
b	List any managers of ownership of a partner					iii equaliy	large po	rtion of the
	NONE							
2	Information Regarding	•		• • •				
	Check here ► X if t unsolicited requests f organizations under ot	or funds. If the fou	ndation makes gifts,	grants, etc. (see pa	aritable organi ge 28 of the	zations a instructio	ind does ons) to inc	not accept dividuals or
а	The name, address, a	nd telephone numbe	r of the person to who	om applications should	be addressed			
b	The form in which app	lications should be s	ubmitted and informa	tion and materials the	ey should inclu	de.		
c	Any submission deadli	nes:						
d	Any restrictions or li	mitations on award	s, such as by geog	raphical areas, char	ıtable fields, l	kinds of	ınstıtution	s, or other

Part XV Supplementary Information (continued)			Page
3 Grants and Contributions Paid Du	ring the Year or App	roved for Fu	ıtııre Payment	
Recipient	If recipient is an individual,			
Name and address (home or business)	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
a Paid during the year				
ATTACHMENT 10		1 1		
		}		
			İ	
Total		L	▶ 3a	239,00
b Approved for future payment				<u>`.</u>
		1		

Total. .

ter gross amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
a					
			ļ		
·	 		ļ		
d			ļ		
		•	 		
			<u> </u>		
Fees and contracts from government agencies Membership dues and assessments					
nterest on savings and temporary cash investments			1		
Dividends and interest from securities			14	179,741.	
let rental income or (loss) from real estate	,		,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal property					
ther investment income					
ain or (loss) from sales of assets other than inventory			18	13,145.	
et income or (loss) from special events					
ross profit or (loss) from sales of inventory					
ther revenue a					
Subtotal. Add columns (b), (d), and (e)				192,886.	
otal. Add line 12, columns (b), (d), and (e)				13	192,886
worksheet in line 13 instructions on page 28 t	to verify calci	ulatione \			
rt XVI-B Relationship of Activities ne No. Explain below how each activities	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
Relationship of Activities No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
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Relationship of Activities No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	ın columr	(e) of Part XVI-A con	
Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Ex	d in column ther than t	(e) of Part XVI-A con	
Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
Relationship of Activities No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
rt XVI-B Relationship of Activities e No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	
Relationship of Activities ine No. Explain below how each activities the accomplishment of the fo	to the Ac	complishment of Exchange is reported exempt purposes (o	d in column ther than t	(e) of Part XVI-A con	

orm	990-PF (2009)						Pa	ge 13
Par	t XVII	Information I Exempt Orga		ransfers To and Trans	actions a	nd Relationships With	Nonci	harit	able
1						y other organization described ction 527, relating to political		Yes	No
•				ncharitable exempt organization of		ction 327, relating to political		-	ز ارد
а							1a(1)		- ′
									X
ь		transactions					- (, ,		/%
	(1) Sa	les of assets to a nonch	aritable exempt or	ganization			1b(1)		X
									X
	(3) Re	ental of facilities, equipm	ent, or other asset	s			1b(3)		X
	(4) Re	embursement arrangeme	ents				1b(4)		<u>X</u>
							1b(5)		<u> </u>
								-	X
		•						fair r	
a		•				f the foundation received less			
						of the goods, other assets, or			
	¥4,40	in any transaction of	onaing arrang						
(a) L	ine no	(b) Amount involved	(c) Name of n	oncharitable exempt organization		ption of transfers, transactions, and sh	anng arrai	ngeme	nts
		N/A			N/A				
					 				
