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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

2010

. !	ntem	al He	venue Service	Note. The loundation	JII IIIay U	e able to use a copy of this	return to satisfy state repu	iting requirements	
Ī	010	ale	ndar year 2010, or tax y	ear beginning			, and ending		
- (3 C	hecl	k all that apply	Initial return		Initial return of a fe	ormer public charity	Final return	1
				Amended return		Address chan	ge 🔲	Name change	
	Nar	ne o	f foundation					A Employer identification	n number
			THE ARMS	TRONG-CLAF	K F	OUNDATION		68-0554826	j
ı	Nun	nber a	and street (or PO box numb		to street a	eddress)	Room/suite	B Telephone number	
<u>.</u>			P.O. BOX	1973				575-625-22	22
	City	ort	own, state, and ZIP cod			0.01	CINIAI	C If exemption application is p	pending, check here
- 1			ROSWELL,				GINAL	D 1. Foreign organization	s, check here
୍ଟେ । ୧୬୧	1 C	hecl	type of organization	X Section 501(c) <u>(3) e</u> xe	empt private foundation		Foreign organizations me check here and attach or	eeting the 85% test, pomputation
	L	Se	ection 4947(a)(1) nonex	empt charitable trust		Other taxable private found	atio <u>n</u>	E If private foundation sta	tus was terminated
	Fa	ır m	arket value of all assets	atend of year JA	ccountin	g method X Cash	Accrual	under section 507(b)(1	
	(fr	om.	Part II, col. (c), line 16			ner (specify)		F If the foundation is in a	60-month termination
	▶	\$				nn (d) must be on cash	basis.)	under section 507(b)(1	
2	Pa	rt l	Analysis of Revenue (The total of amounts in onecessarily equal the am	and Expenses	av not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
Z					_,	expenses per books	Income	income	(cash basis only)
SCANNED	1	1	Contributions, gifts, gi	ants, etc , received	ļ	109,000.		N/A	
Ã,		2		lation is not required to attach S	ich B		<u> </u>		<u></u>
		3	Interest on savings and tel cash investments	mporary	1	241.	241.		STATEMENT 1
		4	Dividends and interest	from securities	ļ	14,743.	14,348.		STATEMENT 2
		5a	Gross rents						
		b	Net rental income or (loss)				*** ****************************	·	
	<u>o</u>	6a	Net gain or (loss) from sale			34,621.			
	립	b	4330ta 011 IIII0 04	255,58	37.	j	0.1.00		
	Revenue	7	Capital gain net income (tr		D		34,621.		
	-	8	Net short-term capital	gain	٠ ب		., .,		
		9	Income modifications	NOV 01 2011		\$			ļ
		10a	Gross sales less returns and allowances	NOV 21 501			******************************		<u> </u>
			Less Cost of goods sold			**			
	ŀ		Gross profit or (loss)	ogden, u		0 000	0 000		COLD WITH CASE
	į	11	Other income			8,828. 167,433.	8,828. 58,038.		STATEMENT 3
-	-	12	Total Add lines 1 thro			167,433.	36,036.		0.
		13	Compensation of officers,		-	0.	· · · · · · · · · · · · · · · · · · ·		0.
		14	Other employee salarie	•	-				
	န္မ	15	Pension plans, employ	ee benefits	-				
	Š		Legal fees Accounting fees	STMT	4	482.	0.		0.
	×		Other professional fee		5	1,600.	0.		0.
	ē	17	Interest	, 01111	J h	1,000.	0.		- 0.
	١	18	Taxes	STMT	6	522.	171.		0.
	Operating and Administrative Expenses	19	Depreciation and deple		Ť				
	를	20	Occupancy	, cion	}				
	힣	21	Travel, conferences, ar	ad meetings	1	2,793.	2,793.		0.
	힡	22	Printing and publication	=	<u> </u>	27.730	27.300		
	e G	23	Other expenses		7	4,863.	3,653.		0.
	녍	24	Total operating and a		Ì				
	ě		expenses. Add lines 1			10,260.	6,617.		0.
	ōΙ	25	Contributions, gifts, gr	•	Ī	30,000.	•		30,000.
			Total expenses and di	•	Ī				
			Add lines 24 and 25			40,260.	6,617.		30,000.
_		27	Subtract line 26 from I	ine 12		· · · · · · · · · · · · · · · · · · ·			
	Ì		Excess of revenue over exp		ts	127,173.			
			Net investment incom				51,421.		· · · · · · · · · · · · · · · · · · ·
-		C	Adjusted net income (N/A	
7	2350)1		Deduction Act Notice		- 14			5 000 DE (0010)

