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Department of the Treasury Internal Revenue Service

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

2010

OMB No 1545-0052

For	caler	ndar year 2010, or tax year begin	ining		, and ending		
G	Check	k all that apply Initial			ormer public charity	Final return	
Na	me of	f foundation	ded return	Address chan	ge	Name change A Employer identification	number
""	1110 0	Toundation					
L		BYRON J. AND	LINDA A.	STIGGE FOUN	DATION	26-3837060	
Nui	mber a	and street (or PO box number if mail is		address)	Room/sulte	B Telephone number	
<u> </u>		555 RIVERFRON	IT PLZ		1102	321-752-11	75
Cit	y or t	town, state, and ZIP code	100			C If exemption application is p	
			3102		 -	D 1. Foreign organizations 2. Foreign organizations me check here and attach co	s, CNeCK Nere beting the 85% test,
H (_	k type of organization XS Section 4947(a)(1) nonexempt char		empt private foundation Other taxable private founda	ntina	1	
L E		arket value of all assets at end of y	· · · · · · · · · · · · · · · · · · ·		Accrual	E If private foundation sta under section 507(b)(1)	
		Part II, col. (c), line 16)	I —	ther (specify)		F If the foundation is in a	
•	\$			mn (d) must be on cash i	basis.)	under section 507(b)(1)	
e. p ;	art I	Analysis of Revenue and Expe (The total of amounts in columns (b), necessaniy equal the amounts in columns	nses (c), and (d) may not umn (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc.,		40,000.			
5	2	Check If the foundation is not rec					
SCANNED	3	Interest on savings and temporary cash investments		155.	155	155.	STATEMENT 1
넂	4	Dividends and interest from secu	rities				<u> </u>
Ž	5a	Gross rents					
E	b	Net rental income or (loss)					<u> </u>
O g	1 .	Net gain or (loss) from sale of assets n Gross sales price for all	ot on line 10				
Reven	, b	assets on line 6a			0	· · · · · · · · · · · · · · · · · · ·	<u> </u>
ğ	8	Capital gain net income (from Part IV, i Net short-term capital gain	ine 2)				
	g	Income modifications			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***	**************************************
	10a	Grass sales less returns					
	b	Less Cost of goods sold					
	c	Gross profit or (loss)					<u> </u>
	11			40 155	166	155	
_	12	Total. Add lines 1 through 11		40,155.	155		0.
	13	Compensation of officers, directors, tr	•	0.	- 0	•	0.
	14	Other employee salaries and wag Pension plans, employee benefit				 	
es		Legal fees	STMT 2	3,812.	0 .	. 0.	0.
ens	b	Accounting fees	STMT 3	300.	0	. 0.	0.
Ē	C	Other professional fees					
<u>«</u>	17	Interest					
trat	18	Taxes			R -	CEINED T	,
inis	19	Depreciation and depletion				<u> </u>	
Ę	20	Occupancy			- 	0 8 2011	
δ	21	Travel, conferences, and meeting Printing and publications	js			<u> </u>	
g	22	Other expenses			OG	DENITT I	
ati Ti	24	Total operating and administrat	tive				
Operating and Administrative Expenses		expenses. Add lines 13 through		4,112.	0	. 0.	0.
0	25	Contributions, gifts, grants paid		4,112. 19,600.			19,600.
	26	Total expenses and disburseme	ents.		_		10.000
	 	Add lines 24 and 25		23,712.	0	0.	19,600.
	1	Subtract line 26 from line 12		16,443.			
	1	Excess of revenue over expenses and		10,443.	155	<u> </u>	
	1	 Net investment income (if negative, s Adjusted net income (if negative, s 			133	155.	
0235		najuaten net income (ii negative,		<u> </u>			5 000 DE (0040)

49,497.

,497.

