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Form	9	9	0	_	P	F
LOUIL	•	•	•			

Return of Private Foundation Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

De	partme emal R	nt of the Treasury evenue Service	lote.	The foundation	on may b	Treat e able to u	ed as a Priva	ite Foundatio	on sfy state repo	orting requirements	2010
For calendar year 2010, or tax year beginning				, 2010, and ending				, 20			
G	Che	ck all that apply		Initial return	1		Initial return	of a former pu	iblic charity		Final return
				Amended r	eturn		Addre:	ss change		Name change	
N	ame c	of foundation								A Employer identi	fication number
F	MOO	AT THE INN F	NUC	DATION						22	-3769059
N	umbe	r and street (or PO box	num	nber if mail is not	delivered	to street ad	ldress)		Room/suite	B Telephone number	(see page 10 of the instructions)
1	444	NIGHTHAWK PO	INI	PE						(2	39) 643-1037
С	ity or	town, state, and ZIP co	de							C If exemption application pending, check her	ation is
										D 1 Foreign organiza	▶
N	APL	ES, FL 34105								2 Foreign organiza	
H	Che	ck type of organizat	on	X Section	on 501(d	c)(3) exer	mpt private fo	undation			here and attach
	s	Section 4947(a)(1) none	exem	npt charitable t	rust	Oth	er taxable pri	vate foundati	on	E If private foundation	
l	Fair	market value of all a	asse	ets at end	J Acco	unting me	ethod X C	ash Acc	crual	- ·	b)(1)(A), check here
	of y	ear (from Part II, col	(c)	, line		ther (spe				F If the foundation is	in a 60-month termination
	16)	▶\$ 1,83	34,	051.	(Part I,	column (d) must be or	n cash basıs)		under section 507(b)(1)(B), check here
i	art	Analysis of Rever				(a) Re	evenue and	(b) Not	otmont	(a) Administration	(d) Disbursements
		total of amounts in commay not necessarily) éxpe	enses per	(b) Net inve		(c) Adjusted net income	for charitable purposes
_	,	column (a) (see page					oooks				(cash basis only)
	1	Contributions, gifts, grants, e	tc , re	ceived (attach sche	edule)		0 .				
	2	Check ► X if the fo	ounda Sch	ation is not requ B	ired to					· · · · · · · · · · · · · · · · · · ·	
	3	Interest on savings and t					40.		40.		ATCH 1
	4	Dividends and interes	t fro	m securities			27,427.	2	27,427.		ATCH 2
	5 a	Gross rents									
	ь	Net rental income or (los	s) _								
₫		Net gain or (loss) from sa		assets not on li	ne 10		5,766.				
enc	b	Gross sales price for all assets on line 6a		62	,349.						
Revenue	7	Capital gain net incon	ne (fi	rom Part IV, Iır	ne 2) .		 		5,766.		
œ	8	Net short-term capital	gair	ı							
	9	Income modifications	٠.								
	10 a	Gross sales less returns and allowances · · · ·				ļ					
	b	Less Cost of goods sold	٠. ا								
	С .	Gross profit or (loss) (atta	ch schedule)						- ···· - · · · · · · · · · · · · · · ·	
	11	Other income (attach	sche	edule)							
_	12	Total Add lines 1 thro	ough	<u> 11</u>	<u> </u>		33,233.	3	33,233.		
	13	Compensation of officers	, dıre	ectors, trustees,	etc		0.				
	14	Other employee salar	ies a	and wages .							
ses	15	Pension plans, emplo	-								
ens		Legal fees (attach sch					525.		0.	0	
Operating and Administrative Expenses	ь	Accounting fees (attack	ch so	chedule) ATC	H 4		4,025.		0.	0	. 4,025.
ē F	C	Other professional fee	es (a	ittach schedule	e) [°]						ļ
à	17	Interest							_		
str	18	Taxes (attach schedule)	(see p	page 14 of the mater	uctions) *		95.		95.		
Ē	19	Depreciation (attach		dule) and dep	etion .\						_
뒫	20	Occupancy			-70°						
₹ D	21	Travel, conferences			, . \Q	1					
an	22	Printing and publication	ns,	-3° 3° √501	; J&	μ					<u> </u>
Ing	23	Other expenses (atta	th's	chedule)		=		ļ			
rat	24	Total operating and a			ehses.	\					
ğ	1	Add lines 13 through	23/	DEW.			4,645.		95.	0	
J	25	Contributions gifts, gi	ants	paid			33,050.				33,050.
_	26	Total expenses and disbur	seme	nts Add lines 24	and 25		37,695.		95.	0	. 37,600.
	27	Subtract line 26 from	line	12	,	-				•	
		Excess of revenue over exp					-4,462.				
		Net investment incor		-] 3	33,138.		
_		Adjusted net income									<u></u>
F	or Pap	perwork Reduction Ac	t No	tice, see page	30 of th	e instructi	ions		JSA	** ATCH 5	Form 990-PF (2010)