								-	
					 	· · · · · · · · · · · · · · · · · · ·			
				·		··			
			<u> </u>	1 11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	sectio		her than section 5	ed with, or related to, one or 01(c)(3)) or in section 527?	more tax-ex	empt organizations described in	Y6	s []	⊠ No
		(a) Name of organizatio		(b) Type of organization		(c) Description of relation	nship		
	Linder	national transfer of partial Land	lare that I have eva	amined this return, including accom	nanyng schedu	ules and statements, and to the best	of my k	nowled	ige and
	belief;	Firue, correct, and con	plete Declaration of	fipreparer (other than taxpayer or f	iduciary) is base	ed on all information of which prepa	rer has a	ny kno	wledge
		Coward	14M	lanau	1W-14	TRUSTEE			
စ္	S	gnature of officer or trustee		~	Date	Title			
Sign Here		Preparer's	Joseph K.	Spuller (A)	10/14/11	Check if self-employed Preparer number page 30 c P0003	See Signa of the instr	ature o	
Ś	Paid Preparer's Use Only	signature	/ / '	, RAMOS & COMPANY,	P.A.	52 126			
	Pre Usu	Firm's name (or yours it self-employed), address		ROCKVILLE PIKE STE		EIN ▶ 52-136	. ,		_

11200 ROCKVILLE PIKE STE 400

MD

Form 990-PF (2009)

self-employed), address,

and ZIP code

20852

Phone no 301.589.9000

ROCKVILLE,

Form 8868

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the	•	▶ File a	Separate a	oplication for each return.		
				only Part I and check this box		▶ X
				sion, complete only Part II (on page		
				tomatic 3-month extension on a pre		
a corporation 8868 to requestructions)	n required juest an ex Transfers A For more	to file Form 990-T), or an addition tension of time to file any of the associated With Certain Persona details on the electronic filing of the details of the details on the electronic filing of the details of the details of the details of the details of the details of the details of the details of the details of details of details of details details detai	nal (not aut forms liste I Benefit (nis form, vis	u need a 3-month automatic extensionatic) 3-month extension of time ed in Part I or Part II with the exce Contracts, which must be sent to sit www.irs.gov/efile.and.click.on.e-f	You can ption of Foother the IRS	electronically file Form Form 8870, Information in paper format (see
		-Month Extension of Time. On				
A corporatio	n required	to file Form 990-T and requesting	an automa	atic 6-month extension - check this t	oox and co	mplete
Part I only . All other cor			ips, REMIC	Cs, and trusts must use Form 7004 to	request a	n extension of time
to file incom						
Type or	Name of ex	kempt organization			Employe	r identification number
print	DELMAN	MORTENSON CHARITABLE	FOUNDAT	CION	54-	1739798
File by the	Number, st	reet, and room or suite no. If a P.O. bo.	x, see instru	ctions		
due date for	18 COC	KRELL STREET				
filing your		or post office, state, and ZIP code For	a foreign ad	dress, see instructions		
return See instructions		DRIA, VA 22304	J	•		
	1	D. 11.1, VII 22301	_			
Enter the Re	eturn code 1	for the return that this application	is for (file a	a separate application for each return)	0 4
Application		*	Return	Application		Return
Is For			Code	is For		Code
Form 990			01	Form 990-T (corporation)		07
	·			Form 1041-A		08
Form 990-B			02			
Form 990-E			03	Form 4720		09
Form 990-PI	<u> </u>		04	Form 5227		10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust othe	r than above)	06	Form 8870		12
		care of ► THE FOUNDATIO		FAX No. ▶		
• If the org	anization de	oes not have an office or place of	business ir	n the United States, check this box		
				oup Exemption Number (GEN)		If this is
				art of the group, check this box		and attach
		nd EINs of all members the extens				
				equired to file Form 990-T) extension	of time	
until	231 411 44101			ganization return for the organizatio		ahove. The extension is
			exempt on	ganization retain for the organizatio	ii iiaiiica	above The extension is
		on's return for:				
▶		ear 20 or	(01 000	O and and ma	11/20	20.10
►X	tax year b	eginning 12/	01, 200	9, and ending	11/30	, 20 <u>10</u>
		ered in line 1 is for less than 12 m ccounting period	nonths, che	ck reason Initial return	Final retu	nu
			00 T = = = =	2000	. 1.	
nonref	fundable cr	edits. See instructions		O, or 6069, enter the tentative tax		3a \$ 3,360.
				r 6069, enter any refundable c	redits an	
		ments made Include any prior yea				3b \$ 3,360.
c Baland	ce Due. Sul	otract line 3b from line 3a Include	your payn	nent with this form, if required, by u	sing EFTP	S
(Electi	ronic Federa	al Tax Payment System). See instru	uctions			3c \$
Caution. If	you are oc	oing to make an electronic fund	withdrawa	I with this Form 8868, see Form	8453-EO	and Form 8879-EO fo
payment ins		÷		•		
		n Act Notice, see Instructions	-			Form 8868 (Rev 1-2011

