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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

OMB No 1545-0052 2010

For	rcalendar year 2010, or tax year begin	ning			, and e	nding		
G	Check all that apply: Initial r				ormer public o		Final return	
Na	ame of foundation	ded return	Addr	ess chan	ge		Name change A Employer identification	number
L	WASTE MANAGEM			DUND.	ATION		04-3073733	<u></u>
Nui	imber and street (or P O box number if mail is i			004		Room/suite	B Telephone number	
	C/O WASTE MAN	AGEMENT,	INC., 1	001	FANNIN	4000	713-512-62	
Cit	ty or town, state, and ZIP code	77000					C If exemption application is pe	· —
<u></u>		77002		l=4. = =			D 1. Foreign organizations 2. Foreign organizations mei check here and attach coi	eting the 85% test,
H (Check type of organization: X Section 4947(a)(1) nonexempt chart	• —	empt private found Other taxable priva		ntion			
I E	air market value of all assets at end of y			Cash	X Accr	ual	E If private foundation stat under section 507(b)(1)	
	from Part II, col. (c), line 16)	·	ther (specify)	, 040	71001	uui	F If the foundation is in a 6	
-	> \$		mn (d) must be o	n cash t	basis)		under section 507(b)(1)	
_	art I Analysis of Revenue and Exper	nses	(a) Revenue a	and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (necessarily equal the amounts in colu	c), and (d) may not imn (a))	expenses per l	books	` í inco		` income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc.,							
	2 Check X if the foundation is not req	uired to attach Sch. B	1,					
	3 Interest on savings and temporary cash investments							
	4 Dividends and interest from secu	rities						
	5a Gross rents		ļ					
	b Net rental income or (loss)							
ne	5a Net gain or (loss) from sale of assets no Gross sales price for all	ot on line 10	<u> </u>					
Revenue	p assets on line 6a 7 Capital gain net income (from Part IV, li	no 2)				0.		
æ	8 Net short-term capital gain							
	9 Income modifications					•		
	10a Gross sales less returns and allowances							
	b Less Cost of goods sold							
	c Gross profit or (loss)							
	11 Other Income RE	CEIVED						
	12 Total. Add lines 1 through 11		اير	0.		0.	0.	
	13 Compensation of ortices, directors, in 14 Other employee salaries and wag	15 2111	18	0.		0.	0.	0.
	14 Other employee salaries and wag	est o Zon	18					
S	15 Pension plans, employee benefits	S	<u> = </u>					
nse.	16a Legal fees b Accounting fees OGE	<u>JEN, U I</u>				•		
Expenses	c Other professional fees		<u> </u>					
			·					
aŧj	18 Taxes							
nistr	19 Depreciation and depletion		,					
Ē	20 Occupancy							
₹	21 Travel, conferences, and meeting	js						
and	22 Printing and publications							
Operating and Administrative	23 Other expenses	_						<u>-</u>
rati	24 Total operating and administrat					^		_
O	expenses. Add lines 13 through	23		0.	· · · · · · · · · · · · · · · · · · ·	0.	0.	0.
	25 Contributions, girts, graints paid	n to	-	- 0.				U •
	26 Total expenses and disburseme Add lines 24 and 25	:IIIS.		0.		0.	0.	0.
	27 Subtract line 26 from line 12:						0.	<u> </u>
	8 Excess of revenue over expenses and	disbursemente		0.				
	b Net investment income (if negative					0.		
	C Adjusted net income (if negative, a						0.	

		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
Р	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	9.		
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	}	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use	·		
Assets	9	Prepaid expenses and deferred charges			
Ÿ		Investments - U.S and state government obligations			
	ı	Investments - corporate stock	· · · · · · · · · · · · · · · · · · ·		
	ı	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation		•	
	12	Investments - mortgage loans			·
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ▶			<u> </u>
		·			
	16	Total assets (to be completed by all filers)	9.	0.	0.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iabi	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	ŀ	Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
nces		Unrestricted	9.		
aga		Temporarily restricted			
d B	26	Permanently restricted		· · · · · · · · · · · · · · · · · · ·	
ڃ	ŀ	Foundations that do not follow SFAS 117, check here			
P		and complete lines 27 through 31.			
Net Assets or Fund Bala	27	Capital stock, trust principal, or current funds		· · · · · ·	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
¥Α	29	Retained earnings, accumulated income, endowment, or other funds			
ž	30	Total net assets or fund balances	9.	0.	
	۱,,	Total tichilities and not recent thing the language	9.	0.	
_	31	Total liabilities and net assets/fund balances	· · · · · · · · · · · · · · · · · ·	U •	<u> </u>
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		it agree with end-of-year figure reported on prior year's return)		1	9.
		amount from Part I, line 27a		2	0.
		r increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	9.
5	Decr	eases not included in line 2 (itemize) ACCRUAL ADJUST	MENT	5	9.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	0.