	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	Enc	End of year			
	an	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing						
	2	Savings and temporary cash investments	62,921.	44,928	. 44,928.			
	3	Accounts receivable						
		Less allowance for doubtful accounts]					
	4	Pledges receivable ►						
		Less allowance for doubtful accounts	1					
	5	Grants receivable		<u>-</u>				
	6	Receivables due from officers, directors, trustees, and other						
	ľ	disqualified persons						
	7	Other notes and loans receivable						
	'	Less allowance for doubtful accounts ▶	[
s	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred charges						
As	_	Investments - U S and state government obligations						
	l	Investments - corporate stock STMT 9	563,369.	715,921	. 809,789.			
	ı	Investments - corporate bonds	0007000		1			
	11							
	''	Less accumulated depreciation	1					
	12	Investments - mortgage loans						
	13	Investments - other STMT 10	40,248.	33,999	33,999.			
	14	Land, buildings, and equipment basis						
	'*	Less. accumulated depreciation	1		1			
	15	Other assets (describe						
	15	Other assets (nescribe						
	16	Total reports (to be completed by all filers)	666,538.	794,848	888,716.			
_	17	Total assets (to be completed by all filers) Accounts payable and accrued expenses	000/3301	,,,,,,,,				
	18	Grants payable			-			
	19	Deferred revenue			-			
Liabilities					\dashv			
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable	-		-			
Ë	21				7			
	22	Other habilities (describe			7			
	23	Total liabilities (add lines 17 through 22)	0.	0				
_	20	Foundations that follow SFAS 117, check here			7			
		and complete lines 24 through 26 and lines 30 and 31.						
es	24	Unrestricted .						
auc	25	Temporarily restricted			7			
Baj	26	Permanently restricted			7			
2		Foundations that do not follow SFAS 117, check here			٦			
Ī		and complete lines 27 through 31.]					
ō	27	Capital stock, trust principal, or current funds	0.	0	· .			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0	· .			
Net Assets or Fund Balance	29	Retained earnings, accumulated income, endowment, or other funds	666,538.	794,848				
ē	30	Total net assets or fund balances	666,538.	794,848				
2								
	31	Total liabilities and net assets/fund balances	666,538.	794,848	i •			
P		III Analysis of Changes in Net Assets or Fund E						
_		I net assets or fund balances at beginning of year - Part II, column (a), line	30					
1		• • • • • • • • • • • • • • • • • • • •	, JU		666,538.			
•	•	st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		<u> </u>	$\frac{1}{2}$ $\frac{000,330}{127,173}$.			
		r amount from Part I, line 27a r increases not included in line 2 (itemize)	SEE SO	-	$\frac{2}{3}$ $\frac{127,173}{1,137}$.			
		lines 1, 2, and 3	JEH DI.		794,848.			
		eases not included in line 2 (itemize)			5 0.			
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b) line 30		794,848.			
<u>6</u>	TULA	i net assets of fund palances at end of year time 4 fillings line 3) - Falt II, C	oldinii (b), iiile 30		Form 000 PF (2010)			

