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Form	9	9	0	-P	F
1 01111	•	$\mathbf{}$	•	-	

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

OMB No 1545-0052

De	Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements 2010											
For calendar year 2010, or tax year beginning , 2010, and ending						, 20						
		ck all that apply:		Initial return		Initial return	of a former p	oublic cha	rity			Final return
				Amended return		Addr	ess change		Ŋ	lame change		•
N	ame c	of foundation								A Employer iden	tifica	ation number
R	OBE	RT HARDCASTL	E C	HARITABLE FOU	JNDATIC	ON, INC				43	3-1	1844009
N	umbe	r and street (or P O bo	ox nur	mber if mail is not delivere	d to street ac	dress)		Room/su	ıte	B Telephone numb	er (s	ee page 10 of the instructions)
				4,								
1	610	O CHESTERFIE	LD	PARKWAY WEST				150			636	5) 532-0484
Cı	ty or	town, state, and ZIP o	ode							C If exemption app pending, check h		
_										D 1. Foreign organi		▶
<u>C</u>	HES	TERFIELD, MO	63							2 Foreign organ		
H		ck type of organiza			c)(3) exe	mpt private	foundation		l	85% test, chec computation		
\perp		ection 4947(a)(1) no					rivate founda			E If private founda	ition :	status was terminated
ı		market value of all		11 1		ethod X	Cash Acc	crual		under section 50	7(b)(1)(A), check here . \blacktriangleright
	-	ear (from Part II, co			ther (spec							a 60-month termination
		▶ \$			column (e	a) must be c	n cash basis.)	1		under section 507	7(b)(1 T	1)(B), check here
Li	aru	total of amounts in c	enue :olum	and Expenses (The		venue and	(b) Net inve	estment	(0) Adjusted net		(d) Disbursements for charitable
		may not necessarily	equa	al the amounts in		nses per ooks	incon	ne	·	ıncome		purposes
-		column (a) (see pag		· · · · · · · · · · · · · · · · · · ·		50,000	1			 '	+	(cash basis only)
	1		founda	ation is not required to		30,000	•			<u> </u>	\dashv	
	2			В		g		9.		-	+	ATCH 1
	3 4	Interest on savings and Dividends and interes					1				\dashv	AICH I
	-						+				\dashv	
		Gross rents					+				\dashv	
	60	Net rental income or (lo		IVED.					-		+	
Revenue	b	Gross salesprice for all	Sale.o	assersing on line 10			 					·
š	7	assets on line 6a	me (from Part IV, line 2).	_							
æ	8	Capital gain netjinco	al dau								十	
	9	Income modifications	-	1221							十	
		Gross sales less etuns and allowances	ŠEI	N UT							\dashv	
		Less Cost of goods sold										· ·
	i	Gross profit or (loss)		ch schedule)								
	11	Other income (attach										
	12	Total. Add lines 1 th				50,009		9.				
-	13	Compensation of office	rs, dire	ectors, trustees, etc		C	' -					
(A)	14	Other employee sala	ines a	and wages							_	•
Se	15	Pension plans, empl									_	
and Administrative Expenses	16a	Legal fees (attach sc	hedu	le)				0.550			\downarrow	
Ä	b	Accounting fees (att	ach s	chedule) ATCH 2		5,300	' †	2,650.			٠.	2,650
š	С	Other professional fe	•	•			ļ				4	
trat	17	Interest					<u> </u>				-	
nist	18	Taxes (attach schedule)	(see p	page 14 of the instructions)		2	-				\dashv	
Ē	19	Depreciation (attach		•								···
Ad	20	Occupancy					 				+	
פַ	21	Travel, conferences,		•		_				- -	+	
S S	22	Printing and publicat	tions	ATCH /		30	 	30.			+	· · · · · · · · · · · · · · · · · · ·
=	23	Other expenses (atta					1	30.			+	
era	24	Total operating and		•		5,332		2,680.		(ا. د	2,650
g	0.5	Add lines 13 through		•		54,581		_, 000 a			+	54,581
	25	Contributions, gifts,	•	•		59,913		2,680.		_	5.	57,231
-	26 27	Total expenses and disbur Subtract line 26 from				00,010		_,			+	37,231
						-9,904						
		Excess of revenue over ex Net investment inco				2,303		0.			+	
		Adjusted net income					 				+	
_	<u> </u>			<u> </u>								

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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JSA ** ATCH 3 1481-803

Form **990-PF** (2010)

