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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2010

For	caler	ndar year 2010, or tax	year beginning	9		, :	2010, and en	ding	, 20
G	Chec	k all that apply	Initial return	1	Initial Retu	ırn of a form	er public cha	rity	Final return
			Amended r	eturn	Address c	hange	Na Na	me change	
N	ame c	of foundation						A Employer ide	ntification number
		Grace Hu	ghes Fou	ındatio	n			20-1635	
N	umbe	r and street (or PO box		Il is not delive	ed to street a	ddress)	Room/suite	B Telephone nur	mber (see the instructions) -3703
	ity or i	town, state, and ZIP co						C If exemption applica	
J	y O.	Lime Spr		52155				D 1 Foreign organiz	ations, check here
Н	Chec	k type of organization		01(c)(3) exem	not private fou	ndation		2 Foreign organiz	ations meeting the 85%
$\ddot{\Box}$		on 4947(a)(1) nonexem		· —	r taxable priv		n	E If private foundation	n status was
		rket value of all assets		J Accounting			Accrual	terminated under se 507(b)(1)(A), check	
•		om Part II, col. (c), line	at end of	Other (] 000	, , , , , , , , , , , , , , , , , , , ,	F If the foundation is	ın a 60-month
▶ \$	•		2,787.		umn (d) must	be on cash I	pasis)	termination under s 507(b)(1)(B), check	
		Analysis of Revenue						<u> </u>	(d) Disbursements
		(The total of amounts in (c), & (d) may not neces amounts in column (a) (columns (b), ssarily equal the (see instr))	expe	renue and nses per ooks	1 ''	vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc (attach schedule)	received			,			
	2	` + 7	oundation is no	ot _					7 7 3 A
ب		required to attach Sch	В		<u> </u>				
2011	3	Interest on savings and temp	cash investments		17.		17.	17	
	4	Dividends and interest	from securities		7,980.	7	,980.	7,980	. 247
2	5a	Gross rents .							
	b	(Net rental income or (loss)		_)		4			
≨	6a	Net gain/(loss) from sale of as		(5 , 610.)				
<u>~</u> 2	b	b Gross sales price for all assets on line 6a 187, 695.		_					
Zevenue 4Y	7	Capital gain net income (from	Part IV, line 2)			(5	,610.)		
₹ I E	8	Net short-term capital	gaın					(5,610	•)
:	9	Income modifications					Į		-, ` ` '
•	10a			_				-	
	For	tess of the Book of EN	<u> 78∤</u>	~ -			ı		!
	1 c	Gross profit or (loss) (a		·)		<u> </u>			
	1/2	Other income (attach)	4. 417 F	•	2,387.		207	2,387	
_		Total Add lines 1 thro	ugh 31 !		2,301.		,387.	2,301	•
		compensation of officers, directors trustees etc.	السيار						
ý	14	Other employee salar							
nses	15	Pension plans, employ Legal fees (attach schi							
хре	1	Accounting fees (attach	•		500.	-	500.	500	
Ü	1	Other professional fee							-
ıtiv	17	Interest	e (allaon so leadle)						
stra	18	Taxes (attach schedule) (se	ee instructions)		33.	-	33.	33	
į	19	Depreciation (attach sch.)		,					
۸dn	20	Occupancy .					-	 	<u> </u>
γ pc	21	Travel, conferences, a	nd meetings .						
Operating and Administrative Expen	22	Printing and publicatio	•	-					
ţin	23	Other expenses (attac		-	34.		34.	34	. 34.
era	24	Total operating and a	•		-			-	
ŏ		expenses Add lines 1		. [567 <u>.</u>		567.	567	
	25	Contributions, gifts, gr			9,000.				19,000.
_	26	Total exp & disbursements A		1	9,567.		567.	567	. 19,034.
	27	Subtract line 26 from I	ine 12			 -			
	a	Excess of revenue or and disbursements ·	ver expenses	. (1	7,180.)	L	<u></u>		
	b	Net investment incor	ne (if neg , enter -0) -)		1	,820.		
	c	Adjusted net income	(if neg , enter -0-)	1				1,820	•



