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Form 990-EZ Department of the Treasury

Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or
private foundation)

Sponsonng organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling
organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total
assets less than \$500,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements.

Bar year, or tax year beginning

MAY 1, 2010

and ending APR 30, 20

OMB No 1545-1150

Open to Public Inspection

n	ror ui	e 2010 Calendar year, or tax year beginning PIAT 1, 2010 and ending AP1	<u>K_3U</u>	<u>, 2</u>	.011					
В	Check of applicab	C Name of organization	D Empl	oyer id	entification number					
Ļ	Addre	ess change								
Ļ	Name change Number and street (or P.O box, if mail is not delivered to street address) Room/suite E Telephone number THE HORATIO R. STORER FOUNDATION, INC. 73-1010913									
Ļ	linitial	Tetum .								
Ļ	Termi	inated 512 10TH STREET, NW	(2	202)	626-8800					
Ļ	Amen		F Grou	p Exen	nption					
<u>_L</u>	Applica	ation pending WASHINGTON, DC 20004	Num	ber <u>►</u>						
		nting Method	H Chec	k ▶	if the organization is not					
		e: ► N/A	requi	red to	attach Schedule B					
7	Tax-ex	empt status (check only one) — X 501(c)(3) 501(c) () ◀(insert no) 4947(a)(1) or 527	(Forr	n 990,	990-EZ, or 990-PF).					
K	Check !	If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not	more th	nan \$50),000 A Form 990-EZ or					
	Form 9	90 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization c	hooses	to file a	a return, be sure to file a					
	comple	ete return								
L.	Add lin	es 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part	H,							
	ine 25,	column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ		<u> </u>	26,515.					
P	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instru	ctions f	or Part						
		Check if the organization used Schedule O to respond to any question in this Part I			<u>X</u>					
	1	Contributions, grits, grants, and similar amounts received	L	1	26,515.					
	2	Program service revenue including government fees and centracts EIVED	L	2						
	3	Membership dues and assessments	L	3						
	4	Investment income	L	4						
II 0.7	5a	Gross amount from sale of assets other than inventory SEP 1 4 2011 3 5a		1						
	b	Less cost or other basis and sales expenses		1						
4,	C	Gain or (loss) from sale of assets other than inventory (Sufficient line 5a)		5c						
	6	Gaming and fundraising events								
	a	Gross income from gaming (attach Schedule G if greater than		1						
CHININE REVENUE		\$15,000)								
36	þ	Gross income from fundraising events (not including \$ of contributions		1						
		from fundraising events reported on line 1) (attach Schedule G if the sum of such								
3	1	gross income and contributions exceeds \$15,000)		1						
5	1	Less: direct expenses from gaming and fundraising events 6c								
		Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	-	6d						
	1 .	Gross sales of inventory, less returns and allowances 7a		1						
	b	Less cost of goods sold 7b		_ 1						
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	-	7c						
	8	Other revenue (describe in Schedule O)	_ 	8	26,515.					
	10	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 Grants and similar amounts paid (list in Schedule 0) SEE SCHEDULE O		9	25,000.					
	10 11	Grants and similar amounts paid (list in Schedule 0) Benefits paid to or for members	}	10 11	23,000.					
/A	12	Salanes, other compensation, and employee benefits	F	12						
Se	13	Professional fees and other payments to independent contractors	ŀ	13						
Expenses	14	Occupancy, rent, utilities, and maintenance	-	14						
ŭ	15	Printing, publications, postage, and shipping	·	15	1,108.					
	16	Other expenses (describe in Schedule O) SEE SCHEDULE O	ŀ	16	251.					
	17	Total expenses. Add lines 10 through 16	▶	17	26,359.					
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	-	18	156.					
ets	19	Net assets or fund balances at beginning of year (from line 27, column (A))	ŀ	····						
Ass		(must agree with end-of-year figure reported on prior year's return)	1	19	2,973.					
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O)		20	0.					
Z	21	Net assets or fund balances at end of year. Combine lines 18 through 20	▶	21	3,129.					
LH	A For	Paperwork Reduction Act Notice, see the separate instructions.			Form 990-EZ (2010)					