For Paperwork Reduction Act Notice, see page 30 of the instructions $135640\ 2232\ 5/6/2011\ 11:01:51\ AM\ V\ 10-6.1$

Form 990-PF (2010) PAGE 1

Part II		Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of year		
_	aitii	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	` 1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	14,364.	41,600	41,600	
	3	Accounts receivable	i			
		Less allowance for doubtful accounts				
	4	Pledges receivable				
		Less allowance for doubtful accounts				
		Grants receivable		_		
		Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the instructions)				
	7	Other notes and loans receivable (attach schedule)		•		
		Less allowance for doubtful accounts				
(S)	8	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges		•	_	
Ass		Investments - U S and state government obligations (attach schedule)		,		
•		Investments - corporate stock (attach schedule) ATCH 6	1,635,052.	1,636,277.	1,792,451.	
		Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	(attach schedule) Investments - mortgage loans				
		Investments - other (attach schedule)			<u> </u>	
	14	Land, buildings, and	*	· · · · · · · · · · · · · · · · · · ·		
		Less accumulated depreciation				
	15	(attach schedule) Other assets (describe			 	
		Total assets (to be completed by all filers - see the			 	
	10	instructions Also, see page 1, item I)	1,649,416.	1,677,877.	1,834,051.	
-	17	Accounts payable and accrued expenses		170717077	1,031,031.	
	18				†	
s	19				†	
Liabilities		Deferred revenue				
þi	21	Mortgages and other notes payable (attach schedule)				
Lia	22	Other liabilities (describe				
	22	Other habilities (describe		.	_	
	23	Total liabilities (add lines 17 through 22)		0		
		Foundations that follow SFAS 117, check here		· · · · · · · · · · · · · · · · · · ·		
		and complete lines 24 through 26 and lines 30 and 31.				
es	24	Unrestricted				
nces	25	Temporarily restricted				
ala	26	Permanently restricted				
Net Assets or Fund Bala		Foundations that do not follow SFAS 117.	-			
'n		check here and complete lines 27 through 31.				
ı.	27	Capital stock, trust principal, or current funds				
ts	28	Paid-in or capital surplus, or land, bldg, and equipment fund	395,377.	395,377.		
se	29	Retained earnings, accumulated income, endowment, or other funds	1,254,039.	1,282,500.		
As	30	Total net assets or fund balances (see page 17 of the	·			
Net		instructions)	1,649,416.	1,677,877.		
	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	1,649,416.	1,677,877.		
P	art III	Analysis of Changes in Net Assets or Fund			<u> </u>	
		net assets or fund balances at beginning of year - Part		must agree with	1	
•				· •	1,649,416.	
2					-4,462.	
3	Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶ <u>ATTACH</u>	 Ment 7		32,923.	
					1,677,877.	
_	_				1,0//,0//.	
၁ င	Total	eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line	S) Dod II solves /5\ 1	5	1 677 077	
<u>6</u>	rotal	her assets or fund balances at end of year (line 4 minus line	<u>: э) - Рап II, column (b), I</u>	ine 30 6	<u> </u>	