PAGE 1

43-1844009

Υ 1 T*

Þ	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	_ End	of year
<u> </u>	artii	- Dalailice Silects	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	17,492.	7,588.	7,588.
			cash investments			
		Less allowance for dou	btful accounts ▶			
	-		btful accounts ▶			
	5				<u> </u>	
			officers, directors, trustees, and other		-	
			· · · · · · · · · · · · · · · · · · ·			
	_	·	ach schedule) (see page 15 of the instructions)	· · · · · · · · · · · · · · · · · · ·		
	7		receivable (attach schedule)			
	_		btful accounts ►			
its	8	Inventories for sale or us	e			
Assets			eferred charges			
Ä			e government obligations (attach schedule), .			
			stock (attach schedule)			
	11 C	Investments - land, building:				
		(attach schedule)	ation			
		investments - mortgage	ioans			
	13	Investments - other (atta	ach schedule)			
	14		ation		÷	
	15	Other assets (describe	▶) [
	16	Total assets (to be	completed by all filers - see the			
		instructions Also, see p	age 1, item I)	17,492.	7,588.	7,588.
	17		ccrued expenses		•	
	18					,
Š						
itie			ors, trustees, and other disqualified persons			
Liabilities			otes payable (attach schedule)			
Ë	22		⇒ ►)	·		
		Cirici nabilities (accone	, , , , , , , , , , , , , , , , , , ,			
	23	Total liabilities (add line	es 17 through 22)		0.	
			low SFAS 117, check here ▶			
80		and complete lines	24 through 26 and lines 30 and 31.			
Fund Balances	24	Unrestricted				
ja	25					
ã	26	Permanently restricted.				
밀			not follow SFAS 117,			
Ŧ		check here and com	plete lines 27 through 31. ▶ 🔀			
ō	27	Capital stock, trust prine	cipal, or current funds		·	
ets	28	Paid-in or capital surplus, or	r land, bldg , and equipment fund	,		
Net Assets	29	Retained earnings, accumi	ulated income, endowment, or other funds	17,492.	7,588.	
t A	30	Total net assets or	fund balances (see page 17 of the			
Se		instructions)		17,492.	7,588.	
	31	Total liabilities and ne	t assets/fund balances (see page 17			
		of the instructions)		17,492.	7,588.	,
P	art II		anges in Net Assets or Fund I	Balances		
			alances at beginning of year - Part		must agree with	
			d on prior year's return)			17,492.
2	Ente	r amount from Part I.	line 27a		2	-9,904.
3	Othe	r increases not includ	ed in line 2 (itemize) ▶		3	1
						7,588.
		eases not included in			· · · · · · · · · · · · · · ·	
			alances at end of year (line 4 minus l	ne 5) - Part II. column (b)		7,588.
Ť	· ota	st accord of fully be	and the state of your time + minus	0/ 1 art ii, 00idiiiii (b)	, 00 1 1 1 1 1 1 <u>0</u>	Form 990-PF (2010)

Part IV Capital Gains and Losses for Tax on Investment Income

		d describe the kind(s) of property sold (= -	acquired P-Purchase	acquired	(d) Date sold (mo, day, yr.)
1.		rick warehouse, or common stock, 200	sns MLC Co)	D-Donation	(mo , day, yr.)	, , , , , ,
<u>1a</u>					-	
<u>b</u>						
C					 -	
<u>d</u>						
e		(A Description allowed	(g) Cost or other basis		(h) Cara as (la	>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
b				-		
<u>_c</u>				-	· · · · =	
<u>d</u>			· · · · · · · · · · · · · · · · · · ·			
е	· · · · · · · · · · · · · · · · · · ·	ahawaa san in aaliwaa (h) aad awaa	d by the ferrodetion on 10/01/60			
	Complete only for assets	showing gain in column (h) and owne			Gains (Col (h) g (k), but not less	
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	001.	Losses (from co	
a						
b				ļ		
<u> </u>						
d					_	
е		- 1	gain, also enter in Part I, line 7	Т-		
3	If gain, also enter in Part I,	In or (loss) as defined in sections 12 line 8, column (c) (see pages 13 line 8,	and 17 of the instructions).	3		
	art V Qualification l	Inder Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
Wa		·	outable amount of any year in the b	ase perio	d?	Yes X No
1			, see page 18 of the instructions be	efore mak	ung any entries	
÷	(a)	(b)	(c)	l line	(d)	
С	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
_ <u> </u>	2009	61,550.	10,037.		(601 (5) 4111464 5)	6.132310
	2008	48,375.	13,197.			3.665606
	2007	49,142.	24,372.			2.016330
	2006	36,915.	9,330.			3.956592
	2005	29,318.	7,933.		-	3.695702
						-
2	Total of line 1, column (d)			2	1	9.466540
3	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
	number of years the found	dation has been in existence if less	s than 5 years	3		3.893308
4	Enter the net value of nor	charitable-use assets for 2010 fro	m Part X, line 5	4		8,388.
5	Multiply line 4 by line 3			5		32,657.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		0.
7	Add lines 5 and 6			7		32,657.
8				8	_	57,231.
	If line 8 is equal to or gre Part VI instructions on pag		n Part VI, line 1b, and complete t	hat part	using a 1% ta	x rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0.
	here ► X and enter 1% of Part I, line 27b			,
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2	0.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4	0.		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments			
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	basing without the state of the			2
7	Total credits and payments Add lines 6a through 6d			<u>2.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2011 estimated tax			2.
	t VII-A Statements Regarding Activities Refunded ▶ 11			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Vaa	l Na
ıa	participate or intervene in any political campaign?	1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	ı a_		
-	of the instructions for definition)?	1 b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	15		
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1 c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\)\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ►\$			
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			
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?	4 b		
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		v	-
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	_7_	<u> </u>	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) MO,			
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		х	
9	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b		 -
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	ا ۾		x
10	27)? If "Yes," complete Part XIV	9	-	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х
	names and addresses	10	n DE	