4

5

4 Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	cribe the kind(s) of property sold (varehouse, or common stock, 200		···-] P	How acquired - Purchase - Donation	(a) (m)	o , day, yr)	(d) Date sold (mo, day, yr)	
<u>1a</u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	·		-		-			
	ONE			-	-				
C				-		 			
e e				-		·			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	•		(e)	h) Gain or (loss plus (f) minus () (g)	
a									
b									
<u>c</u>					· 				
<u>d</u>		<u> </u>							
<u> </u>	(1)		10/01/00					 	
Complete only for assets snow	ing gain in column (h) and owned t	1			(is (Col. (h) gain out not less thai		
(I) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		`	Los	ses (from col (h))	
	200112/01/00	0.001			···				
<u>b</u>									
<u>C</u>		·		1		·-·			
d									
e									
	(If gain, also en	iter in Part I. line	7	1					
2 Capital gain net income or (net c	apital loss) If (loss), enter	ter in Part I, line -0- in Part I, line	<i>.</i> 7) [2				
3 Net short-term capital gain or (lo	•								
If gain, also enter in Part I, line 8		(5)]					
If (loss), enter -0- in Part I, line 8	}			للِـ	3				
Part V Qualification \	······································					ncom	8		
(For optional use by domestic prival	te foundations subject to the sectio	n 4940(a) tax on	net investment in	icome)				
f section 4940(d)(2) applies, leave	this part blank								
			41 - 4					Yes X No	
Was the foundation liable for the set			•	rioaz				Yes A NO	
f "Yes," the foundation does not qual Enter the appropriate amount in	each column for each year, see in:			es					
(a)	(b)		making any ones	(c)		f		(d)	
Base periód years Calendar year (or tax year beginn		distributions	Net value of no	ralue of noncharitable-use assets			Distribution ratio (col (b) divided by col (c))		
2009	ing in /	19,499.			22,70	2.	(00) (0)	.858911	
2008		1,000.				0.		.000000	
2007									
2006			-						
2005									
2 Total of line 1, column (d)	•						2	.858911	
3 Average distribution ratio for the	5-year base period - divide the total	al on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	ence if less than 5 years						3	.429456	
4 Enter the net value of noncharita	ble-use assets for 2010 from Part	X, line 5					4	36,450.	
Multiply line 4 by line 3							5	15,654.	
								_	
Enter 1% of net investment inco	me (1% of Part I, line 27b)						6	2.	
								15 656	
7 Add lines 5 and 6							7	<u>15,656.</u>	
								10 600	
B Enter qualifying distributions fro	m Part XII, line 4					L	8	19,600.	
If line 8 is equal to or greater tha See the Part VI instructions	n line 7, check the box in Part VI, li	ne 1b, and comp	lete that part usin	ıg a 1	% tax rate				

_		-3837			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see i	nstru	ctio	ns)
18	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)				_
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%				2.
	of Part I, line 27b				
•	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-)				<u>0.</u>
3	Add lines 1 and 2				2.
4	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-				2.
6	Credits/Payments				
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a				
t	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				0.
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				2.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			·	
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		X
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 or				
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ O . (2) On foundation managers ▶ \$				
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers > \$O.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	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, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A\r	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				
	remain in the governing instrument?		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	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)				
	NE				
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	X	
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)? 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 STMT	ে 4	10	Х	