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Form 8868 (Re					Page 2
 If you are 	e filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part II and che	eck this box	► X
Note. Only	complete Part II if you have already been gra	nted an au	tomatic 3-month extension on a pre	viously filed Form 8868	3
	e filing for an Automatic 3-Month Extension,			, ,	-
Part II	Additional (Not Automatic) 3-Month E			conies needed)	***************************************
Type or	Name of exempt organization		ir rance cany and the original (no	Employer identification	number
print	DELMAN MORTENSON CHARITABLE	FOUNDAT	TON	54-1739798	
File by the	Number, street, and room or suite no If a P O bo			34-1739790	
extended	2121 JAMIESON AVENUE, UNIT 1		Cuoris		
due date for			4		
filing your return See	City, town or post office, state, and ZIP code For	r a foreign ad	dress, see instructions.		
instructions	ALEXANDRIA, VA 22314-5712				
Enter the R	eturn code for the return that this application	is for (file a	a separate application for each return)	. 04
Application	1	Return	Application	· · · · · · · · · · · · · · · · · · ·	Return
ls For		Code	Is For		Code
Form 990		01			
Form 990-E		02	Form 1041-A		100
		+			08
Form 990-E		03	Form 4720		09
Form 990-P		04	Form 5227		10
	(sec 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870		12
	not complete Part II if you were not already ks are in the care of ▶ THE FOUNDATION		n automatic 3-month extension on	a previously filed For	m 8868.
 If the org If this is for the who list with the I requ For ca If the 7 State 	ne No ▶ 703 548-2320 ganization does not have an office or place of for a Group Return, enter the organization's foole group, check this box ▶	business in our digit Gro if it is for pa in is for. Intil months, cher	pup Exemption Number (GEN) art of the group, check this box 10/15, 12/01, 2009, and ending ck reason. Initial return	If th ▶ and att 20 11 11/30 , Final return	
b If this estimate	s application is for Form 990-BL, 990-PF, 9 fundable credits. See instructions s application is for Form 990-PF, 990-T, ated tax payments made include any process of the second	4720, o	r 6069, enter any refundable c	redits and the state of the sta	3,360.
	int paid previously with Form 8868			8b \$	3,360.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS					
(Elect	tronic Federal Tax Payment System). See instru			8c\$	
	Sign es of perjury, I declare that I have examined this form, ict, and complete, and that I am authonzed to prepare this fo	including ac	nd Verification companying schedules and statements, and Title	to the best of my knowled	dge and belief,
	BERLIN, RAMOS & COMPANY, P.A.				(Rev 1-2011)
	11200 ROCKVILLE PIKE STE 400 ROCKVILLE, MD 20852			. 3	

Maded 7/13/11 FW

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVEST			IIAAE211	VI.				
Kind of F	Property		Descr	ription		or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
18,061.		#2330.08 SH PROPERTY TY 5,126.		LINGTON NO	RTHERN	Р	VARIOUS	03/01/2010
18,061.		ı					i	44 /45 /0040
76.		T.ROWE PRICE PROPERTY TY				P	VARIOUS -37.	11/15/2010
		T. ROWE PRI				Р	VARIOUS	11/15/2011
8,706.		PROPERTY TY 8,542.	PE: SECURIT	IES			164.	
		T ROWE PRIC				P	VARIOUS	11/15/2010
7,913.		PROPERTY TY	PE: SECURIT	TES			-3,773.	
		T ROWE PRIC				P	VARIOUS	11/15/2010
204,063.		200,207.	FE. SECORII	.165			3,856.	
TOTAL GAIN(L	OSS)						13,145.	

