### Form **990-PF**

Department of the Treasury Internal Revenue Service (77

## **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.

OMB No 1545-0052

2007

|  | For calendar year 2007, or tax year beginning , and ending |  |   |         | nding              |                    |                                |                |                           |               |  |                     |              |   |               |                  |
|--|--|--|---|---------|--------------------|--------------------|--------------------------------|----------------|---------------------------|---------------|--|---------------------|--------------|---|---------------|------------------|
| G Check all that apply: Initial return |  |  | Final return  |         | Amended return     |                    |                                | Address change |                           |               | Name change                                      |                     |              |   |               |                  |
|  | lise   | Use the IRS Name of foundation           |   |         |                    |                    |                                |                |                           | A Employe     | r ident  | ificatior           | ı number     |   |               |                  |
|  |  | abei                                     | DED DAME  | LLY     | ST.                | THEODO             | RE GUERI                       | N              |                           |               |  |                     |              |   |               |                  |
|  | Otherwise, FOUNDATION, INC.                                |  |   |         |                    |                    |                                |                |                           | 20-8096424    |  |                     |              |   |               |                  |
|  |  | print                                    |   | (or P C | box number         | r if mail is not d | elivered to street addre       | ess)           |                           | Room/suite    | B Telephor                                       | e num               | ber          |   |               |                  |
|  |  | or type. ONE AMERICAN SQUARE, SUITE 2600 |   |         |                    |                    |                                |                | 317                       | <u>-63</u>    | <u>4 – 47</u>                                    | 47                  |              |   |               |                  |
|  | inst   |  | ons   City or town, sta                                 |         |                    |                    |                                |                |                           |               | C If exemption                                   |                     |              |   |               | ▶□               |
|  |  |  | INDIANA   |         |                    |                    |                                |                |                           |               | D 1. Foreig                                      |                     |              |   |               |                  |
|  | H_C  | _  | type of organization:                                   |         |                    |                    | xempt private found            |                |                           |               | 2. Foreign                                       | organiz<br>nere and | attach co    | eeting the 8<br>omputation  | 5% test,      | <b>&gt;</b>      |
|  |  |  |   |         |                    |                    | Other taxable priva            |                | ation                     |               | E If private                                     | founda              | ation sta    | tus was t   | erminated     | t                |
|  |  |  | arket value of all asset                                |         | nd of year         |                    | _                              | Cash           | Accr                      | rual          | 1  |                     |              | )(A), chec  |               |                  |
|  |  |  | Part II, col. (c), line                                 | 16)     | 264                | 0 لــا             | ther (specify)                 | er (specify)   |                           |               | F If the fou                                     |                     |              |   |               | tion             |
|  | D  |  |   |         |                    | (Part I, Coil      | mn (d) must be on cash basis.) |                |                           |               |  |                     | )(B), chec   |   | ightharpoonup |                  |
|  | Pä   | rt I                                     | (The total of amounts in necessarily equal the a        | n colum | ns (b), (c), and   | d (d) may not      | (a) Revenue<br>expenses per    |                | (b) Net investment income |               |  | justed i<br>come    | net          | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |               | rposes           |
|  |  | 1  | Contributions, gifts,                                   | grants  | s, etc., recer     | ved                | 300,                           | 850.           |                           |               | N  | /A                  |              |   |               |                  |
|  |  | 2  |   |         | is not required to | attach Sch B       |                                |                |                           |               | <u> </u>   |                     |              |   |               |                  |
|  |  | 3  | Interest on savings and<br>cash investments             | tempor  | ary                |                    |                                |                |                           |               |  |                     |              |   |               |                  |
|  |  | 4  | Dividends and intere                                    | st fror | n securities       | i                  | 9,                             | 068.           |                           | 9,068.        |  |                     |              | STAT  | 'EMEN         | T 1              |
|  |  | 5 <b>a</b>                               | Gross rents .   |         |                    |                    |                                |                |                           |               |  |                     |              | <u> </u>  |               |                  |
| Ø                                      | ē  | b  | Net rental income or (los                               | is)     |                    |                    |                                |                |                           |               |  |                     |              | <del> </del>  |               |                  |
|  |  | 6a                                       | Net gain or (loss) from sa<br>Gross sales price for all |         |                    |                    | 13,                            | 503.           |                           | <del>-</del>  |  |                     |              | ļ   |               |                  |
|  | en   | b  | assets on line 6a                                       |         |                    | <u>,503.</u>       |                                |                |                           |               |  |                     |              | ļ   |               |                  |
| Q                                      | Revenue  | 7  | Capital gain net income                                 | -       |                    |                    |                                |                |                           | <u>3,503.</u> |  |                     |              | <del> </del>  |               |                  |
| SCANNED                                | _  | 8  | Net short-term capit                                    | •       |                    |                    |                                |                |                           |               |  |                     |              | <del> </del>  | <del></del>   |                  |
| Z                                      |  | 9  | Income modification<br>Gross sales less returns         |         |                    |                    | ļ                              |                |                           |               |  |                     | DC           | CEI   | <b>/</b> CO   | _                |