Check if the organization used Schedule O to respond to	any question in this Part IV	-		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	(d) Contributions to employee benefit plans & deferred compensation.	(e) Expense account and other allowance
HON. GELINE B. WILLIAMS		HE BOARD	VVIII VII VVII VII VII VII VII VII VII	
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HON. LINDA BELL	VICE CHAIRMAN			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.50	0.	0.	0
CAROL TOBIAS	PRESIDENT			
	0.50	0.	0.	0
ANTHONY LAUINGER	VICE PRESIDEN	T		
	0.50	0.	0.	0
REV. DENNIS C. DAY	TREASURER			
	0.50	0.	0.	0
HOLLY GATLING	SECRETARY			
	0.50	0.	0.	0
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33 Did the organization engage in any activity not previously reported to the IRS? If Yes, 'provide a detailed description of each activity in Schedule O 34 Were any significant changes made to the organization or governing documents? If Yes, 'attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-7. 36 If the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements? 37 If Yes, 'has if filed a tax return on Form 990-7 for this year? 38 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete sphicable parts of Schedule N 38 A X 38 If Yes, 'has filed a tax return on Form 990-7 for this year? 39 Did the organization berrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 39 Did the organization by the prophib	Pá	Other Information (Note the statement requirements in the instructions for Part V.)			
33		Check if the organization used Schedule O to respond to any question in this Part V	<u></u>	<u>. </u>	X
Schedule O 3. Were any spinficant changes made to the organization's name. Otherwise, explain the change on Schedule O (see antiructions) 3. If the organization had income from business activities, such as blose reported on lines 2, 63, and 74 (among others), but not reported on Ferm 90-77. 3. Did the organization had income from business activities, such as blose reported on lines 2, 63, and 74 (among others), but not reported on Ferm 90-77. 3. Did the organization and/organization of the organization of the report the income in form 990-77. 3. Did the organization and/organization of the organization of the report the income in form 990-77. 3. Did the organization indured particulation, dissolution, dismolution, or significant disposition of net assets during the year? If Yes. 3. Did the organization indured particulation, dissolution, or significant disposition of net assets during the year? If Yes. 3. Did the organization indured particulation, dissolution, or significant disposition of net assets during the year? If Yes. 3. Did the organization of polical expenditures, direct or indirect, as described in the instructions 3. Did the organization of polical expenditures, direct or indirect, as described in the instructions 3. Did the organization of polical expenditures, direct or indirect, as described in the instructions 3. Did the organization brown from, or make any identity, direct, director, furector, trustee, or key employee or were any such loans made in a prove year and this ordinational and the end of the kiny year. 3. Did the organization brown from, or make any idensity of the return? 3. Did the organization brown from, or make any idensity of the year of the policy organization and the policy of the return. 3. Did the organization brown from, or make any idensity of the policy organization and the policy of the return of the policy organization and the policy organization and the organization and policy organization and contributions or distance and country organization and policy				Yes	No
34 Were any significant changes made to the organization from courter in the prefect of a hongs to the organization in same. Otherwise, seaps then change on Schedule () See as Schedul	33	· · · · · · · · · · · · · · · · · · ·		i	
documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedullo () (see instructions) If this organization had income from business achillars, such as those reported on insex 2, 6a, and 7 (a mining others), but not reported on Form 990-T, explain in Schedullo () why the organization due not report the income on Form 990-T. B of the organization subject to section 930(9) (notice, reporting, and reported on Form 990-T. STICKED (1975) (19			33		<u> </u>
35 If the organization had mores from business activities, such as those reported on line's 2, 6a, and 7a (among others), but not reported more from 990-T. a Did the organization have unrelated business gross means of \$1,000 or more on was 1a section \$001(c)(4), 501(c)(5), or 501(c)(5), or 501(c)(5) or 501(c)(6) o	34	·			
resported on Form 990-T, explain in Schedule Q why the organization and not report the income on Form 990-T. But the organization have unrelated business gross moome of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements? But the organization undergo a Mequation, dissolution, termination, or significant disposition of net assets during the year? If Yes, organization organization of pollucal expenditures, direct or indirect, as described in the instructions D of the organization into Pollucal expenditures, direct or indirect, as described in the instructions D of the organization british of pollucial expenditures, direct or indirect, as described in the instructions D of the organization organ	_	• • • • • • • • • • • • • • • • • • • •	34		X