023511 12-07-10

	Part IV Capital Gains a	and L	osses for Tax on In	vestmen	t Income						
	(a) List and descr 2-story brick wa	ribe the k rehouse	and(s) of property sold (e g , or common stock, 200 shs	, real estate, MLC Co)		(b) I	How acc - Purch - Dona	quired lase tion	(c) Date acqu (mo , day, y	ired r)	(d) Date sold (mo , day, yr)
	JPMORGAN CHASE						I	5 4	ARIOU	S	VARIOUS
	DB COMMODITY II			ND			I	5 4	ARIOU	S	VARIOUS
_	CAPITAL GAINS	DIVI	DENDS								
_(<u> </u>				_	
_	<u> </u>				- · · · · · · · · · · · · · · · · · · ·	<u> </u>				_	
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (or allowable) plus expense of sale						(h) Gain o (e) plus (f) i		(g)		
_8					220,96	6.					33,780.
_t								··· -			219.
_											622.
_0											
	Complete only for assets showin	0.0310.10	column (h) and owned by t	he foundation	on 12/31/69	-+		//\	Counc (Col. /I	h) aara	
_	Outplete only for assets showing	y yanı in	(i) Adjusted basis		cess of col (I)	-			Gains (Col. (I 'k), but not le		
	(i) F M V as of 12/31/69		as of 12/31/69	, , ,	col (j), if any				Losses (fror		
_				<u> </u>							33,780.
											219.
								•			622.
									<u>.</u> ,		
-					<u> </u>						
_			∫ If gain, also enter	ın Part I line	7	1					
2	Capital gain net income or (net cap	pital loss) [2				34,621.
3	Net short-term capital gain or (los	s) as def					1				
Ĭ	If gain, also enter in Part I, line 8,			J (J)] [
_	If (loss), enter -0- in Part I, line 8		•			لل	3			N/A	·
Ŀ	Part V Qualification U	nder :	Section 4940(e) for	Reduced	lax on Net	inv	estm	ent inco	ome		
(F	or optional use by domestic private	foundat	ions subject to the section 4	1940(a) tax on	net investment in	come)				
lf :	section 4940(d)(2) applies, leave th	us part b	lank								
											Yes X No
	as the foundation liable for the sect					rioda					Yes _ANo
1	"Yes," the foundation does not quali Enter the appropriate amount in e					es -					
÷	(a)	acii colo		Jotiona Dorono	making any ones	(c)			1		(d)
	Base periód years	(מו מי	(b) Adjusted qualifying dist	tributions	Net value of no			ise assets	/col		oùtion ratio vided by col. (c))
_	Calendar year (or tax year beginnin 2009	<u> </u>		4,585.			667	7,534.		(5) 0	.036830
_	2008		2	7,701.			602	2,191.	,		.046000
_	2007			9,666.				5,013.			.042201
_	2006			9,460.				915.			.051088
_	2005			0,627.				3,314.			.078336
2	Total of line 1, column (d)								2		.254455
3	Average distribution ratio for the 5	-year ba	se period - divide the total c	on line 2 by 5,	or by the number	of ye	ars				
	the foundation has been in existen	ice if les	s than 5 years						3	_	.050891
4	Enter the net value of noncharitab	le-use as	ssets for 2010 from Part X, I	ine 5					4		<u>797,753.</u>
5	Multiply line 4 by line 3								5		40,598.
6	Enter 1% of net investment incom	ie (1% o	f Part I, line 27b)						6		514.
											41 110
7	Add lines 5 and 6								7		41,112.
_											20 000
8	Enter qualifying distributions from								8	-	30,000.
	If line 8 is equal to or greater than See the Part VI instructions	line 7, c	heck the box in Part VI, line	1b, and comp	lete that part usin	ig a 1°	% tax ra	ite			
_	See the Fait VI IIISTIUCTIONS										orm 000 DE (2010)

	990-PF (2010) THE ARMSTRONG-CLARK FOUNDATION	-4.		0554			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 494		1948	- see II	nstru	ction	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on						
	Date of ruling or determination letter (attach copy of letter if necessary-see					1 0	20
þ	Domęstic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and	enter 1%	1			1,0	28.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, lin						^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -	0-)	2			1 0	0.
-	Add lines 1 and 2		3			1,0	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-	·0-)	4			1 0	0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			1,0	28.
	Credits/Payments						
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a		-				
	Exempt foreign organizations - tax withheld at source 6b		-				
	Tax paid with application for extension of time to file (Form 8868)		-[
	Backup withholding erroneously withheld 6d		-				^
	Total credits and payments Add lines 6a through 6d		7				11
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8			1 0	77.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			1,0	<u> 39.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				
	Enter the amount of line 10 to be Credited to 2011 estimated tax	Refunded ►	11	L			
	rt VII-A Statements Regarding Activities	 				V	NI-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it participate or interven	e in			Yes	
	any political campaign?				1a _		<u>X</u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see inst				1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	any materials publish	ed or				
	distributed by the foundation in connection with the activities.						v
	Did the foundation file Form 1120-POL for this year?				1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	0					
	(1) On the foundation ► \$ (2) On foundation managers ► \$	0	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	osed on foundation					
	managers ▶ \$				•		X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	articles of incorporation,	or				Х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	_	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N	/A	48		
	If "Yes," has it filed a tax return on Form 990-T for this year?		TA	, 41	4b 5		<u>x</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				· Ÿ		***************************************
_	If "Yes," attach the statement required by General Instruction T.						
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or But the language that the trial transfer of the square part and that no mondatory directions.	that conflict with the eta	o law				
	By state legislation that effectively amends the governing instrument so that no mandatory directions in the consequence matter and the governing instrument so that no mandatory directions	that commet with the Sta	e law		6	Х	
_	remain in the governing instrument?				7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				·····	- 21	
_	If "Yes," complete Part II, col. (c), and Part XV.						
Ва	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	NM	oral (or decigaate)		 -			
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General Coats and the A	erar (or designate)			Ωh	Х	
_	of each state as required by General Instruction G? If "No," attach explanation	\/3\ or 4042/\\E\ for an	andar		8b		
y	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j		enual		g	1	х
4.5	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete P		TMT	11	10	Х	
<u> 10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	names and addresses	1 7 1 7 Y	- + +	10	17	<u> </u>