(a) List and	d describe the kind(s) of property sold (e rick warehouse, or common stock, 200 s	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE	DULE				
_b					
_с					
_ d		<u></u>			
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) minu	
а					
b					
С	<u> </u>				_
d					
e		<u> </u>			
Complete only for assets s	howing gain in column (h) and owned by	<u> </u>		Gains (Col (h) ga	
(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	(k), but not less the Losses (from co	
a					
b					
С					
d					
<u>e</u>		L		 	
2 Capital gain net income or (gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		5,766.
3 Net short-term capital dain	۱۱) or (loss) as defined in sections 1222		-		3,700.
· · · · · · · · · · · · · · · · · · ·	ine 8, column (c) (see pages 13 and				
_	ine 8		,		
Part V Qualification U	Inder Section 4940(e) for Redu	uced Tax on Net Investment In	come	 	·
	•	able amount of any year in the base	period?		Yes X No
		ee page 18 of the instructions before	making a	any entries	
(a)	(b)	(c)	, making t	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution rat (col (b) divided by	
2009	61,400.	1,455,586.			0.042182
2008	58,600.	1,636,343.			0.035812
2007	96,904.	1,703,621.			0.056881
2006	129,860.	1,738,862.	_		0.074681
2005	120,755.	1,677,114.			0.072002
2 Total of line 1, column (d)			2		0.281558
_	or the 5-year base period - divide th				
number of years the found	ation has been in existence if less th	han 5 years	3		0.056312
4 Enter the net value of none	charitable-use assets for 2010 from	Part X, line 5	4	1,	586,273.
5 Multiply line 4 by line 3			5		89,326.
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		331.
7 Add lines 5 and 6			7		89,657.
8 Enter qualifying distribution If line 8 is equal to or gre	eater than line 7, check the box i	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	37,600.
Part VI instructions on pag	e 18	•	-		

Par	t VIa Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	truction	ons)	
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6	63.
	here and enter 1% of Part I, line 27b	•		
С	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			
3	(-)(-)		6	63.
4	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-		6	63.
	The based of investment modified a normal of 1250 of 1655, officer of 1111, 11			
6	Credits/Payments 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,496.			
	22 to continue and position and 200 to the position to 200			
	Exempt foreign organizations-tax withheld at source			
	Tax paid with application for extension of time to line (1 of the octor)			
	Daniel Manie and		1.4	96.
7			-,.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9	333.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2011 estimated tax 833 Refunded 11			, <u>, , ,</u>
11	Enter the amount of line 10 to be Credited to 2011 estimated tax 833. Refunded 11 t VII-A Statements Regarding Activities			
		I	Yes	No
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	162	No_
	participate or intervene in any political campaign?	ıa		
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	45		х
	of the instructions for definition)?	1b		_ ^
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			Х
	Did the foundation file Form 1120-POL for this year?	1c		_^
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\Bigs\\$ (2) On foundation managers \$\Bigs\\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \$			Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	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	_		Х
	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		X
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		^
	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			١,,
	conflict with the state law remain in the governing instrument?	6_		X
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 Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G?If "No," attach explanation	8b	N/	A
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		;	
	names and addresses	10		X
		om 00	0-PF	(2010)

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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?

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

NΙΑ

Form 990-PF (2	010)		22-376	9059		Page 6
Part VII-B	Statements Regarding Activities for	r Which Form 47	20 May Be Requir	ed (continued)		
(1) Car (2) Infli dire (3) Pro (4) Pro sec (5) Pro	the year did the foundation pay or incur any amount my on propaganda, or otherwise attempt to influence usence the outcome of any specific public election (sectly or indirectly, any voter registration drive? wide a grant to an individual for travel, study, or otherwide a grant to an organization other than a charitate stron 509(a)(1), (2), or (3), or section 4940(d)(2)? (section any purpose other than religious, charitable poses, or for the prevention of cruelty to children or	e legislation (section 4 ee section 4955), or to er similar purposes? ole, etc , organization e page 22 of the instr , scientific, literary, or	described in uctions)	Yes X No		
Regular Organiz c If the ar becaus	answer is "Yes" to 5a(1)-(5), did any of the transi- tions section 53 4945 or in a current notice regard cations relying on a current notice regarding disaster aswer is "Yes" to question 5a(4), does the foundation in it maintained expenditure responsibility for the gra " attach the statement required by Regulations sections."	ing disaster assistand assistance check hei n claim exemption froi nt?	ce (see page 22 of the	nstructions)?	5b	N/A
6a Did the on a pe b Did the If "Yes" 7a At any the	foundation, during the year, receive any funds, direction of the properties of the p	ctly or indirectly, to pa or indirectly, on a per-	sonal benefit contract?	Yes X No	6b	X
Part VIII	Information About Officers, Directors	, Trustees, Four	dation Managers	, Highly Paid Emp		<u>^</u>
1 List all	<u>and Contractors</u> officers, directors, trustees, foundation man	agers and their co	mpensation (see pa	ge 22 of the instruct	ions).	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other allo	
ATTACH	MENT 8		0.	-0-		0-
2 Compe	nsation of five highest-paid employees (othe enter "NONE."	r than those includ	ded on line 1 - see p	age 23 of the instruc	tions).	
	nd address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens	
NONE						
						·
					<u> </u>	
Total number	er of other employees paid over \$50,000 .			 .		▶