Par	t VII-A	Statements Regarding Activities (continued)			
11	At any tu	me during the year, did the foundation, directly or indirectly, own a controlled entity within the	ŀ		
	meaning	of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the f	oundation acquire a direct or indirect interest in any applicable insurance contract before	İ		
	August 1	7, 2008?	12		X
13	Did the f	oundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website	address • N/A			
14	The book	s are in care of ROBERT B HARDCASTLE Telephone no - 636-532	2-048	34	
	Located	ss are in care of ►ROBERT B HARDCASTLE Telephone no ► 636-532 at ►16100 CHESTERFIELD PARKWAY W #150 CHESTERFIELD, MO ZIP+4 ► 63017	_ _		
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
		r the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2010, did the foundation have an interest in or a signature or other authority	,	Yes	
	over a ba	nk, secunities, or other financial account in a foreign country?	16	L	X
	See pag	e 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter			
		e of the foreign country			
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1 a	During th	e year did the foundation (either directly or indirectly)			
	(1) Enga	ige in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borro	ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	dısqı	ralified person?			
	(3) Furn	ish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Trans	sfer any income or assets to a disqualified person (or make any of either available for	Ì		
	the b	enefit or use of a disqualified person)?Yes X No			
	(6) Agre	e to pay money or property to a government official? (Exception. Check "No" if the			
	found	dation agreed to make a grant to or to employ the official for a period after			
	term	nation of government service, if terminating within 90 days.)			
b	If any ar	nswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 5	3 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1 b		
	Organiza	tions relying on a current notice regarding disaster assistance check here			
c		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		-	.,
		corrected before the first day of the tax year beginning in 2010?	1 c		X
2		n failure to distribute income (section 4942) (does not apply for years the foundation was a private		` `	
	operating	foundation defined in section 4942(j)(3) or 4942(j)(5))			
а		d of tax year 2010, did the foundation have any undistributed income (lines 6d and			
		XIII) for tax year(s) beginning before 2010?			
		ist the years			
b		e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	٠.		
	•	isted, answer "No" and attach statement - see page 22 of the instructions)	2b		
С		visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_					
За		coundation hold more than a 2% direct or indirect interest in any business enterprise ne during the year? Yes X No			
Þ		did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
	-	ed persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
		nioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the	25		
		on had excess business holdings in 2010.)	3b 4a	\vdash	X
		coundation invest during the year any amount in a manner that would jeopardize its charitable purposes? foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	a		_
O		e purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4 b		х
		- paragraphical real mer poem remerce mem perparer perelle internet day or the tax real pedicities in 2010, i.e.			

Pai	rt VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requi	i <mark>red</mark> (continued)		
5 a	During the year did the foundation pay or incur any amou	int to.			_		
	(1) Carry on propaganda, or otherwise attempt to influen	nce legislation (section	4945(e))?	Yes X	No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,						
	directly or indirectly, any voter registration drive?			Yes X	No		
	(3) Provide a grant to an individual for travel, study, or ot	her sımılar purposes?		Yes X	No		
	(4) Provide a grant to an organization other than a chart	table, etc., organizatio	n described in		_		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	(see page 22 of the ins	structions)	. Yes X	No		
	(5) Provide for any purpose other than religious, charital	ble, scientific, literary,	or educational		_		
	purposes, or for the prevention of cruelty to children of	or animals?		Yes X	No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	actions fail to qualify	under the exceptions	described in			
	Regulations section 53 4945 or in a current notice regard		•		5b		
	Organizations relying on a current notice regarding disast	ter assistance check h	ere	▶ 🗌			
С	If the answer is "Yes" to question 5a(4), does the foundation						
	because it maintained expenditure responsibility for the g	•		Yes	No		
	If "Yes," attach the statement required by Regulations sec			. — —			
6a	Did the foundation, during the year, receive any funds, of	• •	pay premiums				
	on a personal benefit contract?			Yes X	No		
b	Did the foundation, during the year, pay premiums, direct			17		x	
	If "Yes" to 6b, file Form 8870	··· , ·······		• • • • • • • • •			
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X	No		
b	If "Yes," did the foundation receive any proceeds or have	e any net income attrib	outable to the transactio	. — —			
Par	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid En	nployees,	· ·	
1	and Contractors List all officers, directors, trustees, foundation m	anagers and their	compensation (see	nage 22 of the i	netructions)		
•	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exper	ise account.	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plar and deferred compensa	າຣ ໄ`óthera	llowances	
AΤ	TACHMENT 5		0.		0.	0	
		-					
		I I					
2	Compensation of five highest-paid employees (ot	her than those inc	luded on line 1 - se	e page 23 of the	instructions).		
2	Compensation of five highest-paid employees (ot If none, enter "NONE."	<u> </u>	luded on line 1 - se				
	Compensation of five highest-paid employees (ot If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average	luded on line 1 - se	(d) Contributions t	o (e) Exper	ise account,	
	If none, enter "NONE."	<u> </u>		(d) Contributions to	o (e) Exper		
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE."	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	
(a	If none, enter "NONE.") Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions t employee benefit plans and deferred	o (e) Exper	ise account,	