.0111	1990-PF (2010) THE ARMSTRONG-CLARK FOUNDATION 68-0554	1020		ayou
_	art VII-A Statements Regarding Activities (continued)	,		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A	\ <u> </u>		
14	The books are in care of ► ROBERT G. ARMSTRONG Telephone no ► 575-62		222	
	Located at ► 500 N. MAIN, SUITE 200, ROSWELL, NM ZIP+4 ►88	3201		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		- / ¬ ▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	۱	Yes	No
	securities, or other financial account in a foreign country?	16	L	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
n.	the foreign country	<u> </u>		<u> </u>
Pŧ	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	 	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	140
18	a During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	"		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	10		X
2	Taxes on 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))			
ä	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2010? Yes X No			
	If "Yes," list the years \blacktriangleright			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		•	
	outonistic out methodistro /	2b		
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3				
	b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.) N/A	3b	1	1
A.	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		x
_		rm 99 0	PF	
				•

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		U	•
Form	990-PF	(2010	"

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	s, see instructions.)
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	712,914.
	Average of monthly cash balances	1b	63,027.
	Fair market value of all other assets	10	33,961.
d	Total (add lines 1a, b, and c)	1d	809,902.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	809,902.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,149.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	12,149. 797,753.
6	Minimum investment return. Enter 5% of line 5	6	39,888.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certair	
1	Minimum investment return from Part X, line 6	1	39,888.
	Tax on investment income for 2010 from Part VI, line 5		
 b	Income tax for 2010 (This does not include the tax from Part VI)		
	Add lines 2a and 2b	2c	1,028.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,028. 38,860.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	38,860.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	38,860.
	art XII Qualifying Distributions (see instructions)	1.	•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	30,000.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
_	Suitability test (prior IRS approval required)	3a	
	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	30,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		· · · · · · · · · · · · · · · · · · ·
•	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<u>0.</u> 30,000.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies	
	4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		**************************************		
line 7				38,860.
2 Undistributed income, if any, as of the end of 2010				· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2009 only			24,431.	
b Total for prior years			······································	
J returner prior years		0.		
3 Excess distributions carryover, if any, to 2010	 			······································
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ► \$ 30,000.				
a Applied to 2009, but not more than line 2a			24,431.	
b Applied to undistributed income of prior	in da'hada daaraa da aa a			ni ni ni ni ni ni ni ni nimin h
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·			., . ',' i' 'i , 'H .H:
(Election required - see instructions)	0.		^	
d Applied to 2010 distributable amount				5,569.
e Remaining amount distributed out of corpus	0.			3,003.
_ '	0.	······································		0.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	.			
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	,	
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		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
1 Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				33,291.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010	<u>,</u>			
				Form QQN_DF /2010\

THE ARMSTRONG-CLARK FOUNDATION

68-0554826

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
		j		
		1		
SEE STATEMENT 13				
Total			▶ 3a	30,000
b Approved for future payment	Τ΄		<u></u>	
2 / pproved for totale payment				
NONE				
		1		
]		
			!	
Total		<u> </u>	▶ 3b	0
23611 12-07-10		***	- <u>50</u>	orm 990-PF (2010

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	-	code	Amount	- Tanotion theorne
a	- -				
b	- -			 	· · ·
<u> </u>	1 1				
0					-
e	-				
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	241.	
4 Dividends and interest from securities			15	241. 14,743.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	8,828.	
8 Gain or (loss) from sales of assets other				24 621	
than inventory			14	34,621.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue					
a					
D	1 1		 	· · ·	
<u> </u>					
d			1		
12 Subtotal Add columns (b), (d), and (e)	_		5.	58,433.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	58,433.
(See worksheet in line 13 instructions to verify calculations)				
Part YVI. P. Polationship of Activities		anliahmant of	Evernt D	20000	

-	
	· · · · · · · · · · · · · · · · · · ·
023621 12-07-10	Form 990-PF (2010)

Form 990	-PF (2010) THE A	ARMSTRONG-CL	ARK FOUNI	DATION		68-05	54826	Pa	ige 13
Part)	Information R Exempt Organ	Regarding Transfer	rs To and Tra	insactions a	and Relation	ships With Nonc	haritable	•	
1 Did	the organization directly or ind		e following with any	other organizati	on described in se	ection 501(c) of		Yes	No
	Code (other than section 501(
	sfers from the reporting found								
(1)	Cash						1a(1)		Х
(2)	Other assets						1a(2)		Х
b Othe	er transactions								
(1)	Sales of assets to a noncharit	able exempt organization					1b(1)		X
(2)	Purchases of assets from a ne	oncharitable exempt organ	ization				1b(2)		Х
(3)	Rental of facilities, equipment	t, or other assets					1b(3)		X
(4)	Reimbursement arrangement	S					1b(4)		X
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or m	embership or fundraising :	solicitations				1b(6)		X
	ring of facilities, equipment, m	• .					10		X
	e answer to any of the above is ervices given by the reporting		-					ets,	
colu	mn (d) the value of the goods	, other assets, or services i	received						
(a) Line no	(b) Amount involved		charitable exempt o	rganization	(d) Descript	ion of transfers, transactions,	and shanng an	rangeme	ents
			N/A		<u> </u>				_
		<u> </u>	·						
	=								
					_				
									