a Dut the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 603(e) notice, reporting, and proxy tax requirements? 501 (c)(6) organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "yes," complete applicable parts of Schedule N 70 Enter amount of political expenditures, direct or indirect, as described in the instructions 70 Enter amount of political expenditures, direct or indirect, as described in the instructions 70 Enter amount of political expenditures, direct or indirect, as described in the instructions 71 Enter amount of political expenditures, direct or indirect, as described in the instructions 72 Enter amount of political expenditures, direct or indirect, as described in the instructions 73 In In the organization in Enter In 1947-07. For the year? 74 Enter amount of political expenditures, direct or indirect, as described in the instructions 75 Enter amount of political expenditures, direct or indirect, as described in the instructions 76 Enter amount of political expenditures, direct or indirect, as described in the instructions 77 Enter amount of political expenditures, direct or indirect, as described in the instructions 78 Enter amount of political expenditures, direct or indirect, as described in the instructions 79 Enter amount of political expenditures, direct or indirect, as described in the instructions 79 In 1945-194 Enter amount of the war? 79 Enter amount of political expenditures, direct or indirect, as described in the instructions 79 Enter amount of political expenditures, direct or indirect, as described in the instructions 79 Enter amount of political expenditures, direct or indirect or indirect, directly and the enter amount of the total amount movibure 79 Enter amount of amount with a security and the enganization and political expenditures. 79 Enter amount of amount with a security and an amo	35				I
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b Hifes, has filled at a return on Form 990-T for this year? 5 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N 7 2 Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-P01 for this year? 8 Did the organization file Form 1120-P01 for this year? 8 Did the organization file Form 1120-P01 for this year? 8 Did the organization file Form 1120-P01 for this year? 8 Did the organization file Form 1120-P01 for this year? 10 Did the organization file Form 1120-P01 for this year? 11 Poss or year and still outstanding at the end of the tax year covered by this return? 12 Did the organization schedule L, Part II and enter the total amount minorly deal of the section 501(c)(7) organizations. Enter a linitation fees and captal contributions included on line 9 12 Section 501(c)(7) organizations. Enter amount of tax imposed on the organization during the year under section 501(c)(3) and 501(c)(4) organizations. Bit amount of tax imposed on the organization which are profited or disposed or disposed profited parsons during the year under sections 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 91(2,4955, and 4556 1 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 91(2,4955, and 4556 2 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year year, did the organization or persons during the year, and the file and year year year, the tax year, was the organization or persons during the year? 14 List this states with which a copy of this return is filed ▶ NONE 15 Possible organization organization and the graph organization organizatio	а		1		
36 bit the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Schedule N 372 Enter amount of political expenditures, direct or indirect, as described in the instructions 373 bit the organization form or more, and any asset to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 378 bit 11'res; complete Schedule L, Part II and anter the total amount involved 389 bit 11'res; complete Schedule L, Part II and anter the total amount involved 380 bit 11'res; complete Schedule L, Part II and anter the total amount involved 380 bit 11'res; complete Schedule L, Part II and anter the total amount involved 380 bit 11'res; complete Schedule L, Part II and anter the total amount involved 380 bit 11'res; complete Schedule L, Part II and anter the total amount of tax imposed on the organization during the year under: section 4911 bit 11'res; complete Schedule L, Part II 58ction 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization under the year under section 4912 bit 11'res; complete Schedule L, Part II 58ction 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization and 591(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization and the part in the part in the part in the section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization shocks are in care of 12'res; formity 11'res; complete form 8865-T 400 bit 11'res; complete Form 8865-T 401 bit 12'res; formity 11'res; complete form 8865-T 402 bit 12'res; formity 11'res; formit			\vdash		