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

ADJUSTED NET INCOME	167,898. 11,843.	179,741.
NET INVESTMENT INCOME	167,898. 11,843.	179,741.
REVENUE AND EXPENSES PER BOOKS	167,898. 11,843.	179,741.
DESCRIPTION	DIVIDEND INCOME VARIOUS SECURITIES CORPORATE BOND INTEREST: PERSHING, LLC	TOTAL

0

500.

500.

500.

TOTALS

TAX RETURN PREPARATION

DESCRIPTION

500.

500.

500.

CHARITABLE PURPOSES

ADJUSTED NET

INVESTMENT INCOME

EXPENSES PER BOOKS

REVENUE

- ACCOUNTING FEES

PART I

FORM 990PF,

AND

NET

INCOME

ATTACHMENT

PAGE 20

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	NET	INVESTMENT	INCOME	3,378.
REVENUE	AND	EXPENSES	PER BOOKS	3,378.
			DESCRIPTION	FEDERAL EXCISE TAX

FORM 990PF, PART I - TAXES

3,378.

3,378.

TOTALS

ATTACHMENT 4

ATTACHMENT 5

ENDING <u>FMV</u>	223,732. 1,966. 58,512. 311,842. 263,782. 20,894. 300,398. 313,211. 639,541. 70,242. 6,086. 203,702. 36,631. 11,043. 399,281. 166,471. 24,317. 37,018. 14,741.
ENDING BOOK VALUE	232,214. 30,136. 30,136. 213,399. 283,266. 147,214. 7,248. 7,248. 335,164. 335,164. 570,043. 370,887. 27,657. 72,225. 331,414. 198,913. 25,808. 22,410. 16,227. 71,214.
BEGINNING BOOK VALUE	224,080. 29,807. 195,215. 283,266. 64,603. 142,538. 142,538. 327,492. 327,492. 25,717. 25,717. 25,717. 25,717. 25,769. 25,769. 25,769. 25,769. 25,769. 200,512.
DESCRIPTION	ABBOTT LABS LSI CORPORATION ANADARKO PETROL AT&T BRISTOL MYERS SQUIBB BURLINGTON NORTHERN SANTA FE COCA COLA COMCAST EDWARDS LIFESCIENCES CORP ELI LILLY EXXON MOBIL JOHNSON & JOHNSON ALCATEL-LUCENT MARSH & MCLENNAN MCDONALDS MEDCO HEALTH MECK & CO. MOTOROLA NOTOROLA NEW YORK TIMES PRIZER PROCTOR & GAMBLE ROYAL DUTCH SHELL SYNGENTA T. ROWE PRICE GROWTH T. ROWE PRICE MEDIA & TELECOM T ROWE PRICE FINANCIAL SERVICE T. ROWE PRICE SCIENCE & TECHNOL T ROWE PRICE SUMMIT UNION PACIFIC

PAGE 23

ENDING <u>FMV</u>	80,718. 184,652. 121,519. 230,903. 6,218.	5,307,572.
ENDING BOOK VALUE	114,928. 112,855. 94,113. 61,010.	4,864,547.
BEGINNING BOOK VALUE	113,741. 109,557. 90,437.	4,928,695.
DESCRIPTION	XEROX NORFOLK SOUTHERN CORPORATION HOME DEPOT BERKSHIRE HATHAWAY HOSPIRA	TOTALS

ATTACHMENT 5 (CONT'D)

- CORPORATE STOCK

FORM 990PF, PART II

PAGE 24

9	ENDING <u>FMV</u>	25,079. 25,000. 14,345. 28,252. 23,557. 33,184. 14,981.
ATTACHMENT 6	ENDING BOOK VALUE	21,301. 21,559. 12,755. 25,406. 22,059. 30,882. 14,225.
BONDS	BEGINNING BOOK VALUE	21,301. 21,559. 12,755. 25,406. 22,059. 30,882. 14,225.
FORM 990PF, PART II - CORPORATE BO	DESCRIPTION	FORD MOTOR BOND 10/21/13 6.75% FORD MOTOR BOND 4/2/14 6.25% GMAC SMARTNOTE 4/15/18 7.25% GMAC SMARTNOTE 8/15/16 6.60% GMAC SMARTNOTE 8/15/16 6.70% GMAC SMARTNOTE 9/15/17 7.25% POINDEXTER 3/15/14 8.75%

PAGE 25

222350-108

ATTACHMENT 7

DESCRIPTION

BEGINNING BOOK VALUE

BOND INTEREST RECEIVABLE

607.