04 - 3073733WASTE MANAGEMENT CHARITABLE FOUNDATION Page 3 Form 990-PF (2010) Part IV Capital Gains and Losses for Tax on Investment Income How acquired - Purchase (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) 1a b NONE C đ (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) b C d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any а b C d е If gain, also enter in Part I, line 7 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (b) Base period years Calendar year (or tax year beginning in) Net value of noncharitable-use assets Adjusted qualifying distributions <u>282,681.</u> 2.721764 769,391. 2009 2,237,233. 1,972,418. 1.1342592008 4,187,723. .400411 1,676,812. 2007 ,351,152. 5,358,717. .252141 2006 1,787,548 6,629,647. .269629 2005 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years 3 the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2010 from Part X, line 5

4.778204 .955641 0. 5 Multiply line 4 by line 3 5 0. 6 6 Enter 1% of net investment income (1% of Part I, line 27b) 0. 7 7 Add lines 5 and 6 0. 8 Enter qualifying distributions from Part XII, line 4 8 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

	1990-PF (2010) WASTE MANAGEMENT CHARITABLE FOUNDATION		3073			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see ir	ıstru	ctio	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 letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	_1_				0.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
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				0.
6	Credits/Payments:			********		
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6 , 451 .					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d]				
7	Total credits and payments. Add lines 6a through 6d	7_			6,4	51.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				51.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 0 . Refunded ▶	11			6,4	51.
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	IN			Yes	No
	any political campaign?			1a		Х
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	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
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 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ļ	2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		Х
	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:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			٠,,	
	remain in the governing instrument?			6	Х	47
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7		Х
_	If "Yes," complete Part II, col (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
_	TX					
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)	27	/2	<u>, </u>		
_	of each state as required by General Instruction G? If "No," attach explanation		/A	8b		<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				v
4.0	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		$\frac{X}{X}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Λ

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form **990-PF** (2010)

X

X

3b

4a

N/A

orm 990-PF (2010) WASTE MANAGEMENT CHARTTA			04-30/3/	<u> 33</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)		
5a*During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	* **		es X No		ĺ
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire				ł
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	in Regulations	,_		
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t			▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	N	I/A 🔲 Ye	es L No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		_	6b	X
If "Yes" to 6b, file Form 8870			-		ļ
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	У		
List all officers, directors, trustees, foundation managers and their	,	(c) Compensation	(d) Contributions to	T (-)	Evnonna
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense ount, other
(-)	to position	`enter`-0-)	compensation	all	owances
	4				
ODD OMA MOVENIM 1	4	1	,		0
SEE STATEMENT 1		0.	0.	 	0.
	-				
	-				
				 	
	4				
				 	
	-				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "	L	<u> </u>	
	(b) Title, and average	l litter NONE.	(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acco	ount, other
NONE	devoted to position		compensation	an	owances
NONE				1	
		 		├—	
	-			1	
	ļ	 		 	
	+				
		ļ		\vdash	
	4				
		ļ		 	
	1				
Total number of other employees paid over \$50,000	<u> </u>	1		<u> </u>	0
I OLAI HUMBOL VI VIIICI CHIDIOYEES PAIN OYEL DJV,UUU					J

Form **990-PF** (2010)

Form **990-PF** (2010)

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X Minimum Investment Return (All domestic foundations must complete this part	Foreign four	ndations, see ins	structions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	0.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	0.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	0.
6	Minimum investment return. Enter 5% of line 5		6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations check here and do not complete this part.)	oundations an	nd certain	
1	Minimum investment return from Part X, line 6		1	0.
2a	Tax on investment income for 2010 from Part VI, line 5			
b	Income tax for 2010. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	0.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	0.
6	Deduction from distributable amount (see instructions)	[6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	0.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			_
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	0.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:		l :	
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		4	0.
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	ļ	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	0.
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the	a foundation of	sublified for the car	ation