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37a Enter amount of political expenditures, direct or indirect, as described in the instructions	3b				
b Did the organization file Form 1120-POL for this year? 370	07-				X
38a Dit the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? b If "Yes," complete Schedule I, Part II and enter the total amount involved 38b N/A 38ction 501(c)(7) organizations. Enter an intration fees and capital contributions included on line 9. For public use of club facilities 6 Gross receipts, included on line 9, for public use of club facilities 5 Gross receipts, included on line 9, for public use of club facilities 5 Gross receipts, included on line 9, for public use of club facilities 5 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year, or did it engage in an excess benefit transaction during the year under section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualfied persons during the year under sections 4912, 4955, and 4958 6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualfied persons during the year under sections 4912, 4955, and 4958 6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualfied persons during the year under sections 4912, 4955, and 4958 6 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualfied persons during the year; was the organization a party to a prohibited tax shelter transaction? If Yes, complete form 8886-T 1 List the states with which a copy of this return is filled NONE 142a The organization's books are in care of NAMARIE NATIVIDAD, CFO 142b The organization's books are in care of NAMARIE NATIVIDAD, CFO 142c Tiesphone no (202) 626-8800 142c List the states with which a copy of this return is filled NAMARIE NATIVIDAD, CFO 142e Tiesphone no (202) 626-8800 142e List the states with which a copy of this return is filled NAMA			1		١,,
in a prior year and still outstanding at the end of the tax year covered by this return? If Yes, complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter Intuitation fees and capital contributions included on line 9 If Yes, complete so, included on line 9 If Yes, section 4911 ► If Yes, complete so, included on line 9 If Yes, look of the user of the section 491(4) organizations and the organization and the section and the section 491(4) organization and the section of the section 491(4) organization and the section of the user of the section 501(4) organization and section section organization and section section organization and section sec			376		X
b If Yes, complete Schedule L, Part II and enter the total amount involved 3 Section 501(c)(7) organizations: Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. section 4912 ▶ 0. section 4955 ▶ 0. b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. section 4912 ▶ 0. section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-E2? If "Yes, complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax organization apartly to a prohibited tax sheller transaction? If Yes, complete Form 8886-T L Is the states with which a copy of this return is filed ▶ NONE 40e	304				•
39 Section 501(c)(7) organizations Enter a intitation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 № Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 № 0. Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 № 0. Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 & excess benefit transaction during the year; or did it engage in an excess benefit transaction in a prior year, that has not been reported on any of its prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations of 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations at any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If Yes, complete Form 8886-T List the states with which a copy of this return is filed ▶ NONE 12 List the states with which a copy of this return is filed ▶ NONE 14 Any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; № 15 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; № 16 Yes, enter the name of the foreign country; № 27 At any time during the calendar year, did the organization maintain an office outside of the U.S.? 17 Yes, enter the name of the foreign country. 28 Section 4947(a)(1) nonexempt charitab	h		382	-	<u> </u>
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911			-		I
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52							ection 501	(c)(3) c	organizat	ions and 4947(a)(1) nonexe	empt			. 177	1	
	charitable	trusts m	ust attact ies of pe rju	i a comple	eted Sche e that I have	dule A examin	ed this return	n, includ	ing accom	panying schedule	s and statemer	nts, and to	the best of my	knowledge a	and belief	Yes it is true	<u> </u>
		orrect and	complete	Secionation (of preparer	(other th	en officier) is	based o	on all infon	nation of which pr	reparer has any	knowledg	ge	10/0	-/-		
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May 03217	the IRS di: 74	scuss this	return w	nth the pro	eparer sho	own abo	ove? See ir	nstructi	ions]	<u> </u>	Yes	No_
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SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010 2010