Pai	t VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	rees,
3	Five h	ighest-paid independent contractors for professional services (see page 23 of the instructions). If no	one, enter "NONE."
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	IE .		
		· · · · · · · · · · · · · · · · · · ·	
Tota	ıl numbe	er of others receiving over \$50,000 for professional services	NONE
Pai	rt IX-A	Summary of Direct Charitable Activities	
		dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A		
_			
2			
-			
3 -			
-			
4			
٠-			
-			
Pai	rt IX-B	Summary of Program-Related Investments (see page 24 of the instructions)	
-		two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1_	N/A 		
-			

2 .			
-			
All	other pro	gram-related investments See page 24 of the instructions	
3	NONE		
-			
_			
Tota	N 4441	upes 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundations	-
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	8,516.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	8,516.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cultivant line O from line 1 d	3	8,516.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	128.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,388.
6	Minimum investment return. Enter 5% of line 5	6	419.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here and do not complete this property of the instructions.		,
1	Minimum investment return from Part X, line 6	1	419.
2a	Tax on investment income for 2010 from Part VI, line 5		
b		1	
С		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	419.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	419.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	419.
_	Qualifying Distributions (see page 25 of the instructions)		
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	57,231.
a b	Program related investments total from Part IV B	1b	0.
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	16	
2		2	0.
3	purposes Amounts set aside for specific charitable projects that satisfy the:	2	
о a		3a	0.
b	On the district the stand of the observation of a chief district.	3b	0.
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	57,231.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	7	37,231.
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	57,231.
Ü	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal		<u> </u>
	qualifies for the section 4940(e) reduction of tax in those years.	oulding wheth	Si the foundation

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				419.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only				
b	Total for prior years 20 08 ,20 07 ,20 06				
3	Excess distributions carryover, if any, to 2010:				
а	From 2005				
b					
C	From 2007 47, 925. From 2008 47, 715.				
d					
	From 2009 61,048.	000 050			
f	Total of lines 3a through e	222,058.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 57,231.				
а	Applied to 2009, but not more than line 2a		•		
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
А	Applied to 2010 distributable amount				419.
	Remaining amount distributed out of corpus	56,812.			
5	Excess distributions carryover applied to 2010	-			
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	278,870.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		:-		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
е	amount - see page 27 of the instructions Undistributed income for 2009. Subtract line				
	4a from line 2a. Taxable amount - see page				
	27 of the instructions				· · ·
f	Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be				
	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 page 27 of the				
	instructions)				
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the	20 000			
	instructions)	28,922.			
9	Excess distributions carryover to 2011.	249,948.			
	Subtract lines 7 and 8 from line 6a	243,340.			
	Analysis of line 9: Excess from 2006 36, 448.				
a b	Excess from 2006				
C	Excess from 2007				
d	61 049	1			
	Excess from 2010				

	Private Oper					NOT APPLICABL
1 a	If the foundation has					
	foundation, and the rulin					
b	Check box to indicate wh	ether the foundation is a	a private operating found		1 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-		410000	Prior 3 years	T	(e) Total
	justed net income from Part I or the minimum investment	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
	return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed .		:			
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "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 invest-					
	ment 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)					-
	port from an exempt organization					
	(4) Gross investment income.					
Ра	rt XV Supplementa at any time of	ary Information (C during the year - se	omplete this part e page 28 of the in	only if the found structions.)	ation had \$5,000	or more in assets
1	Information Regarding	•				
а	List any managers of before the close of any	tax year (but only if th	nave contributed mor ney have contributed i	e than 2% of the tota more than \$5,000). (S	al contributions receiv see section 507(d)(2).)	red by the foundation
	ROBERT HARI					
b	List any managers of ownership of a partner	the foundation who ship or other entity) o	own 10% or more o f which the foundation	f the stock of a corp n has a 10% or greater	oration (or an equally rinterest.	large portion of the
	N/A					
2	Information Regarding	•		•		
	Check here ► X if t unsolicited requests forganizations under ot	or funds. If the foun	dation makes gifts, ç	grants, etc. (see page	table organizations a e 28 of the instruction	and does not accept ons) to individuals or
а	The name, address, a	<u>-</u>			e addressed:	
b	The form in which app	lications should be sul	bmitted and informati	on and materials they	should include:	
	Any submission deading					
-	,			-		
d	Any restrictions or lifactors	mitations on awards	such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	<u>,</u>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution					
a Paid during the year								
,								
ATTACHMENT 6								
		I						
		,						
•								
		İ		İ				
		ļ						
•								
			-					
				,				
Total			> 3a	54,581.				
b Approved for future payment		i 						
b Approved for lature payment								
			i					
		.						
	1							
	1							
			L					
Total	<u> </u>	<u> </u>	3b	1				