TOTALS

607.

- OTHER ASSETS

PART II

FORM 990PF,

ATTACHMENT 8

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

TAX EXEMPT INTEREST INCOME 8,616.

TOTAL 8,616.

σ

0

0

EXPENSE ACCT

ATTACHMENT

ALLOWANCES AND OTHER

PAGE 27

222350-108

J2E16M 2Y72 10/14/2011 8:32:58 AM V 09-9.4

ATTACHMENT 10

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE JEWISH FEDERATION OF GREATER WASHINGTON 6101 MONTROSE ROAD ROCKVILLE, MD 20852	NONE 501(C)3	CHARITABLE CONTRIBUTION	8,000
VESTERHEM NORWEGIAN-AMERICAN MUSEUM 502 W. WATER STREET DECORAH, IOWA 52101	NONE 501(C)3	CHARITABLE CONTRIBUTION	10,000.
SEAMAN'S CHURCH INSTITUTE 241 WATER STREET NEW YORK, NY 10038	NONE 501 (C) 3	CHARITABLE CONTRIBUTION	10,000.
AMERICAN CANCER SOCIETY 1875 CONNECTICUT AVE, NW, STE 730 WASHINGTON, DC 20009	NONE 501(C)3	CHARITABLE CONTRIBUTION	12,000.
AMERICAN HEART ASSOCIATION 5335 WISCONSIN AVENUE WASHINGTON, DC	NONE 501(C)3	CHARITABLE CONTRIBUTION	10,000.
WETA P.O. BOX 2600 WASHINGTON, DC 20013	NONE 501(C)3	CHARITABLE CONTRIBUTION	8,000.

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

ATTACHMENT 10 (CONT'D)

	AND	ı	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHILDREN'S NATIONAL MEDICAL CENTER 111 MICHIGAN AVE, NW WASHINGTON, DC 20010-2970	NONE 501(C)3	CHARITABLE CONTRIBUTION	12,000.
AUGUSTANA COLLEGE 2001 SOUTH SUMMIT AVE. SIOUX FALLS, SOUTH DAKOTA 57197	NONE 501(C)3	CHARITABLE CONTRIBUTION	100,000.
NATIONAL JEWISH HEALTH 1400 JACKSON STREET DENVER, CO 80206	NONE 501(C)3	CHARITABLE CONTRIBUTION	10,000.
NATIONAL MARITIME HISTORICAL SOCIETY 5 JOHN WALSH BLVD., PO BOX 68 PEEKSKILL, NY 10566	NONE . 501(C)3	CHARITABLE CONTRIBUTION	10,000
ALZHEIMER'S ASSOCIATION 3701 PENDER DRIVE, SUITE 400 FAIREAX, VA 22030	NONE 501 (C) 3	CHARITABLE CONTRIBUTION	12,000.
HABITAT FOR HUMANITY 2115 WARD COURT, NW SUITE 100 WASHINGTON, DC 20037	NONE 501(C)3	CHARITABLE CONTRIBUTION	12,000.

CONTRIBUTOR	
SUBSTANTIAL	AND
Q.	
RELATIONSHIP	

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10,000.

AMOUNT

ATTACHMENT 10 (CONT'D)

5,000.

10,000.

VTRIBUTION	2	z	z
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE CONTRIBUTION	CHARITABLE CONTRIBUTION	CHARITABLE CONTRIBUTION
FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE
	501(C)3	501(C)3	501(C)3
RECIPIENT NAME AND ADDRESS	CAPITAL HOSPICE	WORLD WILDLIFE FUND	CHRONS COLITIS FOUNDATION OF AMERICA
	2900 TELESTAR COURT	1250 24TH ST NW	386 PARK AVE SOUTH, 17TH FLOOR
	FALLS CHURCH, VA 22042	WASHINGTON, DC 20037	NEW YORK, NY 10016

239,000.