	· 	1							
			<u>.</u>						
									
							-		
				-		· · · · · · · · · · · · · · · · · · ·			
0- 1-46	a facinadation discatili a cadina	ativ affiliated with as solute	d to		unations described				
	e foundation directly or indire- ection 501(c) of the Code (othe	•		ax-exempt organi	izations described		Yes	X] No
	es," complete the following sci		or in section 327.				L 163		
<u> </u>	(a) Name of or		(b) Type	of organization	T	(c) Description of relation	onship	_	
	N/A	<u>•</u>	(-,),	<u> </u>		, 	•		
-									
								•	
•	^					•			
	/)								
	Under penalties of penjury, I decla	are that have examined this ret	um, including accompa	anying schedules an	nd statements, and to	the best of my knowledge and	belief, it is tru	е, сопе	ct,
Sign	and complete Declaration of prep	odre (other than taxpayer or fidu	cary) is based on all in	nformation of which	preparer has any kno	owledge /			
Here	1/501/	KIN		11-15	5-//	sec/lea	<u> </u>		
	Signature of officer or ti			Date		Title			
	Print/Type preparer's r	name / Pre	parer's signature	//\.	Date	Check X If PT	IN		
			1	///	nd clay	self- employed			
Paid		A. OLVERA	THOROUGU IS	UMA	11/15/11				_
Prepa	rer Firm's name > RIT	TTER & COMPA	NY, LLC			Firm's EIN ►			

Form **990-PF** (2010)

575-622-8500

Use Only

Firm's address ▶ PO BOX 1836

ROSWELL, NM 88202-1836

Phone no

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

Department of the Trèasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

68-0554826 THE ARMSTRONG-CLARK FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. 🔟 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 during the year.

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

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).

Name of organization

Employer identification number

THE ARMSTRONG-CLARK FOUNDATION

68-0554826

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	ROBERT & SARA ARMSTRONG PO BOX 1973 ROSWELL, NM 882021973	\$109,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 Oncash Ocomplete Part II if there is a noncash contribution.)

of Part II

Name of organization

Employer identification number

THE ARMSTRONG-CLARK FOUNDATION

68-0554826

(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate)	Date received
art I		(see instructions)	
_			
		\$	
(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
art I	-	(see instructions)	
_			
		\$	
(a) No.	(b)	(c)	(d)
rom art i	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		\$	
(a) No.	(b)	(c)	(d)
rom art I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
rom art I	Description of noncash property given	(see instructions)	Date received
(a)		1-1	
No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
_ _			
ĺ			

Employer identification number

HE ARI	MSTRONG-CLARK FOUNDATIO	'n	68-0554826		
art III	Exclusively religious, charitable, etc., ind	lividual contributions to section columns (a) through (e) and the columns that the columns (a) through (e) and the columns contributions (c) contributions	on 501(c)(7), (8), or (10) organizations aggregating of following line entry. For organizations completing s of		
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_ -					
	Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee		
-					
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-					
		(e) Transfer of gif	-		
-	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
- - -		(e) Transfer of gif	t		
-	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee		
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_ -					
	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee		
-					

FORM 990-PF INTEREST ON SAVINGS AN	ND TEMPORARY CA	SH I	INVESTMENTS	STATEMENT	1		
SOURCE				AMOUNT			
DB COMMODITY INDEX TRACKING FUND			•		14.		
JPMORGAN CHASE BANK					15.		
PIONEER BANK STATES ROYALTY LIMITED PARTNERSHIP				209			
TOTAL TO FORM 990-PF, PART I, LINE		41.					
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECU	JRITIES	STATEMENT	2		
SOURCE	GROSS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)		
TOWODGAN GUAGE DANK	14 240			14.2	4.0		
JPMORGAN CHASE BANK JPMORGAN CHASE BANK	14,348. 622.		0. 622.	14,3	48. 0.		
JPMORGAN CHASE BANK	395.		0.	3	95.		
TOTAL TO FM 990-PF, PART I, LN 4	15,365.		622.	14,7	43.		
			<u> </u>				
FORM 990-PF 07	THER INCOME			STATEMENT	3 		
DESCRIPTION	(A) REVENUE PER BOOKS	5	(B) NET INVEST- MENT INCOME				
STATES ROYALTY LIMITED PARTNERSHIP DB COMMODITY INDEX TRACKING FUND		17.	8,417 411				
TOTAL TO FORM 990-PF, PART I, LINE	11 8,8	328.	8,828	•			