P	art II	Attached schedules and amounts in the description column should be for	Beginning of year	End o	of year
	ant III	end-of-year amounts only (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less. allowance for doubtful accts ▶			
	4	Diadeas assertable N		<u> </u>	
	•				
	_ ا	Less. allowance for doubtful accts ▶			
	5	Grants receivable		<u>_</u>	
	6	Receivables due from officers, directors, trustees, and other			
	7	disqualified persons (attach schedule) (see the instructions)			
	'	receivable (attach schedule) . >			··
		Less allowance for doubtful accounts			
Ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			_
Ÿ	10a	Investments - U S and state govt obligations (attach schedule)	-		
		Investments - corporate stock (attach schedule)	60,488.	60,488.	110,696.
		Investments - corporate bonds (attach schedule)	240,356.	240,356.	212,091.
	11	Investments - land, buildings,		210/0000	222,032.
	' '	Investments - land, buildings, and equipment basis		^^	
		(attach schedule)			
	12	investments - mortgage loans	_		
	13	Investments - other (attach schedule)		<u> </u>	
	14	Land, buildings, and equipment basis Less accumulated depreciation	·		- 1
		Latid, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
	1	instructions Also, see page 1, item l)	300,844.	300,844.	322,787.
	17	Accounts payable and accrued expenses			
	18	Grants payable			-
(A)	19	Deferred revenue			577 . ÎT Î E 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable (attach schedule)			1
Ë	22	Other liabilities (describe)			* * * * * * * * * * * * * * * * * * * *
	**	other habilities (describe)			, ,
	23	Total liabilities (add lines 17 through 22)			, .
_	23	Total liabilities (add lines 17 through 22)			· ·
	1	and complete lines 24 through 26 and lines 30 and 31.	200 044	200 707	
es	24	Unrestricted	300,844.	322,787.	-
au	25	Temporarily restricted		<u></u>	, *_ ,
Net Assets or Fund Balances	26	Permanently restricted			
<u> </u>	1	Foundations that do not follow SFAS 117, ck. here ▶ 📗			, ,
בַּ		and complete lines 27 through 31.			1 Aug. A
5	27	Capital stock, trust principal, or current funds			- / (* · · · · · · · · · · · · · · · · · ·
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund.			
sse	29	Retained earnings, accumulated income, endowment, or other funds			~ ; - ;
Ë		•			* ' ' ' '
Se	30	Total net assets or fund balances (see the instructions)	300,844.	322,787.	
	31	Total liabilities and net assets/fund balances (see the		322,101.	1
	31		300,844.	322,787.	
7	, ₂₅ III	Instructions)		344,101.	
		Analysis of Changes in Net Assets or Fund Bala			1
1		net assets or fund balances at beginning of year - Part II, column ((a), line 30 (must agree v		200 011
		of-year figure reported on prior year's return)	• • • • • • • • • •	<u>1</u>	300,844.
		r amount from Part I, line 27a		<u>2</u>	(17,180.)
3	Othe	r increases not included in line 2 (itemize) $ ightharpoonup$ Increase in	n market val	ue 3	21,943.
4	Add I	ines 1, 2, and 3		4	305,607.
5		eases not included in line 2 (itemize)		5	
6		net assets or fund balances at end of year (line 4 minus line 5) - P	art II, column (b), line 30	6	305,607.
		The state of the s	, (3),		