Part XVI	Analysis of income-Produ	cing Activ	villes			
Enter gross	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	/ section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue.	Business code		Exclusion code		(See page 28 of the instructions)
· · · · · · · · · · · · · · · · · · ·						
	· · · · · · · · · · · · · · · · · · ·					
						
				-		
f			-	-		
_	and contracts from government agencies			<u> </u>		
	ship dues and assessments			14	9.	
	on savings and temporary cash investments			111		··· -
	ds and interest from securities					
	al income or (loss) from real estate.					
	-financed property					
	debt-financed property					
	Il income or (loss) from personal property				•	
	vestment income	1				
	loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					<u> </u>
	venue: a			_		
· · · · · · · · · · · · · · · · · · ·	_		ļ			· <u>-</u> .
e	I Add columns (b) (d) and (c)				9.	
	I. Add columns (b), (d), and (e)					'
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 29				13	
	B Relationship of Activities			vemnt Purn	0000	
Line No.	Explain below how each activit accomplishment of the foundati	ty for whic	h income is reported	ın column (e	e) of Part XVI-A contrib	
	instructions.)					
			·			··
					. _ .	
						<u>_</u>

	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · ·	
						

art XVII	140)	43-1844009	_	40
		Transfers To and Transactions and Relationships With No		ge 13
THE STATE OF THE S	Exempt Organizations	Transiers to and transactions and helationships with No	Jiichani	abic
Did the		engage in any of the following with any other organization described	Yes	No
	-	in section 501(c)(3) organizations) or in section 527, relating to political		
organiza	lions?			
Transfer	s from the reporting foundation to a n	noncharitable exempt organization of		
(1) Cash		<u> </u>	a(1)	<u>X</u>
(2) Othe	r assets	<u> </u>	a(2)	X
Other tra	insactions			••
		organization	1 1	<u>X</u>
		exempt organization		X
		sets		$\frac{X}{X}$
	-			$\frac{x}{X}$
				<u>X</u>
		or fundraising solicitations	1 1	$\frac{\lambda}{X}$
•	, ,	• • • • • • • • • • • • • • • • • • • •	1c	
		"Yes," complete the following schedule Column (b) should always show the schedule column (b) should always show the schedule column (b) should always show the schedule column (c) the schedule column (d) the schedule column		
		rvices given by the reporting foundation If the foundation received less the		
		ngement, show in column (d) the value of the goods, other assets, or set from the first transactions and sharing (d) Description of transfers, transactions, and sharing		
Line no	N/A	N/A	y arrangemen	
	H/ A	N/A		
				
				
			-	
		affiliated with, or related to, one or more tax-exempt organizations	7 Г	
describe	d in section 501(c) of the Code (other t	affiliated with, or related to, one or more tax-exempt organizations than section 501(c)(3)) or in section 527?	Yes X	No
describe	d in section 501(c) of the Code (other to complete the following schedule	than section 501(c)(3)) or in section 527?		No
describe	d in section 501(c) of the Code (other t			No
describe	d in section 501(c) of the Code (other to complete the following schedule	than section 501(c)(3)) or in section 527?		No
describe	d in section 501(c) of the Code (other to complete the following schedule	than section 501(c)(3)) or in section 527?		No
describe	d in section 501(c) of the Code (other to complete the following schedule	than section 501(c)(3)) or in section 527?		No
describe	d in section 501(c) of the Code (other to complete the following schedule	than section 501(c)(3)) or in section 527?		No
describe	d in section 501(c) of the Code (other to complete the following schedule (a) Name of organization	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship	ip	
describe	d in section 501(c) of the Code (other to complete the following schedule (a) Name of organization	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship	ip	
describe If "Yes," Under	d in section 501(c) of the Code (other to complete the following schedule (a) Name of organization	than section 501(c)(3)) or in section 527?	ip	
describe If "Yes," Under belief	d in section 501(c) of the Code (other tomplete the following schedule (a) Name of organization penalties of perjury, I declare that I have it is true, correct, and complete December.	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including acompanying schedules and statements, and to the best of a of preparer (other than taxed year of fiduciary) is based on all information of which preparer has an	ip	
describe b If "Yes," Under belief	d in section 501(c) of the Code (other incomplete the following schedule (a) Name of organization penalties of perjury, I declare that I have it is rue, correct, and omplete Declaration	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including acompanying schedules and statements, and to the best of a of preparer (other than taxed year of fiduciary) is based on all information of which preparer has an Date	my knowledge	
describe b If "Yes," Under belief	d in section 501(c) of the Code (other tomplete the following schedule (a) Name of organization penalties of perjury, I declare that I have it is true, correct, and complete December.	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an other preparer of the p	my knowledge	
describe If "Yes," Under belief	d in section 501(c) of the Code (other incomplete the following schedule (a) Name of organization penalties of perjury, I declare that I have it is rue, correct, and omplete Declaration	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an examined. Date Preparer's signature Date Preparer's signature Date Preparer's signature Date	my knowledge	ge and
describe of If "Yes," Under belief ore Sid	d in section 501(c) of the Code (other tomplete the following schedule (a) Name of organization penalties of perjury, disclare that I have it is frue, course, and complete Declaration printing of fincer or trustee Print/Type preparer's name	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than tax dayer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements are companying schedules.	my knowledge /	ge and
describe If "Yes," Under belief id eparer	d in section 501(c) of the Code (other tomplete the following schedule (a) Name of organization penalties of perjury, I declare that I have it is frue, course, and complete Declaration gnature of friider or trustee Print/Type preparer's name Firm's name RUBINBROWN	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements.	my knowledge /	
describe If "Yes," Under belief re Sid	d in section 501(c) of the Code (other tomplete the following schedule (a) Name of organization penalties of perjury, declare that I have it is frue, council, and complete Declaration gnature of fficer or trustee Print/Type preparer's name Firm's name RUBINBROWN Firm's address ONE NORTH B	than section 501(c)(3)) or in section 527? (b) Type of organization (c) Description of relationship examined this return, including accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a of preparer (other than taxabyer of fiduciary) is based on all information of which preparer has an accompanying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements, and to the best of a companying schedules and statements.	my knowledge / IN P 2032	ge and