|  |  |  | and allowances  |         |                    |                    |                                |                |                           |               |  | ╁┌                  | _ <u>V</u> E | CEN   | YEU           | ᄀ                |
|  |  |  | Less Cost of goods sole<br>Gross profit or (loss        | _       |                    |                    |                                |                |                           |               | <u> </u>   | 1=1                 |              |   |               | 18               |
| AON                                    |  |  | Other income  | ,       |                    |                    |                                |                |                           |               |  | ĮŞ                  | -001         | <del>  2 1</del>  | 2008          | <del> 9 </del> - |
|  |  | 12                                       | Total. Add lines 1 th                                   | Irough  | 11                 |                    | 323,                           | 421.           | 2                         | 2,571.        | <del>                                     </del> | ľL                  |              |   |               | 181              |
|  |  | 13                                       | Compensation of officer                                 |         | •                  | . etc              | ,                              | 0.             |                           | 0.            |  | 1                   | OG           | DEN   | UT            | - J.             |
|  |  | 14                                       | Other employee sala                                     |         |                    | ,                  |                                |                |                           |               |  | <del></del>         |              |   |               |                  |
| 2008                                   |  | 15                                       | Pension plans, empl                                     |         | -                  |                    |                                |                |                           |               |  |                     |              |   |               |                  |
| 99                                     | ses  | 16a                                      | Legal fees  | •       |                    |                    |                                |                |                           |               |  |                     |              |   |               |                  |
|  | penses   | b  | Accounting fees   |         | ST                 | MT 2               |                                | 850.           |                           | 0.            |  |                     |              |   |               | 0.               |
|  | EX   | C  | Other professional fe                                   | ees     | ST                 | MT 3               | 2,                             | 893.           |                           | 2,893.        |  |                     |              | •   |               | 0.               |
|  | Уē   | 17                                       | Interest  |         |                    |                    |                                |                |                           |               |  |                     |              |   |               |                  |
|  | Administrative   | 18                                       | Taxes .   |         |                    | MT 4               |                                | 134.           |                           | 134.          |  |                     |              | <u> </u>  |               | 0.               |
|  | inis   | 19                                       | Depreciation and dep                                    | oletion | 1                  |                    |                                |                |                           |               |  |                     |              |   |               |                  |
|  | Ę  | 20                                       | Occupancy .   |         |                    |                    | ļ                              |                |                           |               | <del> </del>                                     |                     |              | <u> </u>  |               |                  |
|  | φþ   | 21                                       | Travel, conferences,                                    |         | neetings           |                    |                                | -              | <u></u>                   | <del></del>   |  |                     |              | <del> </del>  |               |                  |
|  | and  | 22                                       | Printing and publicat                                   | tions   |                    |                    | -                              |                |                           |               | <del> </del>                                     |                     |              | <del> </del>  |               |                  |
|  | Operating  | 23                                       | Other expenses  |         |                    |                    | ·                              |                |                           | <del>_</del>  | <del> </del>                                     |                     |              | <del> </del>  |               |                  |
|  | era  | 24                                       | Total operating and                                     |         |                    |                    | 1                              | 077            |                           | 2 007         |  |                     |              |   |               | 0                |
|  | ō  | or.                                      | expenses. Add lines                                     |         | _                  |                    | 3,                             | 877.           |                           | <u>3,027.</u> | <del> </del>                                     |                     |              | <del> </del>  |               | 0.               |
|  |  |  | Contributions, gifts,                                   | _       | •                  |                    |                                |                |                           | <del>-</del>  | <del></del>                                      |                     |              |   |               |                  |
|  |  | <b>4</b> 0                               | Total expenses and Add lines 24 and 25                  |         | រទមពាមពីនៃ.        |                    | 3                              | 877.           |                           | 3,027.        |  |                     |              |   |               | 0.               |
|  |  | 27                                       | Subtract line 26 from                                   |         | 12.                | <del></del>        |                                | <i>J 1 1</i> • |                           | J, U41.       |  |                     |              | <u> </u>  |               |                  |
|  |  |  | Excess of revenue over                                  |         |                    | rsemente           | 319,                           | 544            |                           |               |  |                     |              |   |               |                  |
|  |  |  | Net investment inco                                     |         |                    |                    |                                |                | .1                        | 9,544.        |  |                     |              |   |               |                  |
|  |  |  | Adjusted net income                                     |         |                    |                    |                                |                | <b></b>                   |               | N.   | /A                  |              |   |               |                  |
|  |  |  |   |         |                    |                    |                                |                |                           |               |  |                     |              |   | 200 55        |                  |