Part IV Capital Gains	and Losses for Tax on Inv	estment Incom	<u>ne</u>		
(a) List and describe t	he kınd(s) of property sold (e g , re	al estate,	(b)How acquired P - Purchase	(c) Date acquired	(d) Date sold
	use, or common stock, 200 shs MI	LC Co)	D - Donation	(mo , day, yr)	(mo , day, yr)
1a Ameriprise Re	demptions		P	10/01/2009	12/31/2010
b				 	
С				-	
d					
е					<u> </u>
(e) Gross sales price	(f) Depreciation allowed	1 ,	other basis	1	n or (loss)
107 605	(or allowable)	plus expe	nse of sale 193,305.	(e) plus (f) minus (g) (5,610.)
a 187,695.		 	193,303.	 	(3,610.)
b		 			
<u>c</u>					
d		-			
e		11. 11. 6	40/04/00	(1) 0 (0-	l (h)
Complete only for assets sho	owing gain in column (h) and owned			7	l (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis	1 ''	ss of col (ı)	1	less than -0-) or
	as of 12/31/69	over col	(j), if any	Losses (f	rom col (h))
<u>a</u>				 	(5,610.)
<u>b</u>		 			
C					
d		- 			
е				 	
2 Capital gain net income or (n	net capital loss) · · If gain,	also enter in Part I, , enter -0- in Part I,	line 7		/E 610 \
	_		line /	2	(5,610.)
	r (loss) as defined in sections 1222		_		
=	ne 8, column (c) (see the instruction	ns)	> · ·		
If (loss), enter -0- in Part I, lir			. <u> </u>	3	
	Under Section 4940(e) for				
For optional use by domestic pri	vate foundations subject to the sec	tion 4940(a) tax on	net investment inc	come)	
If section 4940(d)(2) applies, leav	ve this part blank				
Afan Aha Sarradakan bahla Saraha	and the distributed				ПусьПис
	section 4942 tax on the distributab		•	1007	∐ Yes ∐ No
	qualify under section 4940(e) Do i			ntrios	
(a)	t in each column for each year, see	the instructions be	(c)	nules	
Base period years	Adjusted avalifying distribu	itions .	Net value of	Dist	ribution ratio
Calendar year (or tax year beg	g in) / Adjusted qualifying distribution	nonch	arıtable-use asset	s (col (b) d	ivided by col (c))
2009					
2008					
2007					
2006					
2005					
2 Total of line 1, column (d)				2	
	the 5-year base period - divide the	•	, or by the number	l i	
of years the foundation has t	peen in existence if less than 5 year	rs	••	3	
Enter the net value of nonch	aritable-use assets for 2010 from P	Part X, line 5 .		4	
Multiply line 4 by line 3 .				5	
Enter 1% of net investment i	ncome (1% of Part I, line 27b) .			6	
Add lines 5 and 6				7	
B Enter qualifying distributions	from Part XII, line 4			8	
	r than line 7, check the box in Part	VI, line 1b, and com	plete that part usi	ng a 1% tax rate See	the Part VI
instructions			•		

Form	990-PF (2010) Grace Hughes Foundation 20-1635/	44	Pa	age 5
Pa:	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 meaning of section 512(b)(13)? If "Yes"attach schedule (see instructions)			
	If "Yes," attach schedule (see instructions)	11		Χ
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract			
	before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶			
14	The books are in care of ▶ Larry Gates Telephone no ▶ 563	-56	6-2	625
	Located at ▶213 Willard IA Lime Springs ZIP+4 ▶ 52155			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			>
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the		•	
	foreign country			
Par	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.	٠.	Yes	No
1a	During the year did the foundation (either directly or indirectly)		-	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		 5	
	a disqualified person? Yes X No	,	4	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	ربار خور		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	B .	14. ·	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		,	
	for the benefit or use of a disqualified person)?	200	(1) (1) (1)	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	,		
	if the foundation agreed to make a grant to or to employ the official for a period		şi.	
	after termination of government service, if terminating within 90 days)		*	
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		,	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b	ن بشمید د هد	
	Organizations relying on a current notice regarding disaster assistance check here		- ,	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	:		,
٠	that were not corrected before the first day of the tax year beginning in 2010?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	ر در در	:	
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	2		
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d	1		
u	and 6e, Part XIII) for tax year(s) beginning before 2010? Yes X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		-	
	to all years listed, answer "No" and attach statement - see the instructions)	2b		
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	 -		. 1
C	► 20 , 20 , 20 , 20	- *, -		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business	1	* 1	
-	enterprise at any time during the year?	,		
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation		v	
-	or 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)	1		
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2010)	3b		
4a		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 2010?	4b		X
	Parket and the second s			240