Schedule B.

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

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

Name of the organization **Employer identification number** ROBERT HARDCASTLE CHARITABLE FOUNDATION, INC 43-1844009 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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 X 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 331/3% 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. 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. 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, charitable, etc., contributions of \$5,000 or more 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). 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)

Name of or	ganization ROBERT HARDCASTLE CHARITABLE FOUNDAT	TION, INC	Employer identification number 43-1844009
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	ROBERT HARDCASTLE 398 LARIMORE VALLEY DRIVE ST. LOUIS, MO 63005	\$50,000.	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)
(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
		\$	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.)
(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)

ATTACHMENT 1

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

ROBERT HARDCASTLE CHARITABLE FOUNDATION, INC

EXPENSES PER BOOKS REVENUE AND

INVESTMENT INCOME

<u>ი</u>

DESCRIPTION

LINDELL BANK

TOTAL

<u>ი</u>

9

PAGE 16

ATTACHMENT 1

1481-803

ATTACHMENT 2

1481-803

FORM 990PF, PART I - ACCOUNTING FEES

ADJUSTED NET CHARITABLE INCOME PURPOSES	2,650.	0. 2.650
NET INVESTMENT INCOME	2,650.	2.650.
REVENUE AND EXPENSES PER BOOKS	5,300.	5,300.
		S.TATOT
DESCRIPTION	TAX PREPARATION FEES	

04004T 1315

43-1844009

ATTACHMENT 3

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

FEDERAL WITHHOLDING FROM 1099

2.

TOTALS

PAGE 19

ATTACHMENT 4

- OTHER EXPENSES FORM 990PF, PART I

EXPENSES PER BOOKS REVENUE AND

INVESTMENT

INCOME

TOTALS

DESCRIPTION BANK SERVICE FEES

30.

30.

30.

ATTACHMENT 5

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

ATTACHMENT 5

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROBERT HARDCASTLE 398 LARIMORE VALLEY DRIVE CHESTERFIELD, MO 63005	TRUSTEE 2.00	.0	.0	.0
	GRAND TOTALS	0	0.	0

ATTACHMENT 6

1481-803

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS AISH HATORAH 457 NORTH WOODS MILL ROAD CHESTERFIELD, MO 63017 AMATEUR BASEBALL HALL OF FAME	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT NONE	PURPOSE OF GRANT OR CONTRIBUTION RELIGIOUS GENERAL	, AMOUNT 15,200.
ST. LOUIS, MO AUGUDAS ISRAEL 8202 DELMAR BOULEVARD ST. LOUIS, MO 63124 BAIS YOAC	NONE NONE	RELIGIOUS RELIGIOUS	130.
ST. LOUIS, MO BRITH SHALOM 1107 EAST LINDEN AVE ST. LOUIS, MO 63117 BACKSTOPPERS 10411 CLAYTON RD, STE A5	NONE NONE	RELIGIOUS GENERAL	25.
ST. LOUIS, MO 63131			

ATTACHMENT 6 (CONT'D).