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BIR FAMILY F. THEODORE GUERIN

Form 990-PF (2007) 20-8096424 Page 2 FOUNDATION INC Beginning of year End of year Attached schedules and amounts in the description Balance Sheets Part II column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 300,000 341,411 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable > Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 0. 242,133. 238,050 **b** Investments - corporate stock STMT 5 0. STMT 6 c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis > Less accumulated depreciation 15 Other assets (describe ▶ 300,000 619,544. 613,861. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted  $\triangleright [X]$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. þ 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 300,000 29 Retained earnings, accumulated income, endowment, or other funds 300,000 30 Total net assets or fund balances 300,000 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 300,000 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 0. Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 619,544.

| Part IV Capital Gains   | and Lo                  | osses for Tax on In                                       | vestmen        | t Income                             |                                | <del></del>                        |                                  |                           | <del></del>                      |
|---|-------------------------|---|----------------|--------------------------------------|--------------------------------|------------------------------------|----------------------------------|---------------------------|----------------------------------|
|   |                         | ind(s) of property sold (e.g.<br>or common stock, 200 shs |                |                                      | ( <b>b)</b> Ho<br>P - I<br>D - | w acquired<br>Purchase<br>Donation | (c) Date a<br>(mo., da           | cquired<br>y, yr.)        | (d) Date sold<br>(mo., day, yr.) |
| 1a COLUMBIA REAL  | ESTA                    | TE  |                | <u>-</u>                             |                                | P                                  | 05/22                            | 2/07                      | 01/14/07                         |
| b LAUDUS US DISC  | OVER                    | Υ   |                |                                      |                                | P                                  | 08/14                            | 1/07                      | 01/14/07                         |
| c WELLS FARGO AD  |                         |   |                |                                      |                                | P                                  | 08/22                            | 2/07                      | 01/14/07                         |
| d CAPITAL GAINS   | DIVI                    | DENDS   |                |                                      | <u> </u>                       |                                    |                                  |                           |                                  |
| <u>e</u>  |                         |   |                |                                      | <u> </u>                       |                                    |                                  |                           |                                  |
| (e) Gross sales price   | (f)                     | Depreciation allowed (or allowable)                       |                | st or other basis<br>expense of sale |                                |                                    |                                  | n or (loss<br>(f) minus ( |                                  |
| <u>a</u> 12,133.  |                         |   |                | 15,00                                |                                |                                    |                                  |                           | <u>-2,867.</u>                   |
| b 15,316.   |                         |   |                | 15,00                                |                                |                                    |                                  |                           | 316.                             |
| c 15,053.   | <br>                    |   |                | 15,00                                | 00.                            | •                                  |                                  |                           | 53.                              |
| d 16,001.   |                         |   |                |                                      |                                |                                    |                                  |                           | 16,001.                          |
| Complete only for aggets shown  | 1                       | solves (h) and sweed had                                  | ha fa daha     | 10/01/00                             |                                |                                    |                                  |                           |                                  |
| Complete only for assets shown  | r                       |   | _              |                                      |                                |                                    | (I) Gains (Co<br>ol. (k), but no |                           |                                  |
| (i) F.M.V. as of 12/31/69   |                         | (j) Adjusted basis<br>as of 12/31/69                      |                | col. (j), if any                     |                                |                                    |                                  | rom col. (                | h))                              |
| <u>a</u>  |                         |   |                |                                      |                                |                                    |                                  |                           | <u>-2,867.</u>                   |
| b   |                         |   |                |                                      |                                |                                    |                                  |                           | 316.                             |
| <u>c</u>  |                         |   |                |                                      |                                |                                    |                                  |                           | 53.                              |
| <u>d</u>  |                         |   |                |                                      |                                |                                    |                                  |                           | 16,001.                          |