LOHI	990-PF (2010) Grace Hughes Fo	undation		20-163	
Par	VII-B Statements Regarding Activ	vities for Which F	orm 4720 May Be R	equired (continue	d)
	During the year did the foundation pay or incur				
	(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	🗌 Yes 🏻 N	o
	(2) Influence the outcome of any specific publ				, ,
	on, directly or indirectly, any voter registrat	ion drive?	. ,	Yes 🕅 N	o
	(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	Yes 🛛 N	o -
	(4) Provide a grant to an organization other th				-
	in section 509(a)(1), (2), or (3), or section 4		=	Yes 🛛 N	0
	(5) Provide for any purpose other than religiou				
	educational purposes, or for the prevention			Yes 🗓 N	0
b	If any answer is "Yes" to 5a(1)-(5), did any of t				
	Regulations section 53 4945 or in a current no				5b
	Organizations relying on a current notice regar			▶ 🗍	-
С	If the answer is "Yes" to question 5a(4), does t	he foundation claim ex	emption from the	_	
	tax because it maintained expenditure respons	sibility for the grant?		Yes N	0
	If "Yes," attach the statement required by Regi			– –	
6a	Did the foundation, during the year, receive an	y funds, directly or indi	rectly, to pay		
	premiums on a personal benefit contract?			Yes 🛛 N	o
b	Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefit c	ontract?	6b X
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the found	ation a party to a prohit	oited tax shelter transactio	n? 🗌 Yes 🏻 N	o,
b	If "Yes," did the foundation receive any procee	ds or have any net inco	ome attributable to the tran	nsaction?	. 7b
Par	t VIII Information About Officers	Directors, Truste	es, Foundation Ma	nagers, Highly Pai	d Employees,
	and Contractors				
1 L	ist all officers, directors, trustees, foundation	n managers and their	compensation (see the	instructions).	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account,
	(a) Name and address	devoted to position	(If not paid, enter -0-)	and deferred comp	other allowances
ר				<u> </u>	
	Larry Gates	Bd Member	_		
- 2	213 Willard Lime Spring	3	0		
	213 Willard Lime Spring Robert Hughes	3 Bd Member			
	213 Willard Lime Spring Robert Hughes 328 8th Street East	3 Bd Member 1	0		
	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush	3 Bd Member 1 Bd Member	0		
	213 Willard Lime Spring Robert Hughes 328 8th Street East	3 Bd Member 1			
	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush	3 Bd Member 1 Bd Member	0		
	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush	3 Bd Member 1 Bd Member	0		
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	213 Willard Lime Spring Robert Hughes B28 8th Street East Michelle Bush B2001 35th Street Compensation of five highest-paid employee	3 Bd Member 1 Bd Member 1	0	e instructions).	
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street	3 Bd Member 1 Bd Member 1	0		
2 C	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE."	3 Bd Member 1 Bd Member 1 s (other than those in	0 0 cluded on line 1 - see th	(d) Contributions to	(e) Expense account
2 C	213 Willard Lime Spring Robert Hughes B28 8th Street East Michelle Bush B2001 35th Street Compensation of five highest-paid employee	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	(e) Expense account other allowances
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	3 Bd Member 1 Bd Member 1 s (other than those in	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit	
2 (a	213 Willard Lime Spring Robert Hughes 828 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE."	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in hours per week	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	
2 (a l	213 Willard Lime Spring Robert Hughes 328 8th Street East Michelle Bush 22001 35th Street Compensation of five highest-paid employee f none, enter "NONE.") Name and address of each employee paid more than \$50,000	Bd Member 1 Bd Member 1 s (other than those in devoted to position	0 0 cluded on line 1 - see th	(d) Contributions to employee benefit plans and deferred	

Form 990-PF (2010)

All other program-related investments See instructions

Total Add lines 1 through 3

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 b Average of monthly cash balances 1 b c Fair market value of all other assets (see the instructions) 1 t d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see the instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations
a Average monthly fair market value of securities
c Fair market value of all other assets (see the instructions)
d Total (add lines 1a, b, and c)
d Total (add lines 1a, b, and c)
(attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see the instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations
(attach detailed explanation) Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5. Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations
2 Acquisition indebtedness applicable to line 1 assets
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see the instructions)
see the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4
Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4
6 Minimum investment return. Enter 5% of line 5
Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations
the state of the s
and certain foreign organizations check here ▶ and do not complete this part)
1 Minimum investment return from Part X, line 6 1
2 a 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) 2b
c Add lines 2a and 2b
3 Distributable amount before adjustments Subtract line 2c from line 1
4 Recoveries of amounts treated as qualifying distributions
5 Add lines 3 and 4 5
6 Deduction from distributable amount (see the instructions)
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1
Part XII Qualifying Distributions (see the instructions)
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26
b Program-related investments-total from Part IX-B
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes
3 Amounts set aside for specific charitable projects that satisfy the
a Suitability test (prior IRS approval required)
b Cash distribution test (attach the required schedule)
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 19,034.
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 the instructions)
6 Adjusted qualifying distributions. Subtract line 5 from line 4
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2010)

