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Form **990-PF**

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cale	endar year 2010, or tax year beginning	, 2010,	, and ending	<u> </u>
G Che	ck all that apply Initial return Initial return Amended return	al Return of a former pu	· —	Final return me change
Name of 1		☐ Address d	mange	A Employer identification number
				38-6865165
	Sit-R-Done Foundation Indistreet (or PO box number if mail is not delivered to stri	eet address)	Room/suite	B Telephone number (see the instructions)
	Oak Way			(702) 370-3691
City or to			ZIP code	C If exemption application is pending, check here
Sanfo			32773	D 1 Foreign organizations, check here
H CH	neck type of organization: X Section 501 Section 501 Section 4947(a)(1) nonexempt charitable tr	(c)(3) exempt private found (c) (d) exempt private for use for the control of the		2 Foreign organizations meeting the 85% test, check here and attach computation
	ir market value of all assets at end of year J Acc	ounting method. X C		E If private foundation status was terminated under section 507(b)(1)(A), check here
(fr	,	Other (specify)		F If the foundation is in a 60-month termination
P Ş		column (d) must be on	cash basis)	under section 507(b)(1)(B), check here
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))	(a) Revenue and expenses per books	(b) Net investme income	nt (c) Adjusted net income (d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	739,660.		
	2 Ck ► I if the foundn is not req to att Sch B			
	Interest on savings and temporary cash investments			
	4 Dividends and interest from securities			
	5a Gross rents			
	Net rental income or (loss)			
R	6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all			
E V	assets on line 6a			
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		- //	RECENTER
U	9 Income modifications		<u> </u>	COVED
E	10 a Gross sales less returns and			MAY 7 S. IO
	allowances h Less Cost of		070	
	goods sold			2011 0
	c Gross profit/(loss) (att sch)			OGDEAL JOS
	11 Other income (attach schedule)			GDEN, UT JE
	12 Total. Add lines 1 through 11	739,660.		
	13 Compensation of officers, directors, trustees, etc			
	14 Other employee salaries and wages	45,000.		
	15 Pension plans, employee benefits			
A D	16a Legal fees (attach schedule)	20,583.		
M	b Accounting fees (attach sch)	6,100.		•
οŅ	c Other prof fees (attach sch) 17 Interest			
P Ś E T	18 Taxes (attach schedule)(see instr.) See Line 18 Stmt	5,655.		
OPERAT-26	19 Depreciation (attach sch) and depletion .	3,033.		
, z ->	20 Occupancy			
	21 Travel, conferences, and meetings			
A E X D P	22 Printing and publications			
D P E N	Other expenses (attach schedule) See Line 23 Stmt	98,302.		
S E S	24 Total operating and administrative expenses. Add lines 13 through 23	175,640.		
	25 Contributions, gifts, grants paid	1,040,000.		
·	26 Total expenses and disbursements. Add lines 24 and 25	1,215,640.		300
	27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	-475,980.		
	b Net investment income (if negative, enter -0-)			
	C Adjusted net income (if negative, enter -0-)			

D4	11	Attached schedules and amounts in the description	beginning or year	Ę1	iu oi	year
Part	11	Balance Sheets column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash – non-interest-bearing	514,000.	39,62	4.	39,624.
- 1	2	Savings and temporary cash investments				
		Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less. allowance for doubtful accounts				
ļ	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch)				
A	•	Less: allowance for doubtful accounts		-	1	
S S E T	8	Inventories for sale or use			<u> </u>	
Ĕ	9	Prepaid expenses and deferred charges		*		.,
S		a Investments – U.S and state government obligations (attach schedule)				
		nivestments — corporate stock (attach schedule)				
		c Investments — corporate bonds (attach schedule)			1	
						