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:	~~~~ 11			
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 1,465,736.				
bFrom 2006 1,092,452.				
cFrom 2007 dFrom 2008 1,480,182. 2,139,432.				
855 855				
e From 2009 /55,355. f Total of lines 3a through e	6,933,157.			
4 Qualifying distributions for 2010 from	0,555,157.			
Part XII, line 4. ►\$ 0.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	,			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,933,157.			
b Prior years' undistributed income. Subtract	1		· · · · · · · · · · · · · · · · · · ·	
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 2009 Subtract line			0.	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	1,465,736.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	5,467,421.			
10 Analysis of line 9:				
a Excess from 2006 1,092,452.				
b Excess from 2007 1,480,182.	<i>:</i> .			
c Excess from 2008 2,139,432. dExcess from 2009 755,355.				
	•			
e Excess from 2010				Form 990-PF (2010)

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Form **990-PF** (2010)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment	T	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		·
a Paid during the year SEE STATEMENT 7	or šubstantial contributor	recipient		
Total		'	▶ 3a	0.
b Approved for future payment NONE Total			▶ 3b	0.

WASTE MANAGEMENT CHARITABLE FOUNDATION 04-3073733 Form 990-PF (2010) Part XVI-A **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) (C) Exclu-sion code (a) Business code Related or exempt (b) (d) Amount **Amount** function income 1 Program service revenue: C g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate. a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: C d 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of Line No. the foundation's exempt purposes (other than by providing funds for such purposes). ▾ NOT APPLICABLE

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the co	the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of								
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
•	a Transfers from the reporting foundation to a noncharitable exempt organization of:									
a	(1) Cash	• •	ation to a nonchantable exe	ilipi oi y	anzadon ot.			1a(1)		х
	(2) Other							1a(2)		X
ь	Other tran							10(2)		 -
·		s of assets to a noncharital	hle evernt organization					16(1)		х
	• •		ncharitable exempt organiza	ation				16(2)		X
	. ,	al of facilities, equipment, (. •	allon				1b(3)		X
		bursement arrangements	01 00101 033013					16(4)		X
	• •	s or loan guarantees						1b(5)		X
		-	mbership or fundraising so	dicitation	าด			1b(6)		X
c			iling lists, other assets, or p					1c		X
	_		_		•	vave show the fair r	narket value of the goods, ot		ete	
٠			•				or sharing arrangement, sh		,	
		• • •	other assets, or services re		o 1000 than tan than to take	o m any transaction	or onaring arrangement on	• • • • • • • • • • • • • • • • • • • •		
a۱	ine no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and st	naring an	angeme	nts
		(4)		1/A						
				.,				-		
		. , . ,								
					···	···				
						 				
							······································			
	——— 		 							
	 		-	· · ·						
	<u> </u>									
										
								-		
										
2 a	Is the four	ndation directly or indirect	lly affiliated with, or related	to, one o	or more tax-exempt organiz	zations described				
		<u>=</u>	than section 501(c)(3)) or				X	Yes		No
b		omplete the following sche) "						
_	,	(a) Name of org			(b) Type of organization		(c) Description of relationship	p		
ĪΜ	PAC	···			527	SEE STA	PEMENT 3			
M	I PAC	OF MICHIGA	N		527					
	X PAC				527					
M	I PAC	OF TENNESS	EE		527					

							e best of my knowledge and belie	ıf, it is tri	ie, corre	ct,
Si	gn and o	complete Declaration of prepa	rer (other than taxpayer or fiduci	iary) is ba	sed on all information of which p	oreparer has any know	edge			
He	ere 📐	1			1 11-9	-// 🔪 /	lice President			
		Signature of officer or tru	stee		Date		Title			
_		Print/Type preparer's na	ime Prepa	arer's sig	gnature	Date	Check if PTIN			
Self- employed										
Pa	id	BROOKE KIT	CHEN /	mo	de l'all	III RIII				
	eparer	Firm's name ▶ DEL		1P	· · · · · · · · · · · · · · · · · · ·		Firm's EIN ▶			
	e Only									
Ī	,	Firm's address ▶ 11	11 BAGBY STR	REET	, SUITE 4500					
			USTON, TX 77				Phone no. 713-9	82-	200	0
-		·	.,			·· ·		n 990		