Peart VIII - Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2010) BYRON J. AND LINDA A. ST			26-3837	060	Pag
(1) Carry on propagands, or otherwise attempt to influence legislation (action 4945(s))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, clarifable, scientific, its rary, or educational purposes, or for the prevention of cruelty to children or animats? (5) Provide for any purpose other than religious, clarifable, scientific, its rary, or educational purposes, or for the prevention of cruelty to children or animats? (6) Provide for any purpose other than religious, clarifable, scientific, its rary, or educational purposes, or for the prevention of cruelty to children or animats? (7) Provide any purpose other than religious, clarifable, scientific, its rary, or educational purposes, or for the prevention of cruelty to children or animats? (8) If any purpose is responsible for the registration of the scientific of the registration of the foundation, during the scientific of the	Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	nued)		•
(8) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any other spistation driver? (1) Provide a grant to an individual for travel, study, or other similar purposes? (2) Provide a grant to an individual for travel, study, or other similar purposes? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide for any purpose other than religious, charitable, scentific, Merary, or educational purposes, or for the prevention of crueity to different an extraord and study of the provided	5a During the year did the foundation pay or incur any amount to					
any voter registration drive?	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🔼 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an increasation offer than a charitable, etc. organization described in section SOS((1/1), (2), or (3), or section 490(0)(2)? (5) Provide for any purpose other than reliquous, charitable, scientific, literary, or aducational jurgiosis, or for the purposes of the thing reliquous purposes, or for the purpose of the provided of the provide	(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indir	ectly,			1
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 508(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scendific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If any answers "Ser 15 61(1)(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organization is a current notice regarding disaster assistance (see instructions)? Organization (see sponsibility for the grant? If "Yes," I we find the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the yast, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," to 8b, the Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation regime any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation regime any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation regime any proceeds or have any net income attributable to the transaction? If "Yes," did the foundation regime any proceeds or have any net income attributable to the transaction? Organization of five highest-paid employees (other than those included on line 1). If none, enter "NONE." Organization of five highest-paid employ	any voter registration drive?					
Sol(a)(1), (2), of (3), or section 4940(q)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animato? It is any answer is "Yes to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53-945 or an aurrent inotice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the answer "Yes to quistion 54(-) dose the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53-4945-5(d). But the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," to 60, the Form 8870. But the foundation during the year, any premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," to 60, the Form 8870. But the foundation receive any proceeds or have any set income attributable to the transaction? It is all officers, directions, trustees, foundation managers and their compensation. (a) Name and address foundation managers and their compensation. (b) Title, and average hours go a proceeding the position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Name and address of each employee paid more than \$50,000 (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Compensation of five highest-paid employees (other than those included on lin	(3) Provide a grant to an individual for travel, study, or other similar purposes	32	Y	es 🗶 No		
(6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? If any answer is "Yes" to Sa(1)-(3), dot any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," aftench the statement required by Regulations section 53.4945-5(d). 8a bid the foundation, during the year, reverse any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes is Do, life Form 8870. 7a At any time during the tax year, vias the foundation a party to a prohibited tax sheller transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Information About Officers, Directors, Trustees, Foundation (a) Name and address (b) Title, and average for the paid, party of the paid of the paid, party of the party of the paid, party of the paid, party of the paid, party of the party o	(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section				
the prevention of country to children or animals? b If any answer is "Yes" to \$6(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If It meanswer is "Yes" to quistion \$6(4), does the foundation claim examption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$3.4945-5(d). Ba Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a parsonal barieft contract? If "Yes" to £0, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes" to £0, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes" to £0, the Form 8870. 7a At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction? If "Yes" to £0, the Form 8870. 7a At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (b) Title, and average hours per week devoked to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoked to position of the highest paid employees part once the provided transactions account, other allowances. (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expanse Title	509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
b If any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 495 or a current indice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here I this enswers is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). So Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," other the foundation of the foundation party to a prohibited tax shelter transaction? To all any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? To be if "Yes," did the foundation receive any proceased or have any net receive any processed or have any net receive and contractors. To be if "Yes," did the foundation receive any proceased or have any net receive any proceased or have any net receive any processed or have any net receive any time at the statement of the prohibition of the foundation managers and their compensation. (a) Name and address Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average for the paid, expectation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (d) Compensation (e) Compensation (e) Compensation account, other allowances.		, or educational purposes, or				
section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 53(4), does the foundation diam examption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 8a Dit the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? If "Yes" to 6b, file Form 8870. 1 List all officers, directors, trustees, foundation Managers, Highly Part Vill Information About Officers, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted (c) Compensation (d) Compensation (e) Expense account, other compensation. NONE 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Expense account, other compensation. (d) Compensation (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense account, other allowances of each employee paid more than \$50,000 (e) Expense acc	the prevention of cruelty to children or animals?		Y	es 🗶 No		
Crganizations relying on a current notice regarding disaster assistance check here c. If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal barrelit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes " So fis. the Form \$870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List ell officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoked to position (c) Compensation (If not paid, enter-0-) SEE STATEMENT 5 0 . 0 . 0 . 0 . Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoked to position (c) Compensation (If not paid, enter-0-) All the paid of the highest paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation (e) Scaperse account, other allowances of exchange the provided to position (e) Compensation (e) Expense account, other allowances of exchange the provided to position (e) Compensation (e) Expense account, other allowances of exchange the provided to position (e) Compensation (e) Expense account, other allowances of exchange the provided to position (e) Compensation (e) Expense account, other allowances to the paid of the provided to position (e) Compensation (e) Expense account, other allowances to the paid of the provided to position (e) Compensation (e) Expense account, other allowances to the paid of the provided to position (e) Compens	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations	/-		
c If the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grain? If Yes, "attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes' to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If Yes' to 6b, the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? It is all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (fir not paid, enter-0-) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense the properties to the properties of the position of the highest-paid employees and count, other allowances. NONE	section 53 4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	
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Part VIII - Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE Total number of others receiving over \$50,000 for professional services 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 the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 N/A Part IX-B Summary of Program-Related Investments Bescribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	37060 . Page 7
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N/A	Amount
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All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations m	ust complete this part.	Foreign four	ndations, see	instructions.)
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.
	Average of monthly cash balances			1b	37,005.
C	Fair market value of all other assets			10	0.
đ	Total (add lines 1a, b, and c)			1d	37,005.
e	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	37,005.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructions)		4	555.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V, line 4		5	36,450.
6	Minimum investment return. Enter 5% of line 5			6	1,823.
P	part XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)	l (j)(5) private operating f	oundations an	d certain	
1	Minimum investment return from Part X, line 6		İ	1	1,823.
2a	Tax on investment income for 2010 from Part VI, line 5	2a	2.		
b	Income tax for 2010 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1		Ì	3	1,821.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	1,821.
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 X	III, line 1		7	1,821.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	DS#S			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	19,600.
þ	Program-related investments - total from Part IX-B			1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the				
a	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	l Part XIII, line 4		4	19,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest	ment	ĺ		
	income Enter 1% of Part I, line 27b			5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	19,598.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years wh	en calculating whether th	e foundation o	ualifies for the	section