FORM 990-PF	ACCOUNTI	NG FEES	S	FATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	482.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	482.	0.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S	FATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DIRECTOR FEES	1,600.	0.		0.
TO FORM 990-PF, PG 1, LN 16C	1,600.	0.		0.
FORM 990-PF	TAX	ES	S	FATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX PAID FEDERAL INCOME TAX	171. 351.	171.		0.
TO FORM 990-PF, PG 1, LN 18	522.	171.		0.
FORM 990-PF	OTHER E	XPENSES	S	ratement 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS INVESTMENT EXPENSE MANAGEMENT FEES	10. 3,653. 1,200.	3,653. 0.		0.
TO FORM 990-PF, PG 1, LN 23	4,863.	3,653.		0.

FORM 990-PF OTHER INCREASES IN NET	ASSETS OR FU	ND BALANCES	STATEMENT	8
DESCRIPTION			AMOUNT	
DEPLETION IN EXCESS OF BASIS FROM STA	ATES ROYALTY	LP	1,1	37.
TOTAL TO FORM 990-PF, PART III, LINE	3		1,137.	
FORM 990-PF CORPO	ORATE STOCK		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	Т
STOCKS		715,921.	809,7	89.
TOTAL TO FORM 990-PF, PART II, LINE	10в	715,921.	809,7	89.
FORM 990-PF OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
STATES ROYALTY LIMITED PARTNERSHIP DB COMMODITY INDEX TRACKING FUND	FMV FMV	33,999.	33,9	99.
TOTAL TO FORM 990-PF, PART II, LINE	13	33,999.	33,9	99.

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 11

NAME OF CONTRIBUTOR

ADDRESS

ROBERT G. & SARA CLARK ARMSTRONG PO BOX 1973

ROSWELL, NM 882021973

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS

STATEMENT 12

NAME OF MANAGER

ROBERT G. ARMSTRONG SARA CLARK ARMSTRONG FORM 990-PF

STATEMENT 13

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHI		AMOUNT
ROSWELL INDEPENDENT SCHOOL DISTRICT 300 KENTUCKY ROSWELL, NM 88201	NONE 2010 DONATION	PUBLIC CHARITY	11,090.
	NONE 2010 DONATION	PUBLIC CHARITY	3,300.
DOWN SYNDROME FOUNDATION OF SENM PO BOX 4365 ROSWELL, NM 882024365	NONE 2010 DONATION	PUBLIC CHARITY	1,000.
WORKING MOTHER'S DAY NURSERY PO BOX 3038 ROSWELL, NM 882023038		PUBLIC CHARITY	1,250.
THE FIRST TEE 201 w. 19TH ST. ROSWELL, NM 88201	NONE 2010 DONATION	PUBLIC CHARITY	1,000.
SIDNEY GUTIERREZ MIDDLE SCHOOL #4 CHALLENGER ROSWELL, NM 88203		PUBLIC CHARITY	2,500.
WINGS FOR L.I.F.E. P.O. BOX 640 ROSWELL, NM 882020640	NONE 2010 DONATION	PUBLIC CHARITY	7,360.
CHOICES FOR INDEPENDENT LIVING 200 E. 4TH ST, SUITE 200 ROSWELL, NM 88201	NONE 2010 DONATION	PUBLIC CHARITY	1,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

THE ARMSTRONG-CLARK FOUNDATION 68-0554826

ASSISTANCE LEAGUE OF CHAVES NONE PUBLIC 1,500.
COUNTY 2010 DONATION CHARITY
PO BOX 1324 ROSWELL, NM
882021324

TOTAL TO FORM 990-PF, PART XV, LINE 3A 30,000.