Open to Public Inspection

Name of the organization

THE HODATIO P STORED FOUNDATION INC. 72 1010012

Part I	Reason		ity Status (All organiz					tructions		3-1010913
			because it is: (For lines 1					a decidina.		
1			s, or association of church							
2 🗀			'0(b)(1)(A)(ii). (Attach Sc		ilibed ili se	Cuon 170	(10)(1)(1)			
3 🗔			tal service organization		ın coation	170/5\/1\	/A\/;;;\			
4		*	operated in conjunction					/h\/4\/A\fi	il Entort	ha hannitalla nama
~	city, and stat		operated in conjunction	with a nos	pitai uesci	ilibed ili Se	ction 170	יוטאריואריאלוי	ı y. Enter t	ne nospitais name,
5 🔲			benefit of a college or ur	nverety o	wheel or or	perated by	2 000000	montal uni	t docomb	
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6			•	t dagamba.		- 4700×16	11/41/64			
7 X			ent or governmental unit					- f Ab -		
* [48]		b)(1)(A)(vi). (Comple	eives a substantial part	oi its supp	ort from a	governme	entai unit C	or from the	generai p	oudlic described in
8 🔲			section 170(b)(1)(A)(vi). ((Camplata	Dort II \					
9 🗔							hutiana m		_	
•			eives: (1) more than 33 1 nctions - subject to certa							
			axable income (less sect							
		509(a)(2). (Complete		iioii 511 la	x) ironi bu	sinesses a	acquirea b	y the orga	ınızatıon a	aner June 30, 1975.
10 🖂			perated exclusively to te	et for publi	o cafaty S	Saa saatia	n 500(a)(/	11		
			perated exclusively for the						v out the	nurnoses of one or
			ations described in section							
			organization and comple				.). Occ sc t	Jeon Jose	ajtoj. One	ock the box that
	a Type I	· · · · ·	7 '		e III - Func		teorated		d 🗀	Type III - Other
e 🗀			at the organization is not					r more dis		
			han one or more publicly							
f			ten determination from t						λ(α)(1) Οι .	30011011 000(a)(2).
	_	rganization, check th				po 1, 1, po	., 0. 1, p.	·		
g		-	organization accepted an	nv aift or co	ontribution	from anv	of the follo	owing per	sons?	
•			lirectly controls, either al							Yes No
			upported organization?	3		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		() (,,	11g(i)
		- •	n described in (i) above?						-	11g(ii)
			person described in (i) o		∍?	-	-			11g(iii)
h			about the supported org				•			1.5(/)
		· ·		J	·-/					
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is	the	(vii) Amount of
	inization	(,	organization (described on lines 1-9	in col (i) listed in your		organization in col		organization in col. (i) organized in the		support
			above or IRC section	governing (document?	(i) of your support?		US?		
_			(see instructions))	Yes	No	Yes	No	Yes	No	
										· ·
									<u> </u>	
otal								<u> </u>	<u> </u>	
HA For P	anerwork Re	duction Act Notice	see the Instructions for	or				Sabadul	ο A (Εα	- 000 at 000 EZI 2010

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 201(

Schedule A (Form 990 or 990-EZ) 2010 THE HORATIO R. STORER FOUNDATION, INC. 73-1010913 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	40,638.	35,000.	30,217.	26,272.	26,515.	158,642.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf		<u>-</u> .				
3	The value of services or facilities		· .				
	furnished by a governmental unit to				I		
	the organization without charge						_
4	Total. Add lines 1 through 3	40,638.	35,000.	30,217.	26,272.	26,515.	158,642.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4	<u> </u>					158,642.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	40,638.	35,000.	30,217.	26,272.	26,515.	158,642.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	_					
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						158,642.
	Gross receipts from related activities,				ĺ	12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectioi	n 501(c)(3)	
800	organization, check this box and stop	here	<u> </u>				<u> </u>
	tion C. Computation of Publ						
	Public support percentage for 2010 (I			olumn (f))			100.00 %
	Public support percentage from 2009						$100.00 {\%}$
16a	33 1/3% support test - 2010.If the o			line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	
•	stop here. The organization qualifies			-			▶ X
D	33 1/3% support test - 2009.If the o				ine 15 is 33 1/3%	or more, check the	s box
47-	and stop here. The organization qual						▶∟
1/a	10% -facts-and-circumstances test	t - 2010.If the orga	nization did not ch	eck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac					t IV how the organ	ization
	meets the "facts-and-circumstances"						▶∟
D	10% -facts-and-circumstances test	t - 2009. If the orga	nization did not ch	eck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the						
40	organization meets the 'facts-and-circ						▶ <u> </u>
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2010