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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 2	010 from Part XI,			——————————————————————————————————————	
line 7					1,821.
2 Undistributed income, if any, a	s of the end of 2010				
a Enter amount for 2009 on	ly			0.	
b Total for prior years					
			0.		
3 Excess distributions carry	over, if any, to 2010				
a From 2005					
b From 2006					
c From 2007					
d From 2008	1,000.				
e From 2009	18,366.				
f Total of lines 3a through e	þ 	19,366.			
4 Qualifying distributions for					
Part XII, line 4 ► \$					
a Applied to 2009, but not n	1117			0.	
b Applied to undistributed in	-		0		
years (Election required -			0.		**** *********************************
c Treated as distributions of	· I	_			
(Election required - see ins	·	0.			1,821.
d Applied to 2010 distributa		17,779.			1,021.
e Remaining amount distrib	· —	0.		 	0.
5 Excess distributions carryover (If an amount appears in column must be shown in column (a))		0.	,		<u> </u>
6 Enter the net total of each indicated below:	ı column as				
2 Corpus Add lines 3f, 4c, and 4	e Subtract line 5	37,145.			
b Prior years' undistributed	income Subtract				
line 4b from line 2b			0.		
c Enter the amount of prior y undistributed income for v deficiency has been issued the section 4942(a) tax ha assessed	which a notice of f, or on which		0.		
d Subtract line 6c from line 6	Sb Taxable				
amount - see instructions			0.		
e Unaistributed income for 2	2009 Subtract line				
4a from line 2a Taxable ar	mount - see instr			0.	
f Undistributed income for 2	2010 Subtract				
lines 4d and 5 from line 1	This amount must				
be distributed in 2011	<u> </u>			######################################	0.
7 Amounts treated as distrib					
corpus to satisfy requirem	-				
section 170(b)(1)(F) or 49		0.			
8 Excess distributions carry					
not applied on line 5 or line		0.			
9 Excess distributions carry		37,145.			
Subtract lines 7 and 8 from	n line ba	37,143.			
10 Analysis of line 9 a Excess from 2006					
b Excess from 2007					
c Excess from 2008	1,000.				
d Excess from 2009	18,366.				
e Excess from 2010	17,779.				
5 Except Hom Edito				· · · · · · · · · · · · · · · · · · ·	Form 000 DE (2010)

Part XIV Private Operating I	Foundations (see les			N/A	3/000 • Fage
			ra, question a)	IN/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective f	•	<u> </u>	. •		
b Check box to indicate whether the four		ig foundation described		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 0007	(a) Total
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed			<u></u>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			ļ		
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					· -···································
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during				•	
1 Information Regarding Foundation	on Managers:			•	
a List any managers of the foundation wi	no have contributed more t	han 2% of the total cont	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed i	more than \$5,000) (See se	ection 507(d)(2))			
SEE STATEMENT 6					
b List any managers of the foundation wh			(or an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	is a 10% or greater interes	t			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation	only makes contributions to	o preselected charitable	organizations and does n	ot accept unsolicited requi	ests for funds If
the foundation makes gifts, grants, etc	·			omplete Items 2a, b, c, and	<u>a</u>
a The name, address, and telephone num	iber of the person to whom	n applications should be	addressed		
b The form in which applications should	be submitted and informati	ion and materials they sl	nould include		
c Any submission deadlines					
d Any restrictions or limitations on according	lo nuch ac hu sassastiss	Larges showtable field-	lundo of materials	ather factors	
d Any restrictions or limitations on award	s, such as by geographica	i areas, charitadie fields,	KINGS OF INSTITUTIONS, OF C	other factors	

3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year		-		
			~	
SEE STATEMENT 7 Total			 	19,600.
b Approved for future payment			- Ja	13,0001
NONE				
Total			▶ ah	0.