Form **990-PF** (2010)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instr	uctions). If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of s	
NONE	
Total number of others recovering over \$50,000 for professional convers	▶ NONE
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as organizations and other beneficianes served, conferences convened, research papers produced, etc	the number of Expenses
1 N/A	
2	
3	· -
·	
4	
De divide a Common of December Deleted Investments (see a 24 of the centralism)	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
<u> </u>	
Total. Add lines 1 through 3	>

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	n 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	1,556,136.
b	Average of monthly cash balances	1b	54,293.
С		1c	0.
d		1d	1,610,429.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,610,429.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
		4	24,156.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,586,273.
6	Minimum investment return. Enter 5% of line 5	6	79,314.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here and do not complete this page 25.		
1	Minimum investment return from Part X, line 6	1	79,314.
2a	Tax on investment income for 2010 from Part VI, line 5		
	Income tax for 2010 (This does not include the tax from Part VI)	1	
		2c	663.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	78,651.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	78,651.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1	7	78,651.
		1	
	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		27 600
а		1a	37,600.
b		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.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	37,600.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	37,600.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating wh	ether the foundation

Form **990-PF** (2010)

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7			,	78,651.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only				
	Total for prior years 20 08 ,20 07 ,20 06				
3	Excess distributions carryover, if any, to 2010				
а	From 2005				•
ь	From 2006 18,758.				•
С	From 2007 14,327.				
	From 2008				
е	From 2009				
f	Total of lines 3a through e	33,085.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 37,600.				
а	Applied to 2009, but not more than line 2a				
	Applied to undistributed income of prior years (Election				
-	required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election				
Ŭ	required - see page 26 of the instructions)				
d	Applied to 2010 distributable amount				37,600.
е	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2010	33,085.			33,085.
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	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				
_	amount - see page 27 of the instructions				
-	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1 This amount must be				7 000
7	distributed in 2011				7,966.
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
	applied on line 5 or line 7 (see page 27 of the				
9	Instructions)				
3	<u> </u>	·			
10	Subtract lines 7 and 8 from line 6a				
	Excess from 2006				
	Excess from 2007				
c	Excess from 2008				
	Excess from 2009				
е	Excess from 2010				

Pa	rt XIV Private Oper	rating Foundations	see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	-		t it is a private opera	iting	
•	foundation, and the ruling	•	-			
b	Check box to indicate whe	ether the foundation is a pi	rivate operating foundation		4942(j)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Pnor 3 years		(e) Total
	justed net income from Part	(a) 2010	· (b) 2009	(c) 2008	(d) 2007	``
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not		1			
	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon					
a	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-		· 			
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
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)				<u> </u>	
	(3) Largest amount of sup- port from an exempt			1		
	organization					
Da	(4) Gross investment income . rt XV Supplement	any Information (C	omplete this part	only if the found:	ation had \$5,000	or more in assets
Га		during the year - se			ation nad \$5,000	or more in assess
1	Information Regarding	Foundation Manager	s:		· · · · · · · · · · · · · · · · · · ·	
а	List any managers of	the foundation who h	nave contributed more	than 2% of the total	contributions receive	ed by the foundation
	before the close of any	y tax year (but only ıf th	ney have contributed in	nore than \$5,000) (S	ee section 507(d)(2))	
	N/A					
h	List any managers of	the foundation who	own 10% or more of	the stock of a corno	ration (or an equally	large portion of the
_	ownership of a partner					large person or are
	, ,	, ,,		J		
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ▶ X If t	the foundation only i	makes contributions	to preselected charit	able organizations a	nd does not accept
	unsolicited requests f	for funds If the found	dation makes gifts, g	rants, etc (see page	28 of the instructio	ns) to individuals or
	organizations under ot					
	The name, address, an	nd telephone number of	the person to whom a	pplications should be a	ddressed	
	,	,				
b	The form in which appl	ications should be subr	nitted and information	and materials they sho	uld include	
_						
С	Any submission deadlii	nes				
d	Any restrictions or li	mitations on awards.	such as by geogra	phical areas, charital	ble fields, kinds of	institutions, or other
	factors		, , ,	•		