	11	Investments – land, buildings, and equipment: basis	· · · · ·			-
		Less accumulated depreciation (attach schedule)	1-0-			
	12	Investments – mortgage loans .	-		-	
	13	Investments – other (attach schedule)			_	
İ	14			*		
		Less accumulated depreciation (attach schedule)				
		Other assets (describe Total assets (to be completed by all filers – see instructions Also, see page 1, item l)	514,000.	39,62	4.	39,624.
L	17	Accounts payable and accrued expenses				
I	18	Grants payable				
A B	19	Deferred revenue .				
L	20	Loans from officers, directors, trustees, & other disqualified persons				
Ī	21	Mortgages and other notes payable (attach schedule)				
T	22	Other liabilities (describe	1			
Ė	22	Total liabilities (add lines 17 through 22)				
<u></u> S	23	Foundations that follow SFAS 117, check here	-	· · ·	\dashv	
		and complete lines 24 through 26 and lines 30 and 31.				
N F E U	24	Unrestricted				
T N	25	Temporarily restricted			_	
A D	26	Permanently restricted			-	
A B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
LL	27	Capital stock, trust principal, or current funds				
SM	28	Paid-in or capital surplus, or land, building, and equipment fund				
OE	29	Retained earnings, accumulated income, endowment, or other funds	514,000.	39,62		
ŘŠ	30	• • • • • • • • • • • • • • • • • • • •	514,000.	39,62	4.	
	31	Total liabilities and net assets/fund balances (see the instructions)	514,000.	39,62	4.	
Par	t III	Analysis of Changes in Net Assets or Fund Balance				
		Il net assets or fund balances at beginning of year – Part II, colur		ee with		
•	end	of-year figure reported on prior year's return)	(a), iiio oo (iiiast agi	_	1	514,000.
2	Ente	er amount from Part I, line 27a		<u>_</u>	2	-475,980.
3	Other	r increases not included in line 2 (itemize) Year end adjus	tments not enter	ed on books	3	1,604.
4	Add	lines 1, 2, and 3			4	39,624.
5		eases not included in line 2 (itemize)			5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)	 Part II, column (b), lin 	e 30	6	39,624.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

7

Form	990-PF (2010) The Git-R-Done Foundation 38	-68651	.65	F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e the inst	ructions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary – see instr.)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			
	check 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, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only Others enter -0-)	2			
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6	Credits/Payments:				
	2010 estimated tax pmts and 2009 overpayment credited to 2010	-			
		- 1			
		-			
	Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d .	- ₇			
7 8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10			0.
	Enter the amount of line 10 to be. Credited to 2011 estimated tax . Refunded	► 11			
	t VII-A Statements Regarding Activities				
				Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials purely or distributed by the foundation in connection with the activities	blished			
С	Did the foundation file Form 1120-POL for this year?		1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				_
_	(1) On the foundation \$\\$ (2) On foundation managers \$\\$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed foundation managers	JH			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If 'Yes,' attach a detailed description of the activities				
9		-			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	>	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If 'Yes,' attach the statement required by General Instruction T				
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 c	onflict			
	with the state law remain in the governing instrument?		6	Х	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	Х	<u> </u>
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)		-		
b	See States Registered In 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	404045.4	8b	Х	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete the complete is the foundation within the meaning of section 4942(j)(3) of for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete the complete is the foundation within the meaning of section 4942(j)(3) of for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)?	4942(J)(! e Part XI	9		x
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their is and addresses.	names	10	_ X _	
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the tax year beginning in 2010?