	T OF OFFICERS, D FOUNDATION MANA		STAT	EMENT 1
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
BARRY H. CALDWELL C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	PRESIDENT & DI	RECTOR 0.	0.	0.
LINDA SMITH C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	VP & SECRETARY	0.	0.	0.
CHERIE C. RICE C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002		& DIRECTOR		0.
CARLTON YEARWOOD C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	VP 1.00	0.	0.	0.
JAY ROMANS C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	VP 1.00	0.	0.	0.
RICK L. WITTENBRAKER C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	VP & DIRECTOR	0.	0.	0.
ROBERT G. SIMPSON C/O WASTE MANAGEMENT, INC.; 1001 FANNIN, SUITE 400 HOUSTON, TX 77002	VP & DIRECTOR	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF

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

STATEMENT

2

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROSEMARY EAPEN C/O WASTE MANAGEMENT, INC., 1001 FANNIN, SUITE 4000 HOUSTON, TX 77002

TELEPHONE NUMBER

713-512-6200

FORM AND CONTENT OF APPLICATIONS

WRITTEN REQUEST INCLUDING EVIDENCE OF RELIGIOUS, CHARITABLE, SCIENTIFIC, OR LITERARY ACTIVITY STATUS, I.E. SECTION 501(C)(3) STATUS.

7(18)

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

ALL GRANTS ARE MADE FOR THE PURPOSE OF RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY, OR OTHER PUBLIC PURPOSES.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 3

NAME OF AFFILIATED OR RELATED ORGANIZATION

WM PAC

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON CONTROL - COMMON BOARD MEMBERS

NAME OF AFFILIATED OR RELATED ORGANIZATION

WMI PAC OF MICHIGAN

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON CONTROL - COMMON BOARD MEMBERS

NAME OF AFFILIATED OR RELATED ORGANIZATION

WMX PAC OF OKLAHOMA

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON CONTROL - COMMON BOARD MEMBERS

NAME OF AFFILIATED OR RELATED ORGANIZATION

WMI PAC OF TENNESSEE

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON CONTROL - COMMON BOARD MEMBERS

Form **8868**

(Rev. January 2011) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

ightharpoons

	u are filing for an Additional (Not Automatic) 3-Month Ex					
	t complete Part II unless you have already been granted a					
	onic filing (e-file). You can electronically file Form 8868 if					
	ed to file Form 990-T), or an additional (not automatic) 3-mo					
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for Tran	sfers A	Associated With Cei	taın
Persor	nal Benefit Contracts, which must be sent to the IRS in par	er format	(see instructions). For more details on th	ne elec	tronic filing of this f	orm,
visit w	ww irs gov/efile and click on e-file for Chanties & Nonprofits	3			·	
Part						
A corp	oration required to file Form 990-T and requesting an autoi	matic 6-mo	onth extension - check this box and com	plete		
Part I	only				>	
	er corporations (including 1120-C filers), partnerships, REN ncome tax returns	IICs, and t	rusts must use Form 7004 to request an	exten	sion of time	
Type o		<u>-</u>		Empl	oyer identification	number
print	Mario of oxompt organization				•	
P1 11 1	WASTE MANAGEMENT CHARITABLE	E FOUI	NDATION	0	4-3073733	
File by ti due date	Number street and some provide an If a D.O. have					
iling you	C/O WASTE MANAGEMENT, INC.					
eturn S nstructi						-
	HOODION, IN 77002					
Enter 1	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Littor	The Hotelin dode for the retent that the application is to the	о а обрага				
Applic	ation	Return	Application			Return
ls For	1.41	Code	Is For			Code
Form 9		01	Form 990-T (corporation)			07
	990-BL	02	Form 1041-A			08
	990-EZ	03	Form 4720			09
	990-PF	04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	990-T (trust other than above)	06	Form 8870			12
	DON P. CARPENT					
• The	books are in the care of > 1001 FANNIN, S	UITE 4	400 - HOUSTON, TX 77	002		
Tel	ephone No ▶ 713-512-6200		FAX No. ▶			
• If th	ne organization does not have an office or place of busines	s in the Ur	nited States, check this box		•	لـــا
If the	nis is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If thi	s is foi	the whole group, c	heck this
box 🕨	If it is for part of the group, check this box	and atta	ich a list with the names and EINs of all	memb	ers the extension is	for
1	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time unt	H		
	AUGUST 15, 2011 , to file the exemp	t organiza	tion return for the organization named a	bove.	The extension	
	s for the organization's return for					
	lacksquare X calendar year 2010 or					
	tax year beginning	, an	d ending			
2	If the tax year entered in line 1 is for less than 12 months, o	check reas	on: Initial return Fina	ıl returi	n	
	Change in accounting period					
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		-	
	nonrefundable credits. See instructions.			3a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	estimated tax payments made. Include any prior year over			3b	\$ 6	,541.
С	Balance due. Subtract line 3b from line 3a Include your pa	ayment wit	th this form, if required,			
	by using EFTPS (Electronic Federal Tax Payment System)			3с	\$	0.
<u> </u>	If you are going to make an electronic fund withdrawal	with this E	orm 8868, see Form 8453-FO and Form	8870.	EO for navment inet	nictions