_	TOTAL OTTAL STITUTE (See Inc.				
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7				
2	Undistributed income, if any, as of the end of 2010				r. John v.
а	Enter amount for 2009 only				
b	Total for prior yrs . 20, 20 , 20				
3	Excess distribs carryover, if any, to 2010				
а	From 2005	,			
	From 2006				
					·
	From 2007				
	From 2008				' '
е	From 2009				
f	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 19,034.				
а	Applied to 2009, but not more than line 2a				
	Applied to undistributed income of prior				
_	years (Election required - see the instr)				,
	· · · · · · · · · · · · · · · · · · ·				
C	Treated as distributions out of corpus				
	(Election required - see the instructions) .				m a
	Applied to 2010 distributable amount .	10 004		-	
	Remaining amt_distributed out of corpus .	19,034.			1
5	Excess distribs carryover applied to 2010 .				
	(If an amount appears in column (d), the				
	same amount must be shown in col (a))				
6	Enter the net total of each column as				i
	indicated below:				İ
а	Corpus Add lines 3f, 4c, & 4e. Subtract line 5	19,034.			
	Prior years' undistributed income Subtract				
	line 4b from line 2b			Í	ļ
_	· · · · · · · · · · · · · · · · · · ·				<u> </u>
С	Enter the amount of prior years' undistributed				ı E
	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				1
	amount - see the instructions				
е	Undistributed income for 2009 Subtract				
	line 4a from line 2a Taxable amount -				
	see the instructions				
f	Undistributed income for 2010 Subtract				
•	lines 4d and 5 from line 1. This amount				
	must be distributed in 2011				
7	Amounts treated as distributions out of	· ,			1
•					
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see the				
	instructions)				
8	Excess distributions carryover from 2005				'
	not applied on line 5 or line 7 (see the				
	ınstructions)				
9	Excess distributions carryover to 2011.		-		
	Subtract lines 7 and 8 from line 6a	19,034.		,	
10	Analysis of line 9				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008 .				
	Excess from 2009				
_е	Excess from 2010 . 19,034.				

US990P10

20-1635744

Page 10

Form 990-PF (2010) Grace Hughes Foundation

BCA

Grants and Contributions Paid Du	If recipient is an individual,	Foundation		
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
Paid during the year	or adolarital contributor			
Dr Rober		501c3	Religious	300
Chester PO Box 2 52155		501c3	Social Club	250
Chester 52155		501c3	Maintenance	1,000
		Nonpro	Recreation	475
		501c3	Educational	500
Dollars 52155			Maintenance	2 , 500
Lidtke M 52155		Exempt	Maintenance	
Pleasant 52155		Exempt	Religious	3,500
United M 52155		501c3 501c3	Educational	3,300
Lime Spr 52155		1 1	Recreational	1,625
Communit 52155		Nonpro		800
Spring A 52155		501c3	Educatioanl	750
Lime Spr 52155		Exempt	Recreational	2,000
Wisdom a 52155		Nonpro	Health Care	1,500
Lime Spr 52155		Nonpro	Recreation	500
]		
]		
		1		
			:	
		1		
Total				19,000
Approved for future payment				
	•			
	1	1 1		

Inter	gross amounts unless otherwise indicated	Unrelat	ted business income	Excluded	by section 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Excl code	(d) Amount	Related or exempt function income (See the
	-	code		code		instructions)
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments .					
3	Interest on savings and temporary cash investments			14	17.	
4	Dividends and interest from securities			14	7,980.	
5	Net rental income or (loss) from real estate	《 操動物質	以	N-4		では 電影を システィー
а	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal propert	y				
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory		(5,610.)			
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a Cap gain distns			14	224.	
b						
С						
d						
е						
e 12		- /7 · // - // - /- /- /- /- /- /- /- /- /- /-	(5,610.)	, il Çəfiği	8,221.	
e 12 13	Total. Add line 12, columns (b), (d), and (e)		(5,610.)	- 11. Contagn	8,221. 13	2,611.
e 12 13 See	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate	 ons)		•	13	2,611.
e 12 13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate t XVI-B Relationship of Activities to	ons)	omplishment of Ex	empt l	ourposes	
e 12 13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate t XVI-B Relationship of Activities to e No. Explain below how each activity for wh	ons) the Acco	omplishment of Ex	empt i	Purposes VI-A contributed importa	antly to the
e 12 13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate t XVI-B Relationship of Activities to e No. Explain below how each activity for wh accomplishment of the foundation's ex	ons) the Acco	omplishment of Exsseported in column (e) ses (other than by provide	empt I	Purposes (VI-A contributed imports of the such purposes) (See	antly to the
e 12 13 See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate t XVI-B Relationship of Activities to e No. Explain below how each activity for wh accomplishment of the foundation's exi	ons) the According income is empt purposed larshi	omplishment of Exstandary provides the control of t	empt I of Part X ing funds in 2	Purposes (VI-A contributed importate for such purposes) (Second 10 year	antly to the
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Phone no 641-732-3703