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

mana man	1 110 4 505	a. a.c app	noution tor caonific tarri.			
• If you a	tre filing for an Automatic 3-Month Extension, comple	ete only Pa	art I and check this box		. •	X
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II (on page 2 of this	form)		
Do not co	omplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previously fi	led Fo	rm 8868.	
Electroni	c filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of time t	o file (6	6 months for a corp	oration
required t	o file Form 990-T), or an additional (not automatic) 3-mo	onth extens	sion of time. You can electronically file F	orm 8	868 to request an e	xtension
of time to	file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for Tran	sfers /	Associated With Ce	rtain
	Benefit Contracts, which must be sent to the IRS in pap					
	irs.gov/efile and click on e-file for Chanties & Nonprofits				-	
Part I	Automatic 3-Month Extension of Time	e. Only su	ibmit original (no copies needed).			
A corpora	tion required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and con	nplete		_
Part I only				•		
All other o	corporations (including 1120-C filers), partnerships, REM	fICs, and t	rusts must use Form 7004 to request ar	exten	sion of time	
to file ıncc	ome tax returns.		·			
Type or	Name of exempt organization			Emp	loyer identification	number
print						
	THE ARMSTRONG-CLARK FOUNDAY	TION		6	8-0554826	
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.			
filing your	P.O. BOX 1973		5 6			
return See instructions	City, town or post office, state, and ZIP code. For a f	eigh add	ress ree instructions			
	ROSWELL, NM 88202-1973					
		711				
Enter the	Return code for the return that this application is for (file	e a senara	te application for each return)			0 4
Littor the	Total 1 Godd 10, the fotal 1 that the application to the	o a oopara	application for each retain,		•	<u> </u>
Application	<u> </u>	Return	Application			Return
	,,,		''			1 .
<u>ls For</u> _		Code 01	Is For			Code
Form 990	DI	 	Form 990-T (corporation)			07
Form 990-		02	Form 1041-A			08
Form 990-		03	Form 4720			09
Form 990-		04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99 <u>0</u> -	T (trust other than above)	06	Form 8870			12
	ROBERT G. ARMS		000 50000000000000000000000000000000000	001		
	oks are in the care of \triangleright 500 N. MAIN, St	OTTE /		<u> 201</u>		
-	one No ► <u>575-625-2222</u>		FAX No.			
	rganization does not have an office or place of business		•		>	· 🔲
_	for a Group Return, enter the organization's four digit	-	· 		r the whole group, o	
	If it is for part of the group, check this box				ers the extension is	for.
	uest an automatic 3-month (6 months for a corporation	•	•			
		t organiza	tion return for the organization named a	bove	The extension	
_	r the organization's return for					
▶Ľ	X calendar year 2010 or					
▶L	tax year beginning	, an	d ending		_	
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return Fina	al retur	'n	
	Change in accounting period					
3a If thi	s application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
	efundable credits. See instructions.	-		3a	\$	0.
	s application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and			<u>-</u>
	nated tax payments made Include any prior year overp	_		3b	\$	0.
	nce due. Subtract line 3b from line 3a. Include your pa				<u> </u>	
	sing EFTPS (Electronic Federal Tax Payment System).	-	-	3c	s	0.
	f you are going to make an electronic fund withdrawal v				·	
			5 5555, 555 i 5 6405 E5 and i 6	30, 0		
_HA Fo	r Paperwork Reduction Act Notice, see Instructions	.			Form 8868 (R	ev 1.7011)

Form 8868 (Rev. 1-2011)						Page 2
If you are filing for an Additional (Not Automatic) 3-Mo	nth Extension,	complete only Part II and check this	box		▶ []	X
Note. Only complete Part II if you have already been grant	ed an automatic	3-month extension on a previously file	d Form	8868.		
If you are filing for an Automatic 3-Month Extension, c						
Part II Additional (Not Automatic) 3-Mo	nth Extension	n of Time. Only file the original (no				
Type or Name of exempt organization			Emp	loyer ide	ntification nu	mber
orint THE ARMSTRONG-CLARK FOUN	ПАТТОИ	•	6	8-055	34826	
le by the		tions		0 000	,1020	
tue date for P.O. BOX 1973	box, see instruc	tions.				
etum See City, town or post office, state, and ZIP code.	For a foreign add	Iress, see instructions.		•		
ROSWELL, NM 88202-1973	• • • • • • • • • • • • • • • • • • • •					
					_	
Enter the Return code for the return that this application is	for (file a separa	te application for each return)				0 4
		-				
Application	Return	Application			R	Return
s For	Code	ls For	··· ·······			Code
Form 990	01					
Form 990-BL	02	Form 1041-A				08
Form 990-EZ	03	Form 4720				10
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 5227 Form 6069				11
Form 990-T (trust other than above)	06	Form 8870				12
STOP! Do not complete Part II if you were not already g		* · · · · · · · · · · · · · · · · · · ·	ously file	ed Form 8	 3868.	
ROBERT G. A						
 The books are in the care of ► 500 N. MAIN 	, SUITE	200 - ROSWELL, NM 8	8201			
·Telephone No. ► 575-625-2222		FAX No. ▶			_	
If the organization does not have an office or place of b	usiness in the Ur	nited States, check this box			▶ [
If this is for a Group Return, enter the organization's fou						
pox ▶ If it is for part of the group, check this box		ach a list with the names and EINs of a	all memb	ers the ex	<u>ktension is for</u>	<u>:</u>
4 I request an additional 3-month extension of time un		BER 15, 2011.				
5 For calendar year 2010, or other tax year beginn		, and ending	$\overline{}$			·
6 If the tax year entered in line 5 is for less than 12 mo	nths, check reas	on: Initial return	_! Finai	return		
Change in accounting period						
7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED	TO GATHE	R THE INFORMATION N	ECES	SARY	TO FIL	E A
COMPLETE AND ACCURATE RETU						
001112212 12.0						
8a If this application is for Form 990-BL, 990-PF, 990-T,	4720, or 6069, e	nter the tentative tax, less any				
nonrefundable credits. See instructions.		-	8a	\$		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 overpayr	nent allowed as a	a credit and any amount paid]		_
previously with Form 8868.			8b	\$		0.
c Balance due. Subtract line 8b from line 8a. Include y		th this form, if required, by using				^
EFTPS (Electronic Federal Tax Payment System). Se		17/- 16: 11:	8c	\$		<u>0.</u>
	-	d Verification		of more times:	dodge and halter	
Inder penalties of perjury, I declare that I have examined this form t is true, correct, and complete, and that I am authorized to prepar	i, including accomp re this form	panying screaules and statements, and to	me dest (my KNOW	ieuge and bellet	1,
Signature ► Til	tle 🕨		Date	· •		
				For	m 8868 (Rev.	1-2011)