| <u>e</u>  |                         |   |                |                                      | -                              |                                    |                                  |                           |                                  |
| 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2   |                         |   |                |                                      |                                | 13,503.                            |                                  |                           |                                  |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,  |                         |   | d (6):         |                                      |                                |                                    |                                  |                           |                                  |
| If (loss), enter -0- in Part I, line 8  | ,,,,,,,,,               | <b>-</b> ,  |                |                                      |                                | 3                                  |                                  | N/A                       |                                  |
| Part V Qualification U  | Inder S                 | Section 4940(e) for                                       | Reduced        | Tax on Net                           | Inve                           | stment In                          | come                             |                           |                                  |
| If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not quate Enter the appropriate amount in | tion 4942<br>lify under | tax on the distributable am section 4940(e). Do not co    | mplete this pa | art.                                 |                                |                                    |                                  |                           | Yes X No                         |
| (a) Base period years   |                         | (b) Adjusted qualifying dist                              |                | Net value of no                      | (c)                            | hla-usa assat                      |                                  | Distrib                   | (d)                              |
| Calendar year (or tax year beginni  | ng In)                  | Adjusted qualifying dist                                  |                | iver value of fic                    | JIICHAHIA                      |                                    |                                  | ol. (b) div               | ided by col. (c))                |
| 2006  |                         |   | 0.             |                                      |                                |                                    | 0.                               |                           | .000000                          |
| 2005  |                         | <del></del>   | _              |                                      |                                |                                    |                                  |                           |                                  |
| 2003  |                         | <del></del>   |                |                                      |                                |                                    |                                  |                           |                                  |
| 2002  |                         |   | · · · · · · -  |                                      |                                |                                    | _                                |                           |                                  |
|   |                         | ······  |                | <u> </u>                             |                                |                                    |                                  |                           |                                  |
| 2 Total of line 1, column (d)   |                         |   |                |                                      |                                |                                    | 2                                |                           | .000000                          |
| 3 Average distribution ratio for the  | 5-vear bas              | se period - divide the total o                            | n line 2 by 5. | or by the number                     | of vears                       | }                                  |                                  |                           |                                  |
| the foundation has been in exister  |                         |   |                |                                      | <b>,</b>                       |                                    | 3                                | <del>.</del>              | .000000                          |
| 4 Enter the net value of noncharitab  | le-use as               | sets for 2007 from Part X, I                              | пе 5           |                                      |                                |                                    | 4                                |                           | 360,034.                         |
| 5 Multiply line 4 by line 3   |                         |   |                |                                      |                                |                                    | 5                                |                           | 0.                               |
| 6 Enter 1% of net investment incom  | ne (1% of               | Part I, line 27b)   |                |                                      |                                |                                    | 6                                |                           | 195.                             |
| 7 Add lines 5 and 6   |                         |   |                |                                      |                                |                                    | 7                                |                           | 195.                             |
| 8 Enter qualifying distributions from   | n Part XII.             | line 4  |                | -                                    |                                |                                    | 8                                |                           | 0.                               |
| If line 8 is equal to or greater than See the Part VI instructions.   | -                       |   | 1b, and comp   | lete that part usin                  | ıg a 1% 1                      | ax rate.                           |                                  | -                         |                                  |
|   |                         |   |                |                                      |                                |                                    |                                  |                           | QQQ_DE (2007)                    |