Form 990-	PF (2010)			22-3769059	Page 11
Part X	V Supplementary Information	(continued)			
3 G	rants and Contributions Paid Duri	ng the Year or App	roved for	Future Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		A
Na	ame and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
	aid during the year				
ATT	ACHMENT 9				
			İ		
				i	
					<u> </u>
			_		
То	tal			▶ 3a	33,050.
b Ap	proved for future payment				
			1		
			1		
	·		<u> </u>	<u> </u>	
To	tal			▶ 3b	1

Pair XVI-A Analysis of Income-Prod					<u>(a)</u>
Enter gross amounts unless otherwise indicated	(a) Business code	ed business income (b) Amount	(c) Exclusion code	/ section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of the instructions)
1 Program service revenue	Business code	Amount	Exclusion code	Amount	the instructions)
a					
b					
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	40.	
4 Dividends and interest from securities			14	27,427.	
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	1 1		1.0	F 366	
8 Gain or (loss) from sales of assets other than inventory			18	5,766.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b OTHER INCOME				_	
c	1				
d					
e					
12 Subtotal Add columns (b), (d), and (e)				33,233.	
13 Total Add line 12, columns (b), (d), and (e)				<u> </u>	33,233.
(See worksheet in line 13 instructions on page 29 to					
Part XVI-B Relationship of Activities			xempt Purr	ooses	
Line No Explain below how each activity accomplishment of the foundation instructions)					
		-			
		-			
				· .	
				<u>-</u> -	
				- 	
<u>.</u>					

Pari	XVII	Information Exempt Orga		ansfers To and	Transacti	ons and Relat	ionships With	Nonc	hari	table
		tion 501(c) of the C	•	ngage in any of the section 501(c)(3) orga	•				Yes	No
а	Transfe	rs from the reporting fou	indation to a noncha	arıtable exempt organıza	ition of					
								1a(1)		X
					• • • • • •			1a(2)	-	X
b		ansactions	artable average area	an zation				45/4		X
				nnization				1b(1) 1b(2)		X
								1b(3)		X
										X
								· I		Х
	(6) Per	formance of services or	membership or fun-	draising solicitations .				1b(6)		X
				assets, or paid employe						X
d				es," complete the fol						
				es given by the rep						
(a) L		n any transaction or (b) Amount involved		ment, show in colun icharitable exempt organiza			s, other assets, or rs, transactions, and shar			
(a) Li	ie iio	N/A	(C) Name of flor	ichaniable exempt organiza	 '	I/A	rs, transactions, and snar	ing an ai	igeniei	
		.,,				.,				
		 								
								·		
				 						
								•		
		•	•	iated with, or relate	•	•	•	_	_	_
				in section 501(c)(3)) or	in section 527	?		Y	es 🔼	∐ No
b	If "Yes,	' complete the following		(h) T 15			(a) Danas dan af salahan	h		
		(a) Name of organization	' 	(b) Type of organ	nization		c) Description of relations	nip		
								-		
Sigr		er penalties of perjury, I de f, it is true, correct, and con	eclare that I have examplete Declaration of	amined this return, including preparer (other than taxpa	ng accompanyir yer or fiduciary)	ig schedules and state	ments, and to the best on of which preparer ha	of my k any kn	nowled owledg	ge and e
_		Mar 2			15/10		Para			
Here		ignature of officer of trustee			Date	T ₁₁	le le			
		Print/Type preparer's		Preparer's signature	2010	Date		PTIN		
Date:	1	1 '' '		1. 1	۱	Ì	Check			
Paid		Allison P Shipley	,	Allisont.	Shilm	05/12/2	011 self-employed	P002	8973	30
-	arer	Firm's name ▶ PR	ICEWATERHOU	SECOOPERS LLP	UTI	-	Firm's EIN ▶13-4			
Use	Only	Firm's address ▶ 14			1100					
		<u></u>	MIAMI,	FL		33131	Phone no 305-3	75-6	221	

ROOM AT THE INN FOUNDATION 22-3769059
FORM 990-PF - PART IV

· CA	APITAL GA	INS AND L	USSES FO	K IAX ON	INVEST		IENT INCOM	/IE
Kind of Pi			Desc	cription		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)	
		BERKSHIRE H	ATHAWAY CAS	H IN LIEU		Ъ		02/16/2010
32.		0.					32.	
			NORTHERN SA	NTA FE CORP		P	VARIOUS	VARIOUS
38,755.		38,755.					0.	
			RSHEY CO PE: SECURIT	TIES		P	04/21/2008	12/30/2010
23,562.		17,828.					5,734.	
OTAL GAIN (L	000)						5,766.	
JIAD GAIN (L	J33)			• • • • • • • • • • • • •	• • • • •			
						!		