Form 8868 (Rev 1-2011)					Page	
	Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this bo)X		▶ X	
Note. Only complete Pa	art II if you have already been granted an a	utomatic	3-month extension on a previously filed	Form	8868		
	Automatic 3-Month Extension, complet					<u> </u>	
Part II Addition	onal (Not Automatic) 3-Month E	xtensio	n of Time. Only file the onginal (no c	opies i	needed)		
Type or Name of ex	Name of exempt organization				Employer identification num		
print							
THE ARM	THE ARMSTRONG-CLARK FOUNDATION					1826	
_{extended} Number, sti	reet, and room or suite no. If a P.O. box, se	ee instruc	tions				
filing your							
return See City, town of ROSWELI	or post office, state, and ZIP code. For a fo	reign add	ress, see instructions				
<u> </u>	, NM 88202-1973	***					
Enter the Return code f	or the return that this application is for life	a separa	application (refeach return)			0 4	
Application		Return	Application			Return	
ls For		Code	Is For			Code	
Form 990		01			_		
Form 990-BL		02	Form 1041-A			08	
Form 990-EZ		03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a)	or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other	than above)	06	Form 8870		-	12	
STOP! Do not complet	e Part II if you were not already granted		natic 3-month extension on a previou	sly file	d Form 88	68.	
	ROBERT G. ARMST						
	care of ► 500 N. MAIN, SU	JITE :	<u> 200 - ROSWELL, NM 88</u>	201			
_	75-625-2222		FAX No 🕨				
-	pes not have an office or place of business						
	Return, enter the organization's four digit (· · · · · · · · · · · · · · · · · · ·			group, check this	
	part of the group, check this box		ch a list with the names and EINs of all	memb	ers the exte	ension is for	
•		OVEM	BER 15, 2011				
	2010, or other tax year beginning		, and ending		.		
	ered in line 5 is for less than 12 months, cl	neck reas	on Initial return	Fınal r	eturn		
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	y you need the extension L TIME IS NEEDED TO G	ישעייע	R THE INFORMATION NE	ירדפ	CADV	מ פדד פי א	
	AND ACCURATE RETURN	MINE	K THE INFORMATION NE	CES	SAKI I	O FILE A	
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• • •	edits. See instructions	or 0000, c	mor the tentative tax, less arry	8a	\$	0	
	is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	- Ga	_Ψ	<u> </u>	
	de Include any prior year overpayment alle	-					
previously with F		01100 00 0	and any amount paid	8b	\$	0	
	otract line 8b from line 8a. Include your pa	vment wit	h this form, if required, by using	"			
	Federal Tax Payment System) See instru	•		8c	s	0	
			d Verification		 		
Under penalties of perjury,	I declare that I have examined this form, includi	ing accomp		e best c	f my knowle	dge and belief,	
it is true, correct, and com	plete, and that I am authorized to prepare this fo	rm.	A 0		-	6/2/	
Signature >////	STU Ar (Warn Title >		CYA	Date	<u> </u>	ווןטון	
	-				Form	8868 (Rev. 1-2011	