BIR FAMILY P. THEODORE GUERIN

| Form | 1990-PF (2007) FOUNDATION, INC.   | 20.          | -8096      | 121         |      | Page 4    |
|------|---|--------------|------------|-------------|------|-----------|
|      | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), of  |              |            |             |      | ns)       |
|      | Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.  |              | T          |             |      |           |
|      | Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)   |              |            |             |      |           |
| ь    | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%  | 1            |            |             | 3    | 91.       |
|      | of Part 1, line 27b   |              |            |             |      |           |
| C    | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)   | -            |            |             |      |           |
|      | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 2            | <u> </u>   |             |      | 0.        |
| 3    | Add lines 1 and 2   | 3            |            |             | 3    | 91.       |
| 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-   | 5            |            |             | 3    | 91.       |
| 6    | Credits/Payments:   | -            |            |             |      |           |
| a    | 2007 estimated tax payments and 2006 overpayment credited to 2007 6a 6a   |              |            |             |      |           |
| b    | Exempt foreign organizations - tax withheld at source 6b  |              |            |             |      |           |
| C    | Tax paid with application for extension of time to file (Form 8868)   |              | 1          |             |      |           |
| d    | Backup withholding erroneously withheld 6d 6d   |              |            |             |      |           |
| 7    | Total credits and payments. Add lines 6a through 6d   | 7            | <b>-</b>   |             |      | <u>0.</u> |
| 8    | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  | 8            | —          |             |      |           |
|      | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | <b>▶</b>   9 |            |             | 3    | 91.       |
|      | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | <b>►</b> 10  |            |             |      |           |
|      | Enter the amount of line 10 to be: Credited to 2008 estimated tax   | <u>► 11</u>  | <u></u>    | -           |      |           |
|      | rt VII-A   Statements Regarding Activities  | _            |            |             | V    |           |
| 1a   | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter-  | ene in       |            | <del></del> | Yes  |           |
|      | any political campaign?   | ٠.٥          |            | _1a         |      | X         |
| D    | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition  | •            |            | 1b          |      | X         |
|      | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials put   | biisnea d    | r          |             |      | -         |
| _    | distributed by the foundation in connection with the activities.  |              |            |             |      | <b>.</b>  |
| Ç    | Did the foundation file Form 1120-POL for this year?  |              |            | 1c          |      | X_        |
| d    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation.   \$   | 0.           |            |             |      |           |
|      | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation   | <u> </u>     |            |             |      |           |
| ·    | managers. > \$  |              |            | İ.,         |      |           |
| 2    | Has the foundation engaged in any activities that have not previously been reported to the IRS?   |              |            | 2           |      | х         |
|      | If "Yes," attach a detailed description of the activities.  |              |            | <u> </u>    |      | <u> </u>  |
|      | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation   | n. or        |            |             |      |           |
|      | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  | ,            |            | 3           |      | х         |
| 4a   | Did the foundation have unrelated business gross income of \$1,000 or more during the year?   |              |            | 4a          |      | X         |
| b    | If "Yes," has it filed a tax return on Form 990-T for this year?  | . 1          | I/A        | 4b          |      |           |
| 5    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?  |              |            | 5           |      | X         |
|      | If "Yes," attach the statement required by General Instruction T.   |              |            |             |      |           |
| 6    | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:   |              |            |             |      |           |
|      | By language in the governing instrument, or   |              |            |             |      | ĺ         |
|      | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state | state law    |            |             |      |           |
|      | remain in the governing instrument?   |              |            | 6           |      | <u>X</u>  |
|      | Did the foundation have at least \$5,000 in assets at any time during the year?   |              |            | 7_          | X    |           |
|      | If "Yes," complete Part II, col. (c), and Part XV.  |              |            |             |      |           |
| 8a   | Enter the states to which the foundation reports or with which it is registered (see instructions)  |              |            |             |      |           |
| Ь    | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)   |              |            |             |      | ĺ         |
| -    | of each state as required by General Instruction G? If "No," attach explanation   |              |            | 8b          | X    |           |
| 9    | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for  | calendar     |            |             |      |           |
|      | year 2007 or the taxable year beginning in 2007 (see instructions for Part XIV)? If "Yes," complete Part XIV  |              |            | 9           |      | х         |
|      | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  | STMI         | <u>. 7</u> | 10          | X    |           |
|      |   |              |            | - QQA       | DE / | 20071     |