Form **990-PF** (2010)

Form 9	90-P <u>F (</u> 2		Hughes Fo				20-1635			age 13
	XVII	Exempt Org	anizations	ansfers To and Trar		·		ncharit	able	
1 Did	the orga	inization directly or	r indirectly engage	in any of the following wit	h any other org	janization des	cribed in section		Yes	No
		•		organizations) or in sectio		to political or	ganizations?			
a Tra	ınsfers fr	om the reporting fo	oundation to a none	charitable exempt organiz	ation of					
('	1) Cash							1a(1)		X
(2	Other	assets				•••		1a(2)		X
b Oth	ner trans	actions.								
(1) Sales	of assets to a non	charitable exempt	organization			•••	1b(1)		X
(:	2) Purch	ases of assets fror	m a noncharitable	exempt organization				1b(2)		X
(;	Renta	ıl of facılıtıes, equip	oment, or other ass	sets	•			1b(3)		X
(4	4) Reim	oursement arrange						1b(4)		X
•	•	s or loan guarantee						1b(5)		X
			•	r fundraising solicitations			••••			X
	_		_	er assets, or paid employe				1c		X
		•		lete the following schedule		· ·				
-			- ·	orting foundation If the fo			fair market value in a	ny trans	action	
or s	sharing a	rrangement, show	in column (d) the	value of the goods, other	assets, or servi	ices received				
7-2	(6)	A	(2) 11	h 4 - b 1 4		-616				
(a) Line i	no (D)	Amount involved	(c) Name of nonc	haritable exempt organiza	tion (a)Desc	of transfers,	transactions, and sna	iring arra	ngeme	ents
	 -									
										
		••								
										
							· · · · · · · · · · · · · · · · · · ·			
	-									
										
			<u> </u>							
		· · · · · · · · · · · · · · · · · · ·		****	····					

	1					<u>.</u> .				
2a l:	s the fou	ndation directly or	indirectly affiliated	with, or related to, one or	more tax-exem	npt organization	ons described in	_		
				501(c)(3)) or in section 52				_	es 🏻	No
b li	f "Yes," o	complete the follow	ring schedule					_	_	
	(a)	Name of organiza	tion	(b) Type of organi	ızatıon		c) Description of rela	tionship		
							····			
						<u> </u>				
Sign		Under penalties o	f perjury, I declare	that I have examined this s true, correct, and comple	return, includir	ng accompany	ring schedules and st	atement	s, and	to the
Here		on all information	of which preparer	has any knowledge	ete Deciaration	i oi piepaiei	Otter than taxpayer t	n nuucia	(y) IS D	ascu
		\mathcal{L}_{i}	H-A-		1			_		
		Nair	/ /=	<i>y</i>	05/16	5/2011	Board Mem	ber		
	/ s	ignature of officer		· · · · · · · · · · · · · · · · · · ·	Date		Title			
Paid		Print/Type prepared		Preparer's signature		Date	Check X if	PTIN	001	
Prepa	arer	Brian R M		13: CI PM	<u>u</u> 05	5/13/20		0014		
Use (Firm's name	▶Gross &	McPhail			Firm's EIN ▶ 42 – 6	$\frac{1572}{133}$	<u>03</u>	

Firm's address ▶631 Main Street
OSAGE IA 50461-

Name: Grace Hughes Foundation

ID: 20-1635744

Description: Page 1, Grants Awarded In 2010

Type	Amount
Type Dr. Debert Cabuller Ministries	300.
Dr. Robert Schuller Ministries	250.
Chester-Lime Springs Community Club	
Chester Fire Department	1,000.
Lime Springs Softball	475.
Dollars For Scholars	500.
Lidtke Mill	2,500.
Pleasant Hill Cemetary	3,500.
United Methodist Church	3,300.
Lime Springs School	1,625.
Community Center	800.
Spring Ahead Preschool	750.
Lime Springs Swimming Pool	2,000. 1,500.
Wisness & Wellness	1,500.
Lime Springs Fish & Game	500.
	ļ
Total	19,000.
© 2010 CCH Small Firm Services All rights reserved USWDET\$1	