PART I - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF,

ROOM AT THE INN FOUNDATION

	INVESTMENT		40. 40.
REVENUE	EXPENSE	PER BOC	
		DESCRIPTION	FIDELITY # 244-805661

TOTAL

40.

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

TOTAL

72-3/6		
	m	l
	ATTACHMENT	

- LEGAL FEES PART I FORM 990PE,

CHARITABLE PURPOSES	525.	525.
ADJUSTED NET INCOME		•0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	525.	525.
		TOTALS
•		
DESCRIPTION	DAY PITNEY	

PART I - ACCOUNTING FEES FORM 990PF,

CHARITABLE <u>PURPOSES</u>	4,025.	4,025.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0.
REVENUE AND EXPENSES PER BOOKS	4,025.	4,025.
DESCRIPTION	PRICEWATERHOUSECOOPERS LLP	TOTALS

PAGE 18

- TAXES	
H	
PART	
990PF,	
FORM	

	NET	INVESTMENT	INCOME	. 95.
REVENUE	AND	EXPENSES	PER BOOKS	.95.
			DESCRIPTION	FOREIGN TAX PAID

95.

95.

TOTALS

11:01:51 AMV 10-6.1

ROOM AT THE INN FOUNDATION

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

N.

FIDELITY #Z44-805661

ENDING BOOK VALUE

ENDING

1,792,451.

TOTALS

1,636,277.

1,636,277.

1,792,451.

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

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

OTHER INCREASES 32,923.

TOTAL 32,923.

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION
GREGORY L. JOHNSON 1444 NIGHTHAWK POINTE NAPLES, FL 34105	PRESIDENT	.0
KATHLEEN M. JOHNSON 1444 NIGHTHAWK POINTE NAFLES, FL 34105	VICE PRESIDENT	.0
GREGORY L. JOHNSON 1444 NIGHTHAWK POINTE NAPLES, FL 34105	TREASURER	0
KATHLEEN M. JOHNSON 1444 NIGHTHAWK POINTE NAPLES, FL 34105	SECRETARY	.0
GREGORY L. JOHNSON 1444 NIGHTHAWK POINTE NAPLES, FL 34105	CHAIRMAN OF THE BOARD	.0
GREGORY L. JOHNSON 1444 NIGHTHAWK POINTE NAPLES, FL 34105	CHIEF EXECUTIVE OFFICER	Ö

ATTACHMENT 8 (CONT'D)

0

COMPENSATION TITLE AND AVERAGE HOURS PER - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES WEEK DEVOTED TO POSITION CHIEF OPERATING OFFICER GRAND TOTALS VICE PRESIDENT VICE PRESIDENT VICE PRESIDENT VICE PRESIDENT 1444 NIGHTHAWK POINTE 1444 NIGHTHAWK POINTE MARY KATHLEEN JOHNSON 1444 NIGHTHAWK POINTE 1444 NIGHTHAWK POINTE 1444 NIGHTHAWK POINTE PART VIII KATHLEEN M. JOHNSON JENNIFER M. JOHNSON CRISTIN M. JOHNSON NAFLES, FL 34105 NAPLES, FL 34105 NAPLES, FL 34105 NAPLES, FL 34105 NAPLES, FL 34105 NAME: AND ADDRESS ERIN M. JOHNSON FORM 990PF,

0

0

0

0

RECIPITINT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPEENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	NONE PUB CHARITY	GENERAL PURPOSE	1,000
CATHOL'C NEAR EAST WELFARE ASSOCIATION NEW YOKK, NY 10022-4195	NONE PUB CHARITY	GENERAL PURPOSE	6,750
RELIGIOUS TEACHERS FILIPPINI MORRISTOWN, NJ 07960	NONE PUB CHARITY	GENERAL FUND	1,000
	NONE PUB CHARITY	GENERAL FUND	1,000
	NONE PUB CHARITY	GENERAL FUND	100
	NONE PUB CHARITY	GENERAL FUND	15,000