BIR FAMILY Г. THEODORE GUERIN Form 990-PF (2007) FOUNDATION. INC. 20-8096424 Page 5 Part VII-A Statements Regarding Activities (continued) 11a 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) X 11a b If "Yes," did the foundation have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in the attachment for line 11a? N/A 11b 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract? 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 14 The books are in care of ▶ RICHARD J. SALEWICZ Telephone no. > 317-634-4747Located at ► ONE AMERICAN SQUARE, SUITE 2600, INDIANAPOLIS, IN ZIP+4 ► 46282 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 Part 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, 1a During the year did the foundation (either directly or indirectly); Yes X No (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) Yes X No 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)? Yes X No (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 Yes X No termination of government service, if terminating within 90 days.) b 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 c 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 2007? Х 1c 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)): a At the end of tax year 2007, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2007? If "Yes," list the years

b 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

b If "Yes," did it have excess business holdings in 2007 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2007.)

had not been removed from jeopardy before the first day of the tax year beginning in 2007?

Form **990-PF** (2007)

X

N/A

N/A

Yes X No

2b

3ь

4a

statement - see instructions.)

during the year?

| Part VII-B   Statements Regarding Activities for Which I   | Form 4720 May Be I                 | Required (contin            | ued)   |          |                              |  |  |  |
|--|------------------------------------|-----------------------------|--|----------|------------------------------|--|--|--|
| 5a During the year did the foundation pay or incur any amount to:  |                                    |                             |  |          |                              |  |  |  |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  |                                    |                             |  |          |                              |  |  |  |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,  |                                    |                             |  |          |                              |  |  |  |
| any voter registration drive?  |                                    |                             |  |          |                              |  |  |  |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?   |                                    |                             |  |          |                              |  |  |  |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section  |                                    |                             |  |          |                              |  |  |  |
| 509(a)(1), (2), or (3), or section 4940(d)(2)?   |                                    | Ye                          | es 🗶 No  |          |                              |  |  |  |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,  | or educational purposes, or        | for                         |  |          |                              |  |  |  |
| the prevention of cruelty to children or animals?  |                                    |                             |  |          |                              |  |  |  |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und   | der the exceptions described       | ın Regulations              |  |          |                              |  |  |  |
| section 53.4945 or in a current notice regarding disaster assistance (see instru   | ctions)?                           |                             | N/A  | 5b       |                              |  |  |  |
| Organizations relying on a current notice regarding disaster assistance check h  | ere .                              |                             |  |          |                              |  |  |  |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi   | rom the tax because it mainta      | ined                        |  |          |                              |  |  |  |
| expenditure responsibility for the grant?  | . N                                | I/A 📖 Ye                    | es L No  |          |                              |  |  |  |
| If "Yes," attach the statement required by Regulations section 53.494  | 5-5(d).                            |                             |  |          |                              |  |  |  |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to  | pay premiums on                    |                             |  |          |                              |  |  |  |