Form 886	8 (Rev 1-2011)					Page 2	
• If you a	re filing for an Additional (Not Automatic) 3-Month E	xtension, o	complete only Part II and check this be	ЭX		► X	
Note. On	y complete Part II if you have already been granted an	automatic	3-month extension on a previously filed	Form	8868.		
	re filing for an Automatic 3-Month Extension, compl		, , , , , , , , , , , , , , , , , , , ,				
Part II	Additional (Not Automatic) 3-Month I	Extensio	n of Time. Only file the original (no o	opies r	needed).		
Type or	Name of exempt organization			Emp	loyer iden	tification number	
print	WASTE MANAGEMENT CHARITABLE	FOUN	DATION	0	4-307	3733	
File by the extended Number, street, and room or suite no. If a P O box, see instructions.							
due date for	C/O WASTE MANAGEMENT, INC.,	1001	FANNIN, NO. 4000				
filing your return See instructions	City, town or post office, state, and ZIP code. For a HOUSTON, TX 77002	foreign add	iress, see instructions				
		-					
Enter the	Return code for the return that this application is for (fi	ile a separa	te application for each return)			0 4	
Applicati	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990		01					
Form 990		02	Form 1041-A			08	
Form 990	-EZ	03	Form 4720			09	
Form 990		04	Form 5227			10	
Form 990	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
	-T (trust other than above)	06	Form 8870			12	
STOP! D	not complete Part II if you were not already grante	d an autor	natic 3-month extension on a previou	ısly file	d Form 8	868.	
	DON P. CARPENT						
• The bo	poks are in the care of \blacktriangleright 1001 FANNIN, S	UITE	400 - HOUSTON, TX 77	<u> 7002</u>			
Teleph	one No ▶ 713-512-6200		FAX No. 🕨				
• If the	organization does not have an office or place of busine	ss in the Ur	nited States, check this box			▶	
• If this	s for a Group Return, enter the organization's four digr	t Group Exe	emption Number (GEN) If th	is 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 EINs of all	memb	ers the ex	tension is for	
	quest an additional 3-month extension of time until	NOVEM	BER 15, 2011.				
	calendar year 2010 , or other tax year beginning _		, and ending				
6 If th	ne tax year entered in line 5 is for less than 12 months,	check reas	on Initial return	Final r	etum		
L	☐ Change in accounting period						
7 Sta	te in detail why you need the extension						
	XPAYER RESPECTFULLY REQUEST			IER	INFOR	MATION	
NE	CESSARY TO FILE A COMPLETE	AND A	CCURATE RETURN.				
				,			
	nis application is for Form 990-BL, 990-PF, 990-T, 4720	, or 6069, e	inter the tentative tax, less any			0	
	refundable credits. See instructions			8a	\$	0.	
	nis application is for Form 990-PF, 990-T, 4720, or 6069						
	payments made Include any prior year overpayment a	allowed as a	a credit and any amount paid	<u> </u>		6,541.	
	eviously with Form 8868			8b	\$	0,541.	
	ance due. Subtract line 8b from line 8a. Include your p		th this form, if required, by using		_	0	
EF	PS (Electronic Federal Tax Payment System). See inst		nd Verification	8c	\$	0.	
Under pen	alties of perjury, I declare that I have examined this form, inclu orrect, and complete, and that I am authorized to prepare this	iding accomp		e best o	f my knowle	edge and belief,	
•				D-4-	• •••	10/0011	
Signature	► BROOKE KITCHEN Title ►	CPA		Date	▶ 08/	12/2011	

Form 8868 (Rev. 1-2011)