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	250.	200.	1,000.	250.	1,000.	1,300.
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL	GENERAL	RELIGIOUS	RELIGIOUS	GENERAL	RELIGIOUS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE .	NONE	NONE
RECIPIENT NAME AND ADDRESS	BASEBALL HALL OF FAME 25 MAIN STREET COOPERSTOWN, NY 13326	BUDDY FUND 1846 CRAIG PARK CT ST. LOUIS, MO 63146	JCCA 2 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	JEWISH FEDERATION 12 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	JUST BECAUSE ST. LOUIS, MO	KNESES HATORAH 1722 53RD STREET NEW YORK, NY 11204

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RELIGIOUS

GENERAL

NONE

4245 N KINGSHIGHWAY BLVD MATTHEW DICKEY BOYS CLUB

ST. LOUIS, MO 63115

NONE

1,100.

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

8200 DELMAR BOULEVARD

KOLLEL

ST. LOUIS, MO 63124

JEWISH STUDIES ST. LOUIS, MO

NONE

RELIGIOUS

ATTACHMENT 6 (CONT'D),

50.

100.

500.

GENERAL

2,500.

GENERAL

NONE

MISSOURI SPORTS HALL OF FAME 3861 EAST STAN MUSIAL DRIVE NONE

MISSOURI TORAH INSTITUTE

ST. LOUIS, MO 63017 14550 LADUE ROAD

SPRINGFIELD, MO 65809

NONE

317 OZARK TRAIL DR, SUITE 140-160

ST. LOUIS, MO 63011

MIDWEST PERFORMING ARTS

200.

RELIGIOUS

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ATTACHMENT 6

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ATTACHMENT 6 (CONT'D).

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NMSS YAVITZ PHELP TEAM ST. LOUIS, MO	NONE	RELIGIOUS	500.
NEV JERUSALEM ST. LOUIS, MO	NONE	RELIGIOUS	750.
NATIONAL FOOTBALL FOUNDATION 433 E LAS COLINAS BLVD, STE 1130 IRVING, TX 75039	NONE	GENERAL	100.
NUSACHI HARI 8630 OLIVE BOULEVARD ST LOUIS, MO 63132	NONE	RELIGIOUS	2, 936.
RABBI'S FUND ST. LOUIS, MO	NONE	RELIGIOUS	3,950.
ROCKWOOD SWIM CLUB CARBONDALE, IL	NONE	GENERAL	100.

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ATTACHMENT 6 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

TRIBUTION	3, 300.	70.	35.	7,000.	. 500.	3, 620.
PURPOSE OF GRANT OR CONTRIBUTION	EDUCATIONAL	GENERAL	EDUCATIONAL	RELIGIOUS	GENERAL	GENERAL
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE	NONE
RECIPIENT NAME AND ADDRESS	SIU FOUNDATION 1235 DOUGLAS DRIVE CARBONDALE, IL 62901	SLOCA PO BOX 270067 ST. LOUIS, MO 63127	ST. LOUIS ART GUILD 2 OAK KNOLL PARK ST. LOUIS, MO 63105	TPHERIS ISRAEL 14550 LADUE ROAD ST. LOUIS, MO 63017	ST. LOUIS SOCCER CLUB	123 CLUB ST. LOUIS, MO

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ATTACHMENT 6 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
STOCKHOLM POST AMERICAN LEGION ST. LOUIS, MO	NONE	GENERAL	50.
TURKEY HILL GRANGE 1375 EAST STATE ROUIE 15 BELLEVILLE, IL 62220	NONE	GENERAL	35.
VARIETY CLUB 2200 WEST PORT PLAZA DR #2 ST. LOUIS, MO 63146	NONE	GENERAL	500.
YOUTH IN NEED 1815 BOONE'S LICK ROAD ST. CHARLES, MO 63301	NONE	GENERAL	300.
SH'OR YOS INSTITUTE ST. LOUIS, MO	NONE	RELIGOUS	400.
SECOND WIND WALK 2169 WILLOW RIDGE LANE CHESTERFIELD, MO 63017	NONE	GENERAL	25.

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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ATTACHMENT 6 (CONT'D).	•	AMOUNT	100.	100.	100.	500.	3, 425.
		PURPOSE OF GRANT OR CONTRIBUTION	GENERAL	GENERAL	GENERAL	EDUCATIONAL .	EDUCATIONAL
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE
		RECIPIENT NAME AND ADDRESS	SALUKI VARSITY CLUB CARBONDALE, MO	ONE FAMILY FUND PO BOX 822732 PHILADELPHIA, PA 19182	OASIS FOOD PANTRY 1814 BOONE'S LICK ROAD ST. CHARLES, MO 63301	CAMPUS CRUSADE FOR CHESTERFIELD ST. LOUIS, MO	CHESTERFIELD ARTS 444 CHESTERFIELD CTR #130 CHESTERFIELD, MO 63017

50.