| a personal benefit contract?   |                                    | Ye                          | es X No  |          |                              |  |  |  |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | ersonal benefit contract?          | •                           |  | 6b       | X                            |  |  |  |
| If you answered "Yes" to 6b, also file Form 8870.  |                                    |                             |  |          |                              |  |  |  |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s   |                                    | . L Ye                      | es X No  |          | -                            |  |  |  |
| b If yes, did the foundation receive any proceeds or have any net income attribut  |                                    |                             |  | 7b       |                              |  |  |  |
| Part VIII Information About Officers, Directors, Trust   | ees, Foundation Ma                 | inagers, Highly             | y  |          |                              |  |  |  |
| List all officers, directors, trustees, foundation managers and their  | compensation                       |                             |  |          |                              |  |  |  |
| Elst an officers, anectors, a astees, roundation managers and their  | (b) Title, and average             | (c) Compensation            | (d) Contributions to employee benefit plans                    | (e) Ex   | nense                        |  |  |  |
| (a) Name and address   | hours per week devoted to position | (If not paid,<br>enter -0-) | employee benefit plans<br>and deferred<br>compensation         | accour   | opense<br>ot, other<br>ances |  |  |  |
| ALLAN C. BIR   | DIRECTOR                           | Ciner o j                   | compensation   | 4        | 411000                       |  |  |  |
| 14378 CYPRESS ISLAND CIRCLE  |                                    |                             |  |          |                              |  |  |  |
| PALM BEACH GARDENS, FL 33410   | 0.00                               | 0.                          | 0.   |          | 0.                           |  |  |  |
|  | DIRECTOR                           |                             |  |          |                              |  |  |  |
| 10437 BISHOP CIRCLE  |                                    |                             |  |          |                              |  |  |  |
| CARMEL, IN 46032   | 0.00                               | 0.                          | 0.   |          | 0.                           |  |  |  |
| RICHARD J. SALEWICZ  | DIRECTOR                           |                             |  |          |                              |  |  |  |
| ONE AMERICAN SQUARE, SUITE 2600  |                                    |                             |  |          |                              |  |  |  |
| INDIANAPOLIS, IN 46282   | 0.00                               | 0.                          | 0.   |          | 0.                           |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  | <u> </u>                           |                             |  | <u> </u> |                              |  |  |  |
| 2 Compensation of five highest-paid employees (other than those inc  | (b) Title and average              | enter "NONE."               | (d) Contributions to   | (0) 5)   | manca                        |  |  |  |
| (a) Name and address of each employee paid more than \$50,000  | ` hours per week                   | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred | accour   | pense<br>it, other           |  |  |  |
| NAME OF THE PROPERTY OF THE PR | devoted to position                |                             | compensation   | allow    | ances                        |  |  |  |
| NONE   |                                    |                             |  | [        |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    | <u> </u>                    |  |          |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
|  |                                    | 1                           |  | l        |                              |  |  |  |
|  |                                    |                             |  |          |                              |  |  |  |
| Total number of other employees paid over \$50,000   |                                    |                             | <b>.</b>   | <u> </u> | 0                            |  |  |  |

N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions.

FOUNDATION, INC.