JS 990 Investments: Corporate Stock	as of feat Life	2010
Description	Book value	FMV
eriprise Investments	Book value 60,488. 60,488.	FMV 110,696 110,696
	00,400.	110,696

	Description	Book value	FM/\/
meriprise meriprise	Investments	142,035. 98,321. 240,356.	FMV 113,770 98,321 212,091

JS 990	Accounting Fees Expenses Net inves			201 Charitable	
Description	per books		Adjusted net income	purposes	
x return preparation	500.	500.	500.	purposso	
n 100ain Proparación	per books 500.	500. 500.	500.		
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S 990	Taxes			201	
Description	Expenses per books 33.	Net investment income	Adjusted net	Charitable	
Description reign taxes paid on investment	per books 33.	33.	income 33.	purposes	
rorgio canto para on monto	33.	33. 33.	33. 33.		
		ı			
		1			

US 990	Other Expenses			2010	
Description	Expenses per books 34. 34.	Net investment income	Adjusted net income	Charitable purposes	
Description dvertising For Applications	per books 34.	34.	34.	34	
averezeig rer imperioaere	34.	34. 34.	34. 34.	34	
			[

Main Information Sheet

For calendar year 2010 or tax year beginni	ing and en	ding	
Name Grace Hughes Foun Name line 2 Larry Gates Trust	dation	EIN	20-1635744
Address 213 Willard City, State, and Zip Code Lime Springs IA 5		Telephone No	641-732-3703
Email address Web site address Fiduciary name, if applicable Name of officer signing return Title of officer/trustee/fiduciary signing return Group exemption number Check if exemption application is pending Accounting method List states desired	Larry Gates Trus	tee her Specify	
Type of exempt organization: Organization exempt under section 501(c), 527 or 4947(a)((Form 990) Organization exempt under section 501(c), 527 or 4947(a)(with gross receipts less than \$200,000 and total assets less Private foundation or section 4947(a)(1) nonexempt charitate Exempt organization with unrelated business income (Form	(1) of the Internal Revenue Code (ex s than \$500,000 at the end of the yearlier trust treated as a private founda	ccept black lung benefi ear (Form 990-EZ)	·
Preparer ID Preparer name Brian R McPhail Preparer SSN Firm's name Gross & McPhail Address 631 Main Street City, State, ZIP Code OSAGE IA 50461-		PTIN I Self-employed E Firm's EIN	$ \begin{array}{c} 105 \text{ minutes} \\ 05/13/2011 \\ 200142011 \\ 42-6157203 \\ 641-732-3703 \end{array} $
Preparer notes These notes will print and proforma			
Preparer's use fields 1 2 3 4 5 6			

Form 8868

(Rev January 2011)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

If you a			a separate a	pplication for each return.				
	re filing for ar	Automatic 3-Month Extension, co	mplete only	Part I and check this box			▶ 🛚	
• If you a				n, complete only Part II (on page 2 of this i				
Do not con	nplete Part II	unless you have already been grant	ed an automa	atic 3-month extension on a previously filed	Form 8868.			
Electronic	filing (e-file).	You can electronically file Form 886	8 if you need	a 3-month automatic extension of time to fi	ile (6 months	for a c	orporation	
				sion of time. You can electronically file For				
				Form 8870, Information Return for Transfe				
				(see instructions) For more details on the				
form, visıt w	ww irs gov/ef	ile and click on e-file for Charities & N	Vonprofits	·				
Part I		ic 3-Month Extension of Tin		submit original (no copies needed)				
				onth extension - check this box and comple	te Part I onl	/	▶	
				trusts must use Form 7004 to request an e			_	
to file incom	e tax returns							
Type or Name of exempt organization					Employer identification number			
print	Grace	Hughes Foundation	ı		20-163	1635744		
File by the due date for	Number, st	reet, and room or suite no If a P O	box, see inst	ructions				
iling your	213 V	Villard						
return See Instructions	City, town o	or post office, state, and ZIP code F	or a foreign a	ddress, see instructions				
	· .	Springs IA 52155	-					
Enter the Re	eturn code for	the return that this application is for	(file a separa	te application for each return)			04	
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