GENERAL

NONE

GATEWAY FORD CAR CLUB ST. LOUIS, MO

ATTACHMENT 6 (CONT'D)

•	AMOUNT	200.	100.	500.	250.	130.
	PURPOSE OF GRANT OR CONTRIBUTION	GENERAL	RELIGIOUS	EDUCATIONAL	GENERAL	RELIGIOUS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE	NONE	NONE
	RECIPIENT NAME AND ADDRESS	GILBERT & COOK ST. LOUIS, MO	HARVESTER CHRISTIAN CHURCH 2950 KINGS CROSSING ST. CHARLES, MO 63303	HEC HIGHER EDUCATION ST. LOUIS, MO	HEC TV ST. LOUIS, MO	HOPE CHRISTIAN CHURCH ST. LOUIS, MO

54,581. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 6

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Lindell Bank P.O. Box 211 St. Louis MO 63166-0211 1-314-645-7700 Payer's Fed I.D. No. 43-0379825

R HARDCASTLE CHARTBL FOUND INC 398 LARIMORE VALLEY DR CHESTERFIELD MO 63005-6226

OMB No. 1545-0112 Interest Income Form 1099-INT Copy B For Recipient For year 2010

Recipient's Tax I.D. No. XXX-XX-7455

Account Information	Income	XXX-XX-7455 Interest on U.S. Bonds & Treas	Withheld	
9100203933 D	9.15	**	2.36	
Day 1 Interest income			9.1	· =
Box 1 Interest income Box 2 Early withdrawal penalty.				. ⊃
Box 3 Interest on U.S. Savings	Bonds			
and Treasury Obligations				
***BOX 4 FEDERAL INCOME TAX WIT				6
Box 5 Investment expenses				
Box 6 Foreign tax paid				
Box 7 Foreign country or U.S. I				
Box 8 Tax-exempt interest				
Box 9 Specified private activit	cy bond int	terest		
Tax-exempt bond CUSIP NO				

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

(KEEP FOR YOUR RECORDS.)

Form **8868**

(Rev January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Inte <u>rnal Revenu</u>	e Service ► File a	separate a	pplication for each return.				
If you are	filing for an Automatic 3-Month Extension,	complete o	only Part I and check this box		▶ X		
-	filing for an Additional (Not Automatic) 3-M						
Do not comp	p <i>lete Part II unless</i> you have already been gra	nted an au	tomatic 3-month extension on a prev	viously filed Form	8868.		
a corporatio 8868 to rec	iling (e-file). You can electronically file Form in required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Persona	nal (not au forms liste	tomatic) 3-month extension of time. ed in Part I or Part II with the excep	You can electro otion of Form 88	nically file Form 70, Information		
	For more details on the electronic filing of the						
Part Au	tomatic 3-Month Extension of Time. Or	nly submit	original (no copies needed)	,			
A corporatio	on required to file Form 990-T and requesting	an autom	atic 6-month extension - check this b	ox and complete			
Part I only .				<i></i>	▶ 🔲		
All other col	rporations (including 1120-C filers), partnersh	nips, REMIC	Cs, and trusts must use Form 7004 to	request an extens	sion of time		
	ne tax returns		······································				
Type or							
print	ROBERT HARDCASTLE CHARITABLE FOUNDATION, INC				43-1844009		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions						
due date for iling your	16100 CHESTERFIELD PARKWAY W		Idraes, see instructions				
return See nstructions	CHESTERFIELD, MO 63017	a loreigh ad	acress, see instructions				
TISTI delloris	CRESTERFIELD, MO 03017						
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for each return)		04		
Application		Return	Application		Return		
ls For		Code	ls For		Code		
Form 990		01	Form 990-T (corporation)		07		
<u>Form 990-B</u>	L	02	Form 1041-A		80		
<u>Form 990-E.</u>		03	Form 4720		09		
<u>Form 990-Pl</u>		04	Form 5227		10		
	(sec 401(a) or 408(a) trust)	05	Form 6069	 	11		
<u>Form 990-T</u>	(trust other than above)	06	Form 8870		12		
	s are in the care of ► ROBERT B HARDO		FAX No ▶				
•	anization does not have an office or place of				▶ □		
	or a Group Return, enter the organization's fo				If this is		
	e group, check this box ▶ 🔲 . I			an	d attach		
	e names and EINs of all members the extens						
until	est an automatic 3-month (6 months for a cor 08/15 , 20 11 , to file the organization's return for		equired to file Form 990-T) extension ganization return for the organization		he extension is		
$\blacktriangleright X$	calendar year 20 10 or						
▶ 🔲	tax year beginning	, 20	, and ending	, 20			
2 If the ta	ax year entered in line 1 is for less than 12 m Change in accounting period			Final return	-		
3a If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720), or 6069, enter the tentative tax.	less anv			
nonref	3a \$	0.					
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
estimated tax payments made Include any prior year overpayment allowed as a credit 3b \$							
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS							
(Electr	3c \$	0.					
	you are going to make an electronic fund v	withdrawal	with this Form 8868, see Form 8-	453-EO and For	m 8879-EO for		
payment ins							
For Paperwo	rk Reduction Act Notice, see Instructions.		1	Form 8	868 (Rev 1-2011)		