TOTAL CONTRIBUTIONS PAID

PAGE 30 ATTACHMENT 10

SCHEDULE D (Form 1041)

Department of the Treasury

*Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

	ame of estate or trust DELMAN MORTENSON CHARITABLE FOUNDATION						Employer identification number 54-1739798		
	: Form 5227 filers need to complete only I	Parts I and II.							
Par	Short-Term Capital Gains and L	osses - Assets	Held One Ye	ar or Less					
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)		
1a			<i>f</i> = <i>x</i> = <i>i</i>						
					<u> </u>				
b	Enter the short-term gain or (loss), if any	, from Schedule D	-1, line 1b			1 b	127.		
2	Short-term capital gain or (loss) from Fo	rms 4684, 6252,	6781, and 882	4		2			
3 4	Net short-term gain or (loss) from partner Short-term capital loss carryover. Enter					3			
	Carryover Worksheet					4	(
5	Net short-term gain or (loss). Combine I	_	. ,			5	127.		
Par	column (3) on the back				<u> </u>		13,1		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)		
6a									
					_				
b	Enter the long-term gain or (loss), if any,	from Schedule D-	-1, line 6b			6b	13,018.		
7	Long-term capital gain or (loss) from Fo	7							
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts								
9	Capital gain distributions					9	-		
10	Gain from Form 4797, Part I					10			
11	Long-term capital loss carryover. Enter to Carryover Worksheet	-				11			
12	Net long-term gain or (loss). Combine lincolumn (3) on the back.	nes 6a through 11	l in column (f).	Enter here and on	line 14a,	12	13,018.		
Ear I	Panerwork Reduction Act Notice see the Ins						e D (Form 1041) 2009		

Part III	Summary of Parts I and II	(1) Beneficiarie	s' (2) Est	ato's	Page 2		
-	Caution: Read the instructions before	completing this p	art.	(see page 5)	or trus		(3) Total
13 . Net	short-term gain or (loss)		13				127.
	long-term gain or (loss):						
a Tota	al for year		14a				13,018.
	ecaptured section 1250 gain (see line 18 of the		14b				
C 28%	6 rate gain		14c				12.145
	al net gain or (loss). Combine lines 13 and 14a		15	7.7.4.4.4.4			13,145.
to Part V, a	ne 15, column (3), is a net gain, enter the gain on Fon and do not complete Part IV If line 15, column (3), is a	m 1041, line 4 (or Fort inet loss, complete Pa	n 990- art IV a	-1, Part I, line 4a) if and the Capital Loss	lines 14a and 18 Carryover Work s	5, column (sheet. as n	'2), are net gains, go ecessarv.
Part IV	Capital Loss Limitation						
_	er here and enter as a (loss) on Form 1041, line	4 (or Form 990-T. Pa	art I. lu	ne 4c. if a trust). the	smaller of:		
				•	ŀ	16 ()
Note: If the	e loss on line 15, column (3) or b \$3,000 he loss on line 15, column (3), is more than \$3,000, o Worksheet on page 7 of the instructions to figure your	or if Form 1041, page	1, lin	e 22 (or Form 990-	T, line 34), is a l	oss, comp	lete the Capital Loss
Part V	Tax Computation Using Maximum Ca						
	41 filers. Complete this part only if both lines 1	•) are gains, or an	amount is ent	tered in P	art Lor Part II and
there is a	in entry on Form 1041, line 2b(2), and Form 10	41, line 22, is more	thar	zero.	amount is em		art for fart if and
	Skip this part and complete the worksheet on p	•	tions	if:			
	line 14b, col. (2) or line 14c, col. (2) is more than						
	Form 1041, line 2b(1), and Form 4952, line 4g and 0-T trusts. Complete this part only if both line			a ar qualified div	vidanda ara in	سراممامینام	incomo in Dod I
of Form 9	990-T, and Form 990-T, line 34, is more than	es 14a and 15 are zero. Skin this nar	gain tand	s, or qualified div	vidends are in orksheet on n	ciuaea in ane 8 of	the instructions if
either line	e 14b, col. (2) or line 14c, col. (2) is more than	zero.		complete the we	orkonoot on pr	ago o oi	
17 Ente	er taxable income from Form 1041, line 22 (or	Form 990-T. line 34	1)	17	Ī		
	er the smaller of line 14a or 15 in column (2)		.,	· • • • • • • • • • • • • • • • • • • •			
	not less than zero	18					
	er the estate's or trust's qualified dividends			·			
fron	n Form 1041, line 2b(2) (or enter the qualified						
	dends included in income in Part I of Form 990-T)	19			ŀ		
	I lines 18 and 19	20		_			
	e estate or trust is filing Form 4952, enter the						
	ount from line 4g; otherwise, enter -0 ▶	21			}	*	
	stract line 21 from line 20. If zero or less, enter-			22		,	
23 Sub	stract line 22 from line 17. If zero or less, enter-	0		23			
24 5-4	and the constitute of the constitute that 47 as 60 a					20, 12	
	er the smaller of the amount on line 17 or \$2,3			24	 -	18, 4	
25 Is th	ne amount on line 23 equal to or more than the Yes. Skip lines 25 and 26; go to line 27 and o				1		
	No. Enter the amount from line 23			25	1	*	
 26 Sub	otract line 25 from line 24		• • •	26			
	the amounts on lines 22 and 26 the same?		• • •	20	 		
-: <u>/ </u>	7	the smaller of line 17 or line	22	27		\$. W	
L		Dis strainer of fine 17 c. in.				<u>`</u>	
28 Ente	er the amount from line 26 (If line 26 is blank, e	enter -0-)		28			
	,	,	• • •	· • • • • • • • • • • • • • • • • • • •	-		
29 Sub	otract line 28 from line 27			29			
30 Mult						30	
	ure the tax on the amount on line 23. Use t	he 2009 Tax Rate	Sch	edule for Estates			
(see	the Schedule Ginstructions in the instructions	for Form 1041)			l	31	<u> </u>
					ſ		
	I lines 30 and 31					32	
	ure the tax on the amount on line 17. Use t	he 2009 Tax Rate	Sch	edule for Estates	and Trusts		
(see	the Schedule Ginstructions in the instructions	for Form 1041)				33	