ROOM AT THE INN FOUNDATION

CORM SEOPE, PART XV - GRANTS AND COUTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

GENERAL FUND

ATTACHMENT 9 (CONT'D)

AMOUNT

2,500

2,000

RECIPIENT NAME AND ADDRESS MENDHAM, NJ 07945 DAYTOP NEW JERSEY

PUB CHARITY

NONE

PUB CHARITY NONE

GENERAL FUND

GENERAL FUND

700

PUB CHARITY NONE

SAINT UILLIAM CHURCH

NEWTON, NJ 07860 BIRTHHAVEN

NAPIES, FL 34108

TOTAL CONTRIBUTIONS PAID

33,050

PAGE 25 ATTACHMENT 9

135640 2232 5/6/2011

v 10-6 1

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

2010

	ROOM AT THE INN FOUNDATION	22-376905		umper						
	: Form 5227 filers need to complete only		11.11.0							
Par	<u> </u>	Short-Term Capital Gains and Losses - Assets Held One Year 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 ba (see instructions		(f) Gain or (loss) for the entire year Subtract (e) from (d)			
1a							<u> </u>			
					- 					
						_				
					<u> </u>					
b	Enter the short-term gain or (loss), if any, fi	rom Schedule D-1	line 1b			1ь	32.			
~			,							
2	Short-term capital gain or (loss) from Form	s 4684, 6252, 678	31, and 8824			2				
					1					
3	Net short-term gain or (loss) from partnersh			•		3				
4	Short-term capital loss carryover Enter the Carryover Worksheet	•		•		4 ()			
5	Net short-term gain or (loss). Combine lin	nes 1a through 4 i	n column (f) E	nter here and on line	13,	7				
	column (3) on the back	<u> </u>	<u> </u>			5	32.			
Par	t II Long-Term Capital Gains and Losse	es - Assets Held I	More Than One	Year			(f) Gain or (loss) for			
	(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 basis ti				
	, , , , , , , , , , , , , , , , , , , ,	(***) == , , , ,	(,,, ,, ,		V	-	Subtract (e) from (d)			
vu										
						İ				
			-			-				
			ا							
	Established to a transport of the State of	0.1.1.5.4				6ь	F 724			
ď	b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b						5,734.			
7	Long-term capital gain or (loss) from Forms	<i></i> L	7							
	g _ g (,									
8	8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts									
			1							
9	Capital gain distributions	9								
10	Gain from Form 4797 Part I					10				
 10 Gain from Form 4797, Part I 11 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2009 Capital Loss 										
	Carryover Worksheet					11 ()			
12	Net long-term gain or (loss). Combine line	es 6a through 11 i	ın column (f) E	nter here and on line	14a,					
	column (3) on the back	<u> </u>		<u> </u>		12	5,734.			
For P	aperwork Reduction Act Notice, see the Instruc	tions for Form 104	1.		Sche	edule [O (Form 1041) 2010			

Schedule D (Ferm 1041) 2010 Page 2 Summary of Parts I and II Part III (1) Beneficiaries' (2) Estate's (3) Total Caution: Read the instructions before completing this part. (see instr) or trust's Net short-term gain or (loss) 13 32. 14 Net long-term gain or (loss): 5,734. **b** Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b Total net gain or (loss). Combine lines 13 and 14a 5,766. Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheets necessary **Capital Loss Limitation** Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of 16 a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss CarryoverWorksheeton page 7 of the instructions to figure your capital loss carryover **Tax Computation Using Maximum Capital Gains Rates** Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skip this part and complete the worksheet on page 8 of the instructions if • Either line 14b, col (2) or line 14c, col (2) is more than zero, or • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 17 17 18 Enter the smaller of line 14a or 15 in column (2) 18 19 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19 20 If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0-22 Subtract line 21 from line 20 If zero or less, enter -0-Subtract line 22 from line 17 If zero or less, enter -0-23 Enter the smaller of the amount on line 17 or \$2,300 24 24 Is the amount on line 23 equal to or more than the amount on line 24? 25 Yes. Skip lines 25 and 26, go to line 27 and check the "No" box No. Enter the amount from line 23 25 Subtract line 25 from line 24 26 26 Are the amounts on lines 22 and 26 the same? 27 Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22 27 Enter the amount from line 26 (If line 26 is blank, enter -0-) 28 29 Subtract line 28 from line 27 30 Multiply line 29 by 15% (15) 30 31 Figure the tax on the amount on line 23 Use the 2010 Tax Rate Schedule for Estates and Trusts (see the Schedule Ginstructions in the instructions for Form 1041) 31

Schedule D (Form 1041) 2010

32

33

32

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

Add lines 30 and 31

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

SCHEDULE D-1 (Form 1041)

·* U .