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Part VII-B Statements Regarding Activiti		1 4720 May Be Req	uired (continued)	, ,,,,,	
5a During the year did the foundation pay or incur	any amount to				
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	(section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	c election (see section tion drive?	4955); or to carry	. Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other sımılar p	ourposes? .	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	ne transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b	
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ []		
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure respons	ne foundation claim exe ibility for the grant?	mption from the	Yes	No	
If 'Yes,' attach the statement required by Regul	lations section 53.4945	-5(d)			
6a Did the foundation, during the year, receive any on a personal benefit contract?	-		Yes X	No	.,
b Did the foundation, during the year, pay premit	ums, directly or indirect	ly, on a personal benefit	t contract?	6b	X
If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the foundation.	ation a party to a probib	uted tay chalter transcat	tion? Yes X	No	
b If yes, did the foundation receive any proceeds	· - ·			7b	
Part VIII Information About Officers, D					
and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	, o. o, g ,		•
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see instru	uctions).		
(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) Expense other allo	
Daniel D. Whitney					
c/o H.Burkett,1050 Crown Pte. Pkwy	Trustee		į		
Atlanta GA 30338	2.00	0.	0.		0.
Cara G. Whitney					
c/o H.Burkett, 1050 Crown Pte. Pkwy			_		_
Atlanta GA 30338	2.00	0.	0.		0.
2 Compensation of five highest-paid employees	s (other than those incl	uded on line 1— see ins	tructions). If none, ente	r 'NONE.'	
(a) Name and 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) Expense other allo	e account, wances
None					
0					
0					
0					
0					
Total number of other employees paid over \$50,000	·	<u> </u>	<u> </u>	<u></u>	None
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None

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Total. Add lines 1 through 3

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign fo	undations,
1 F	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	1 a	
b A	Average of monthly cash balances	1 b	39,532.
c F	Fair market value of all other assets (see instructions)	1 c	
d T	fotal (add lines 1a, b, and c)	1 d	39,532.
e F	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
([attach detailed explanation]		
2 A	Acquisition indebtedness applicable to line 1 assets	2	
3 5	Subtract line 2 from line 1d	3	39,532.
	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	593.
5 N	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	38,939.
6 1	Minimum investment return. Enter 5% of line 5	6	1,947.
Part 2	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating for	undations
	and certain foreign organizations check here ▶ □ and do not complete this pa	rt.)	
1 N	Minimum investment return from Part X, line 6 .	1	1,947.
2a 1	Tax on investment income for 2010 from Part VI, line 5		
ЬI	ncome tax for 2010 (This does not include the tax from Part VI)	-	
c A	Add lines 2a and 2b .	2c	0.
3 [Distributable amount before adjustments Subtract line 2c from line 1	3	1,947.
4 F	Recoveries of amounts treated as qualifying distributions	4	
5 /	Add lines 3 and 4 .	5	1,947.
6 [Deduction from distributable amount (see instructions)	6	
7 [Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,947.
Part	XII Qualifying Distributions (see instructions)		
1 / a 8	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
b F	Program-related investments – total from Part IX-B	1 b	0.
2 /	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	
b (Cash distribution test (attach the required schedule)	3b	
4 (Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5 E	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 instructions)	5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
I	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	he founda	ition