Form 990-PF (2010)

Part XVI-A	Analysis	of Income	-Producing	Activities
፣ የ ቀነት እንስ ከደግሞ እ	Allalysis		- I I Oddcii ig	MOUNTINGS

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income		ded by section 512, 513, or 514	(8)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a					
b				·	
C	1 1				
d			-		
e					
f	_				
g Fees and contracts from government agencies					· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	900001	155.			
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		-			•••
a					
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		155.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	155.
(See worksheet in line 13 instructions to verify calculations.))				

Line No.

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

THE INCOME REPORTED FROM CONTRIBUTIONS AND THE INTEREST EARNED THEREON WILL BE USED TO ASSIST NONPROFIT ORGANIZATIONS AS NEEDED TO FURTHER THE FOUNDATION'S PURPOSE.

	. Exempt Organizations		V	AI-
	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of		Yes	No
	he Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
	Transfers from the reporting foundation to a noncharitable exempt organization of	4-44		v
	1) Cash	1a(1)		<u> </u>
,	2) Other assets	1a(2)		
	Other transactions			v
	1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	2) Purchases of assets from a noncharitable exempt organization	1b(2)		_
	3) Rental of facilities, equipment, or other assets	1b(3)		X
	4) Reimbursement arrangements	1b(4)		X
	5) Loans or loan guarantees	1b(5)		X
	6) Performance of services or membership or fundraising solicitations	1b(6)		X
	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	10	نـــــــــــــــــــــــــــــــــــــ	X
C	f the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, a		ets,	
	column (d) the value of the goods, other assets, or services received	 -		
a) Lin		sharing an	rangeme	nts
	N/A			
			_	
				
		-		
В	s the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [*Yes,* complete the following schedule	Yes	X] No
<u> </u>	(a) Name of organization (b) Type of organization (c) Description of relations	hip		
	N/A	<u> </u>		
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and be	lief, it is tr	ie, corre	ct,
Sig	and complete, Opclaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge			
Her	e 1/29/1/ DIRECTOR			
	Squarture of officer or trustee Date Title			
	Print/Type preparer's name Preparer's signature Date Check If PTIN			
_	self-employed			
Paid				
	parer Firm's name ► BORMAN & SCHIEBER, P.C.			
use	Only 12100 W. CENTER RD #518	220	660	^
	Firm's address ► OMAHA, NE 68144 Phone no 402-	33U−	UOO	U

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number Name of the organization 26-3837060 BYRON J. AND LINDA A. STIGGE FOUNDATION Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1 000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. J For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990⋅EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

BYRON J. AND LINDA A. STIGGE FOUNDATION

26-3837060

Part I	Contributors (see instructions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
1	BYRON J. AND LINDA A. STIGGE 555 RIVERFRONT PLZ #1102 OMAHA, NE 68102	\$ <u>34,000</u> .	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
2	OMAHA TRACTOR, INC. 9317 S. 144TH ST. OMAHA, NE 68138	\$6,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
		s	Person Payroll Noncash Complete Part II if there is a noncash contribution.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)	

Name of organization

Employer identification number

BYRON J. AND LINDA A. STIGGE FOUNDATION

26-3837060

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		,	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(see instructions)	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Relationship of transferor to transferee

FORM 9.90-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT 1	
SOURCE				AMOUNT	
INTEREST INCOME			-	155.	
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	155.	
FORM 990-PF	LEGAL	FEES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	3,812.	0.		0.	
TO FM 990-PF, PG 1, LN 16A =	3,812.		0	0.	
FORM 990-PF	ACCOUNTING FEES			STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	300.	0.	0	0.	
TO FORM 990-PF, PG 1, LN 16B	300.	0.		0.	

	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS			
NAME OF MANAGER				
BYRON J. STIGGE LINDA A. STIGGE	-			
FORM 990-PF GRANTS PAID	STATEMENT 7			
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
CATHOLIC NEAREST WELFARE ASSN 1011 FIRST AVE. NEW YORK, NY 10022	CHARITABLE CONTRIBUTION	501(C)(3)	4,000.	
CONCORDIA UNIVERSITY 800 N. COLUMBIA AVE SEWARD, NE 68434	CHARITABLE CONTRIBUTION	501(C)(3)	5,500.	
MT. MICHAEL BENEDICTINE ABBEY 22520 MOUNT MICHAEL ROAD ELKHORN, NE 68022	CHARITABLE CONTRIBUTION	501(C)(3)	4,000.	
NOTRE DAME SISTERS OF OMAHA 3501 STATE ST. OMAHA, NE 68112	CHARITABLE CONTRIBUTION	501(C)(3)	3,000.	
SKUTT CATHOLIC HIGH SCHOOL 3131 S. 156TH ST. OMAHA, NE 68130	CHARITABLE CONTRIBUTION	501(C)(3)	2,000.	
CATHEDRAL ARTS PROJECT 100 N 62ND ST OMAHA, NE 68132	CHARITABLE CONTRIBUTION	501(C)(3)	1,000.	