032022

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and		\2, 2001	19,2000	10/ 2003	(6) 2010	ly iolai
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-				}		
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that			-			-
are not an unrelated trade or bus-]				
iness under section 513						,
4 Tax revenues levied for the organ-			 			
ization's benefit and either paid to						
or expended on its behalf					1	
•			-	1	 	
5 The value of services or facilities					•	
furnished by a governmental unit to					ļ	
the organization without charge				 	-	
6 Total. Add lines 1 through 5		ļ		 	 	
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons			-	 		
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year					-	
c Add lines 7a and 7b		1		<u> </u>		
8 Public support (Subtract line 7c from line 6)	<u></u>	<u> </u>	1	. <u>I </u>		
Section B. Total Support	T		Т			
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on				•		1
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses					-	
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)	<u></u>	1	<u>L</u>			
14 First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) org	anization,
check this box and stop here	<u> </u>				<u> </u>	. ▶□
Section C. Computation of Publ						
15 Public support percentage for 2010 (line 8, column (f) d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2009					16	%
Section D. Computation of Inve	stment Incom	e Percentage				
17 Investment income percentage for 20)10 (line 10c, colur	mn (f) divided by li	ne 13, column (f))	-	17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2010. If the			on line 14, and lin	e 15 is more than		
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2009. If the				• • •		3%, and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization		_	-			▶ □

032023 12-21-10

Schedule A (Form 990 or 990-EZ) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

THE HORATIO R. STORER FOUNDATIO	N, INC.	<u> 73–1</u>	010913	
FORM 990-EZ, PART I, LINE 10, GRANTS AND ALLOCA	TIONS:			
ACTIVITY CLASSIFICATION: GRANT				
GRANTEE NAME: NATIONAL LEGAL CENTER FOR MEDICAL	DEPENDENC			
GRANTEE ADDRESS: 229 19TH AVENUE, SD MINNEAPOLI	S, MN 5545	5		
GRANTEE RELATIONSHIP: NONE				
AMOUNT GIVEN:			25.	000.
FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:				
DESCRIPTION OF OTHER EXPENSES:			PUDOMA	·
MISCELLANEOUS				251.
FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:				
DESCRIPTION	BEG. OF	YEAR	END OF	YEAR
ACCOUNTS RECEIVABLE	2,	083.	4,	166.
FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIE				
DESCRIPTION	BEG. OF	YEAR	END OF	YEAR
ACCOUNTS PAYABLE		0.	2,	083.
FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE -	THE FOUND	OATION	SEEKS TO)
PROVIDE SUPPORT TO CHARITABLE OR EDUCATIONAL PR	OGRAMS WHI	CH ADV	ОСАТЕ	
PRO-LIFE CAUSES.				
FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE	CACCOMPLIS	SHMENTS	S:	
CO-SPONSORED PUBLICATION OF "ISSUES IN LAW AND		dula O (Fa	m 000 a- 000 T	7) (2040)
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11	Scnee	uule V (FON	m 990 or 990-E	L) (2010)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Pepartment of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

Name of the organization

THE HORATIO R. STORER FOUNDATION, INC.

Employer identification number 73–1010913

IND MODELLE NO BLONDER LOOMSHILLOW, THE CO. LOT AND ADDRESS.
A BI-MONTHLY JOURNAL TO INFORM MEMBERS, PROFESSIONALS,
SCHOOLS AND THE GENERAL PUBLIC OF ISSUES CONFRONTING THE
MEDICALLY DEPENDENT AND DISABLED.
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.