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Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2010 from Part XI, Inter 7 2 Undistributed incemi, if any, as of the end of 2010 a Enter amount for 2009 only b Total for pays years 20, 20, 30 3 Excess defibitioes carpover, if any, to 2010: a From 2006		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
2 Undistributed income , f any, as of the ead of 2010 a Enter amount for 2009 only b Total for year years 20					1,947.
a Enter amount for 2009 only betail for preyess 20 _ 20 _ 20 _ 20 _ 20 _ 20 _ 20 _ 20					
b Total for grant yeas: 20 _ 20 _ 20 _ 3					
3 Excess distributions carryover, if any, to 2010: a From 2006	•			-	
b From 2006	<u> </u>				
E From 2007 d From 2008	a From 2005 0.				
d From 2009	b From 2006 0.				
e From 2009	c From 2007 . 0 .				
Total of lines 3a through e Qualifying distributions for 2010 from Part XII, line 4 → \$ 0.	d From 2008 0.				
4 Qualifying distributions for 2010 from Part XII, line 4 F Ø 0. A Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required – see instructions) C Treated as distributions out of corpus (Election required – see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus 5 kiness distributions carryver applied to 2010 (if an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b Enter the amount of prior years' undistributed income for which is 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 instructions e Indistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 7 Amounts treated as distributions out of corpus to startly requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2006 O, b Excess from 2008 O, c Excess from 2009 O, c Excess from 2000 O, c Excess from 2009 O, c Excess from 2000	e From 2009 0.				
All, line 4 ▶ \$ 0. a Applied to 2009, but not more than line 2a b Applied to undistributed income of prory years (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributated out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Adl line 31, 44, and 4e Subtract line 5 b Priory years' undistributed income Subtract line 4b from line 31, 45, and 4e Subtract line 5 c Enter the amount of prior years' undistributed income for which a notice of definency than been sued, or on which the section 4,942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount — see instructions e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions f Undistributed income for 2010. Subtract lines 4d and 6 from line 1 This amount must be distributed in 2011 7 Amounts treated as distributions out of corpus to safety requirements imposed by section 17(0)(1)(1)(F) or 4942(a)(3) 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover from 205 not applied on line 5 or line 7 (see instructions) 9 Excess from 2006 0 L Excess from 2008 0 L Excess from 2009 0 Excess from 2000	f Total of lines 3a through e	0.			
a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required – see instructions) c Treated as distributions out of corpus (Election required – see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryleapide to 2010 (If an amount appears in column (a), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4s, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of pror years' undistribut- ed 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 6h Taxable amount – see instructions f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by the interval of the same of the	4 Qualifying distributions for 2010 from Part				
b Applied to undistributed income of prior years (Election required – see instructions) C Treated as distributions can mount Remaining amount distributed out of corpus (Election required – see instructions) d Applied to 2010 distributable amount Remaining amount distributed out of corpus (if an amount appears in column (d), the same amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b C Enter the amount of prior years' undistributed in come 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 instructions d Indistributed income for 2010. Subtract lines 4d and 5 from line 1 This amount must be distributed in come for 2015 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011 A mounts reated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) D. Excess from 2006 D. Excess from 2007 C Excess from 2008 D. Excess from 2008 D. Excess from 2009 Excess from 2010 D. Excess from 2010 Excess from 2010 D. Excess from 2010	XII, line 4 ► \$0.				
(Election required – see instructions) c Treated as distributions out of corpus (Election required – see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover from 2005 not applied in 2010 (If an amount appears in column (a), the same amount must be shown in column (a), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b C. Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount – see instructions e Undistributed income for 2009 Subtract lines 4d and 5 from line 17 his amount must be distributed in 2011 f Undistributed income for 2010. Subtract lines 4d and 5 from line 17 his amount must be distributed in 2011 f Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)((f) or 4942(g)(3)) (see instructions) f Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover from 2001. Subtract lines 4 from line 6a 10 Analysis of line 9 a Excess from 2008	a Applied to 2009, but not more than line 2a				h.,
(Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus 5. Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a), be same amount must be shown in column (a), be same amount must be shown in column (a), be same amount must be shown in column (a), be same amount of prior years' undistributed income. Subtract line 4b from line 2b. b Prior years' undistributed income. Subtract line 4b from line 2b. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount — see instructions e Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 7. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(g)(3) (see instructions) 8. Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 9. Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 9. Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10. Analysis of line 9: a Excess from 2006	b Applied to undistributed income of prior years (Election required — see instructions)				
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	d Excess from 2009 0 .				
	e Excess from 2010 0 .	ļ			