Department of the Treasury Internal Revenue Service

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

Employer identification number

2010

Name of estate or trust ROOM AT THE INN FOUNDATION 22-3769059 Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (b) Date (c) Date sold (mo , day, yr) (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr) 1a BERKSHIRE HATHAWAY CASH IN 02/16/2010 02/16/2010 32. 0. 32. LIEU 1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule D-1 (Form 1041) 2010

Schedule D-1 (Form 1041) 2010 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 Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (b) Date (f) Gain or (loss) Subtract (e) from (d) (c) Date sold acquired (mo , day, yr (mo , day, yr) 6a BURLINGTON NORTHERN SANTA FE CORP VARIOUS VARIOUS 38,755. 38,755. 0. 500 SHRS HERSHEY CO 04/21/2008 12/30/2010 23,562. 17,828 5,734.

JSA 0F1222 1 000 Schedule D-1 (Form 1041) 2010

6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b

5,734.

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

File a separate application for each return.

Internal Ive vende	COCIVICE	coparate ap									
	filing for an Automatic 3-Month Extension, co- filing for an Additional (Not Automatic) 3-Mon					▶\X					
=	plete Part II unlessou have already been gran		· · · · · · · · · · · · · · · · · · ·								
a corporation 8868 to requested Return for instructions) Part I Au A corporation	ling (e-file) You can electronically file Form required to file Form 990-T), or an addition juest an extension of time to file any of the Transfers Associated With Certain Persona For more details on the electronic filing of the tomatic 3-Month Extension of Time. On required to file Form 990-T and requesting and	nal (not au forms liste al Benefit nis form, vis aly submit n automatic	tomatic) 3-month extension of time You ed in Part I or Part II with the exception Contracts, which must be sent to the sit www.irs.gov/efile and click on e-file for original (no copies needed). 6-month extension - check this box and co	of Form IRS IN I	tronica 8870, paper	ally file Form Information format (see					
All other con	oorations (including 1120-C filers), partnerships	s, REMICs,	and trusts must use Form 7004 to reques	t an exten	 sion o	▶ ☐☐ f time					
to file income tax returns											
Type or	Name of exempt organization		mployer identification number								
print	ROOM AT THE INN FOUNDATION Number street and room or suite no. If a P.O. box	22-3769059									
File by the due date for											
filing your	City town or nost office state and 7IP code For a foreign address see instructions										
return See instructions	See 1										
Enter the Re	turn code for the return that this application is f	or (file a se	eparate application for each return)			. 0 4					
Application		Return	Application			Return					
ls For		Code	Is For			Code					
Form 990		01	Form 990-T (corporation)			07					
Form 990-Bl		02	Form 1041-A			08					
Form 990-E2		03	Form 4720			09					
Form 990-Pf	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10					
	(sec 401(a) or 408(a) trust)	05	Form 6069			11					
Form 990-1	(trust other than above)	06	Form 8870			12					
Telephone If the orga If this is for the whole a list with the	e No 239 643-1037 anization does not have an office or place of bior a Group Return, enter the organization's four group, check this box	usiness in t r digit Grou f it is for pa n is for	p Exemption Number (GEN) rt of the group, check this box		 If t and a	▶ ☐ this is ttach					
until for the ►X	I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until										
	If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period										
	application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tentative tax, les	s any 3a		663.					
	nonrefundable credits See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and										
estimat	estimated tax payments made Include any prior year overpayment allowed as a credit										
c Balanc	Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS										
	onic Federal Tax Payment System) See instru		3c		0.						
	you are going to make an electronic fund v	withdrawal	with this Form 8868, see Form 8453	-EO and	Form	8879-EO for					
payment ins	·				_						
For Paperwor	k Reduction Act Notice, see Instructions			For	n 8868	8 (Rev 1-2011)					