26-3837060 • 'BYRON J. AND LINDA A. STIGGE FOUNDATION 501(C)(4) 100. THE ROTARY INTERNATIONAL FOUNDATION CHARITABLE 1560 SHERMAN AVE EVANSTON, IL CONTRIBUTION 60201-3698 TOTAL TO FORM 990-PF, PART XV, LINE 3A 19,600.

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.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		>	X	
-	re filing for an Additional (Not Automatic) 3-Month Ex	-		form).			
Do not co	emplete Part II unless you have already been granted	an automa	atic 3-month extension on a previously fi	iled Fo	rm 8868.		
	c filing (e-file). You can electronically file Form 8868 if					oration	
equired to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	Form 8	868 to request an ex	tension	
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	nsfers .	Associated With Cer	taın	
Personal E	Benefit Contracts, which must be sent to the IRS in pag	er format	(see instructions). For more details on t	he elec	ctronic filing of this fo	orm,	
	irs.gov/efile and click on e-file for Charities & Nonprofits		,		<u>~</u>		
Part I	Automatic 3-Month Extension of Time		bmit original (no copies needed).		· - ·		
A corpora	tion required to file Form 990-T and requesting an autor			nplete			
art I only				•	•		
All other c	orporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to request ar	n exten	ision of time		
	me tax returns.		· · · · · · · · · · · · · · · · · · ·				
Гуре ог	Name of exempt organization			Emp	loyer identification	number	
orint							
	BYRON J. AND LINDA A. STIGO	GE FO	UNDATION	2	6-3837060		
le by the lue date for	Number, street, and room or suite no. If a P.O. box, s			<u></u>			
ling your	555 RIVERFRONT PLZ, NO. 110						
etum See	City, town or post office, state, and ZIP code. For a fo		ress, see instructions				
	OMAHA, NE 68102	oroigir aca	1000, 000 1101100110110.				
nter the f	Return code for the return that this application is for (file	a senara	te application for each return)			0 4	
	totalli oodo for the retain that this application is for the	a separa	te application for each return)				
Applicatio		Return	Return Application			Return	
s For	•••	Code	Is For			Code	
orm 990		01				07	
	RI	02	Form 990-T (corporation)			08	
Form 990-BL			Form 1041-A Form 4720			09	
Form 990-EZ			Form 5227			10	
	T (sec. 401(a) or 408(a) trust)	04 05	Form 6069			11	
	T (trust other than above)	06	Form 8870		 	12	
OHH 990-	BYRON J. STIGGI	<u> </u>	Form 6670			12	
. The hea	bks are in the care of ► 890 GLEN ABBEY		METROTIONE ET 2201	Λ			
	one No. ► 321-752-1175	WAI -	· · · · · · · · · · · · · · · · · · ·	: 0			
·=			FAX No. ▶				
	ganization does not have an office or place of business					<u> </u>	
	for a Group Return, enter the organization's four digit		· · · · · · · · · · · · · · · · · · ·		r the whole group, cl		
ox 🕨 💄	If it is for part of the group, check this box		ch a list with the names and EINs of all		ers the extension is	or	
	uest an automatic 3-month (6 months for a corporation	•	· ·				
		t organizat	tion return for the organization named a	above	The extension		
	the organization's return for:						
▶□	$\frac{X}{2}$ calendar year $\frac{2010}{2}$ or						
▶∟	tax year beginning	, an	d ending	_	_ •		
2 If the	tax year entered in line 1 is for less than 12 months, c	heck reaso	on: Initial return Fina	al retur	n		
	Change in accounting period						
<u>-</u>							
3a If this	a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
nonrefundable credits. See instructions.			\$	0.			
b If this	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
	nated tax payments made. Include any prior year overp			3ь	\$	0.	
-	nce due. Subtract line 3b from line 3a. Include your pa						
	sing EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.	
	nution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.						

LHA

For Paperwork Reduction Act Notice, see Instructions.