Form 990-PF (2010) The Git-R-Done F				38-686516	5 Page 10
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or do is effective for 2010, enter the date of the r	etermination letter t	that it is a private of	perating foundation,	and the ruling	
b Check box to indicate whether the foundation	•	atıng foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
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					
 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:					
 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)(8)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	(0 1 1 11 1			1.05.000	,
Part XV Supplementary Information assets at any time during the	(Complete this e vear — see in	part only if the	organization ha	ad \$5,000 or moi	re in
Information Regarding Foundation Manag a List any managers of the foundation who h close of any tax year (but only if they have Daniel D. Whitney	ers: ave contributed mo	re than 2% of the to	otal contributions rec section 507(d)(2))	ceived by the foundar	tion before the
b List any managers of the foundation who o	wn 10% or more of	the stock of a corn	oration (or an equal	ly large portion of the	e ownership of
a partnership or other entity) of which the f None	oundation has a 10	% or greater interes	st.	y laige perden or all	5
2 Information Regarding Contribution, Gran Check here In the foundation only makes requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected char	ritable organizations		
a The name, address, and telephone number Adrian B. Stumpf	of the person to w	rhom applications st	hould be addressed		
8325 Time Machine Avenue Las Vegas	NV 8911	3 (70	02) 370-3691		
b The form in which applications should be s				e. 	
In letter format, including a cop	y of exemption	letter from 501	(c)(3) organiz	ation and statin	g use of funds.
c Any submission deadlines: None	-				
d Any restrictions or limitations on awards, s None	uch as by geograph	nical areas, charitab	ole fields, kinds of in	stitutions, or other fa	actors
	 				

Form 990-PF (2010) The Git-R-Done Foundation

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	substantial contributor	recipient	Contribution				
a Paid during the year							
Child Advocacy Center	None	Public	General				
3200 Sumner Street		Charity	Support				
Lincoln NE 68502				500,000.			
Madonna Foundation	None	Public	General				
5401 South Street		Charity	Support				
Lincoln NE 68506		_		525,000.			
The Arc of Cape Cod	None	Public	General				
P.O. Box 428		4	Support				
Hyannis MA 02601		1		5,000.			
Special Olympics of Maryland	None	Public	General				
513 Progress Drive, Suite P		1	Support				
Linthicum MD 21090			Support	10,000.			
HINCHICAM IND 21030				10,000.			
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			1				
				İ			
	1		:				
Total	1	1	► 3a	1,040,000.			
b Approved for future payment	1		3a	1,040,000.			
2 - pp. 5-55 to take o paymont							
Total			► 3b				

Part XVI-A	Analysis of	Income-Producing	Activities
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ter gross amounts unless otherwise indicated	Unrelated business income Excluded by			y section 512, 513, or 514	(e)	
1. 8	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions	
Program service revenue			code	-		
a b			+			
······································						
			 			
de			+			
f			1 1			
g Fees and contracts from government agencies	- -		 			
Membership dues and assessments						
Interest on savings and temporary cash investments						
Dividends and interest from securities						
Net rental income or (loss) from real estate:					•	
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal property						
Other investment income						
Gain or (loss) from sales of assets other than inventory						
Net income or (loss) from special events			1	98,338.		
Gross profit or (loss) from sales of inventory						
Other revenue.				^		
a						
b						
С	!					
d						
e						
	ļ			98,338.		
e Subtotal Add columns (b), (d), and (e)	ļ					
Programme Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)						
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate.	ations.)	shment of Exem	pt Purpos	13		
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the subtotal subto	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the subtotal subto	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula IT XVI-B Relationship of Activities to the substructions is substructed.	ations.)			13 ses	98,338	
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula IT XVI-B Relationship of Activities to the substructions is substructed.	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula IT XVI-B Relationship of Activities to the substructions is substructed.	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula IT XVI-B Relationship of Activities to the substructions is substructed.	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula rt XVI-B Relationship of Activities to t	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula rt XVI-B Relationship of Activities to t	ations.)			13 ses	98,33	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated at XVI-B Relationship of Activities to the subtotal subto	ations.)			13 ses	98,33	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula IT XVI-B Relationship of Activities to the substructions is substructed.	ations.)			13 ses	98,33	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,33	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcula art XVI-B Relationship of Activities to the	ations.)			13 ses	98,338	