Schedule D (Form 1041) 2009

G, line 1a (or Form 990-T, line 36) . . .

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

SCHEDULE D-1 (Form 1041)

Department of the Treasury

Continuation Sheet for Schedule D (Form 1041) ► See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2009

Name of estate or trust

DELMAN MORTENSON CHARITABLE FOUNDATION

Employer identification number

54-1739798

a T.ROWE PRICE FINANCIAL SERVICES VARIOUS 11/15/2010 76. 1133	art I Short-Term Capital Gains an				(a) Cost or other han-	· · · · · · · · · · · · · · · · · · ·
T.ROWE PRICE FINANCIAL SERVICES VARIOUS 11/15/2010 76. 1133	(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
	T.ROWE PRICE FINANCIAL					
T. ROWE PRICE SUMMIT MUNI VARIOUS 11/15/2011 8,706. 8,542. 16	SERVICES	VARIOUS	11/15/2010	76.	113.	-37
T. ROWE PRICE SUMMIT MUNI VARIOUS 11/15/2011 8,706. 8,542. 16	······································		- 1			
	T. ROWE PRICE SUMMIT MUNI	VARIOUS	11/15/2011	8,706.	8,542.	164
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

Employer identification number

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year								
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)			
6a #2330.08 SHARES OF BURLINGTON NORTHERN	VARIOUS	03/01/2010	18,061.	5,126.	12,935.			
T ROWE PRICE FINANCIAL SERVICES	VARIOUS	11/15/2010	7,913.	11,686.	-3,773.			
T ROWE PRICE SUMMIT MUNI	VARIOUS	11/15/2010	204,063.	200,207.	3,856.			
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	<u>-</u>							
					<u> </u>			
The state of the s								
6b Total. Combine the amounts in colum	ın (f). Enter here a	nd on Schedule D,	line 6b	<u> </u>	13,018.			