Form 990-PF (2010) The Git-R-Done Foundation 38-6865165 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							i l	Yes	No
1 Did the o	rganization directly	or indirectly en	gage in any of the following v	ith any oth	er organization	27			
described relating to	o political organizati	r the Code (oth ons?	er than section 501(c)(3) org	anizations)	or in section 52	27,			
•			noncharitable exempt organi	zation of					
(1) Cash			. 3				1 a (1)		Х
(2) Other							1 a (2)		<u>x</u>
b Other training									
	s of assets to a nonc	haritable exem	nnt organization				1 b (1)		Х
• •			ble exempt organization	•			1 b (2)		X
` '	al of facilities, equip		. •				1 b (3)		X
` '	al of facilities, equipi ibursement arrangen	•	assets				1 b (4)		X
	s or loan guarantees					•	1 b (5)		X
• •	_		o or fundraising solicitations				1 b (6)		X
• •			s, other assets, or paid emplo				1c		X
c Sharing C	or racilities, equipme	iii, iiiaiiiig iisi	s, other assets, or paid empic	yees			10		
d If the ans	swer to any of the ab	ove is 'Yes,' c	omplete the following schedul	e Column	(b) should alwa	ys show the fair mai	ket value	of	
the goods	s, other assets, or se	ervices aiven b	v the reporting foundation. If	the foundat	tion received les	ss than fair market v	alue in		
		(· · · · · · · · · · · · · · · · ·	ow in column (d) the value of						
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organization	(d	Description of trai	nsfers, transactions, and	naring arran	igement	<u>s</u>
			·-···						
									-
									_
•									
O - 1 - 41 - 4							,		
described	undation directly or ii d in section 501(c) o	nαirectly aπilial f the Code (oth	ted with, or related to, one or ner than section 501(c)(3)) or	more tax-e	exempt organiza 527?	itions	Yes	X	No
	complete the following	•						لا	
	Name of organization		(b) Type of organizat	ion	(c) Description of rela	ationship		
<u> </u>	· · · · · · · · · · · · · · · · · · ·		(my v) po or organization		````	,			
-							-		
									
Linder of	enalties of perium. I declar	e that I have evam	uped this return, including accompanying	na schadulas a	nd statements, and i	to the best of my knowledge	e and helief	it is true	,
correct,	and complete Declaration	of preparer (other	ined this return, including accompanyir than taxpayer or fiduciary) is based on	all information	of which preparer h	nas any knowledge	e and bener,	it is a de	••
Sign		<i>\</i> 1 .			.1 1.	_ 1			
Here	Tora	whole	Ven	_	5 9 W	I Trus tec	シ		
	nature of officer or trustee			Date		Title			
	Print Type-preparer's nam	ne	reparer signature		Date	Check if If	PTIN		
Paid	Rosalind A.	Carr	4050/129-1	1 20	146711	/ self-employed			
Preparer		OSALIND A	1 2 2 2 2 2 2			Firm's EIN ►			
Use Only	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	99 NINTH	•						
Jac Only	Firm's address -	APLES		FL 34	102-8200	Phone no (239) 261-	1010	+
BAA						1255	Form 99		
-							1 0/111 33	J-1 F (2010)

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

Internal Neveride Service		
Name of the organization		Employer identification number
The Git-R-Done Foundati	.on	38-6865165
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organiza 4947(a)(1) nonexempt charitable trust n 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust tr 501(c)(3) taxable private foundation	reated as a private foundation
Check if your organization is covered Note. Only a section 501(c)(7), (8), or	by the General Rule or a Special Rule (10) organization can check boxes for both the General	al Rule and a Special Rule See instructions
General Rule For an organization filing Form 99 contributor (Complete Parts I and	0, 990-EZ, or 990-PF that received, during the year, \$5 II)	5,000 or more (in money or property) from any one
Special Rules		
509(a)(1) and $170(b)(1)(A)(vi)$, and	on filing Form 990 or 990-EZ, that met the 33-1/3% sup id received from any one contributor, during the year, a 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comp	a contribution of the greater of (1) \$5,000 or
aggregate contributions of more the	0) organization filing Form 990 or 990-EZ, that received nan \$1,000 for use <i>exclusively</i> for religious, charitable, en or animals. Complete Parts I, II, and III	d from any one contributor, during the year, scientific, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here to	O) organization filing Form 990 or 990-EZ, that received or religious, charitable, etc, purposes, but these contribute the total contributions that were received during the yea the parts unless the General Rule applies to this organi	outions did not aggregate to more than \$1,000 are for an exclusively religious, charitable, etc,
religious, charitable, etc, contribut	tions of \$5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Pa	overed by the General Rule and/or the Special Rules d art IV, line 2 of their Form 990, or check the box on line at the filing requirements of Schedule B (Form 990, 990	e H of its Form 990-EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010

Page 1

of 3

of Part I

Name of organization

The Git-R-Done Foundation

Employer identification number 38-6865165

Part I	Contributors (see instructions)				
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	Daniel D. and Cara G. Whitney 1700 Oak Way Sanford FL 32773	\$550,020.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
2	James Lombardo 549 East Wilson Street Milwaukee WI 53207	\$5 <u>,</u> 870.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
3	Charles Price 1009 Greentree Drive Winter Park FL 32789	\$7,260.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
4	Charles Haideukewych 5855 Emerington Crescent Orlando FL 32819	\$7,750.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
5	Kyle Riva 4563 Tiqua Island Court Winter Park FL 32792	\$7,960.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
6	Williams Company - Tampa 2301 Silver Star Road Orlando FL 32804	\$ 7,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution		

Schedule B	(Form	990	990-EZ.	or 990-PF	(2010)
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Page 2

of 3

of Part I

Name of organization

The Git-R-Done Foundation

Employer identification number

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Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	Structural Contractors South, Inc. 370 North Street Longwood FL 32750	\$7 <u>,5</u> 00.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	HoustonTX 77253	\$15,250.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	Orlando Health Foundation 3160 southgate Commerce Blvd. Suite 50 Orlando FL 32806	\$7,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	Jeffrey Forrest 221 circle Drive Maitland FL 32751	\$7 <u>,500</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11_	Frederick Howalt 1300 Tiarco Drive Dalton GA 30721	\$8,850.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12_	Crown Consulting Firm, Inc. P.O. Box 952173 Lake MaryFL 32795	\$ 5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

	B (Form 990, 990-EZ, or 990-PF) (2010)	Page 3	of 3 of Part I
Name of org			r identification number
The Gi	t-R-Done Foundation	38-68	365165
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	Georgia Jet 530 Brisco Blvd. Lawrenceville GA 30046	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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)

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

of 3

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Payroll taxes	3,499.			
Nevada unemployment tax	810.			
Nevada Modified Business tax	1,346.			

Total

5,655.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Bank charge	39.			
Credit card billing expense	2,958.			
Credit card settlement discount	271.			
Foundation registration fee	1,020.			
Foundation renewal fee	1,135.			
Charity golf tournament expense	91,245.			
Payroll company	1,007.			
Registered agent services	565.			
Shipping expense	62.			

Total

98,302.

Form 990-PF, Page 4, Part VII-A, Line 8a

States Registered In

AL - A	Alabama
AK - A	alaska
CT - C	Connecticut
FL - F	lorida
KS - K	Kansas
KY - K	(entucky
LA - I	ouisiana
ME - M	Maine
MD - M	Maryland
MA - M	Massachusetts
MI - M	lichigan
MN - M	Minnesota
MS - M	Mississippi
MO - M	Missouri
NH - N	New Hampshire
NJ - N	New Jersey
NY - N	New York
NC - N	North Carolina
ND - N	North Dakota
OH - C	Ohio
OR - C)regon
PA - E	Pennsylvania
SC - S	South Carolina
SD - S	South Dakota
WA - W	Vashington
WV - W	Vest Virginia

4 ...

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount
Charity Golf Tournament	189,583.
Gifts	550,020.
Miscellaneous	57.
Total	739,660.