20-8096424

Page 8

| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four   | ndations  | , see instructions.)         |
|----|---|-----------|------------------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:   |           | <del>-</del>                 |
| а  | Average monthly fair market value of securities   | 1a        | 246,603.                     |
| b  | Average of monthly cash balances  | 1b        | 118,914.                     |
| c  |   | 1c        |                              |
| d  | Total (add lines 1a, b, and c)  | 1d        | 365,517.                     |
| е  | 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         | 365,517.                     |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4         | 5,483.                       |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5         | 360,034.                     |
| 6_ | Minimum investment return. Enter 5% of line 5   | 6         | 18,002.                      |
| P  | art XI 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 certain | -                            |
| 1  | Minimum investment return from Part X, line 6   | 1         | 18,002.                      |
| 2a | Tax on investment income for 2007 from Part VI, line 5  |           |                              |
| b  | Income tax for 2007. (This does not include the tax from Part VI.)  |           |                              |
| C  | Add lines 2a and 2b   | 2c        | 391.                         |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   | 3         | 17,611.                      |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4         | 0.                           |
| 5  | Add lines 3 and 4   | 5         | 17,611.                      |
| 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         | 17,611.                      |
| P  | art XII Qualifying Distributions (see instructions)   |           |                              |
| 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        | 0.                           |
| b  | 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        |                              |
| b  | Cash distribution test (attach the required schedule)   | 3b        |                              |
| 4  | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4  | 4         | 0.                           |
| 5  | 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         | 0.                           |
|    | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the   | foundat   | on qualifies for the section |
|    | 4940(e) reduction of tax in those years.  |           |                              |

| Part XIII Undistributed Income (see  | nstructions)  |                                       |             |                           |
|--|---------------|---------------------------------------|-------------|---------------------------|
|  | (a)<br>Corpus | (b)<br>Years prior to 2006            | (c)<br>2006 | ( <b>d</b> )<br>2007      |
| 1 Distributable amount for 2007 from Part XI,  |               | · · · · · · · · · · · · · · · · · · · |             |                           |
| line 7   |               |                                       |             | <u>1</u> 7,611.           |
| 2 Undistributed income, if any, as of the end of 2008  |               |                                       |             |                           |
| a Enter amount for 2006 only   |               |                                       | 0.          |                           |
| b Total for prior years:   |               |                                       |             | -                         |
| ,,   |               | 0.                                    |             |                           |
| 3 Excess distributions carryover, if any, to 2007:   |               |                                       |             |                           |
| <b>a</b> From 2002   |               |                                       |             |                           |
| <b>b</b> From 2003   |               |                                       |             |                           |
| c From 2004  |               |                                       |             |                           |
| d From 2005  |               |                                       |             |                           |
| e From 2006  |               |                                       |             |                           |
| f Total of lines 3a through e  | 0.            |                                       |             | <del></del>               |
| 4 Qualifying distributions for 2007 from  Part XII, line 4: ▶ \$ 0 .   |               |                                       |             |                           |
| a Applied to 2006, but not more than line 2a   |               |                                       | 0.          |                           |
| <b>b</b> Applied to undistributed income of prior  |               |                                       |             |                           |
| years (Election required - see instructions)   |               | 0.                                    |             |                           |
| c Treated as distributions out of corpus   |               |                                       |             |                           |
| (Election required - see instructions)   | 0.            |                                       |             |                           |
| d Applied to 2007 distributable amount   |               |                                       |             | 0.                        |
| e Remaining amount distributed out of corpus   | 0.            |                                       |             |                           |
| 5 Excess distributions carryover applied to 2007 (If an amount appears in column (d), the same amount must be shown in column (a).)  | 0.            |                                       |             | 0.                        |
| 6 Enter the net total of each column as indicated below:   |               |                                       |             |                           |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 0.            |                                       |             |                           |
| <b>b</b> Prior years' undistributed income. Subtract   |               |                                       |             | <del>_</del>              |
| 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 2006. Subtract line   |               |                                       |             |                           |
| 4a from line 2a. Taxable amount - see instr.   |               |                                       | 0.          |                           |
| f Undistributed income for 2007. Subtract  |               |                                       |             |                           |
| lines 4d and 5 from line 1. This amount must   |               |                                       |             |                           |
| be distributed in 2008   |               |                                       |             | 17,611.                   |
| 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 2002   |               |                                       |             |                           |
| not applied on line 5 or line 7  | 0.            |                                       |             |                           |
| 9 Excess distributions carryover to 2008.  | 0.            |                                       |             |                           |
| Subtract lines 7 and 8 from line 6a  |               | -                                     |             |                           |
| O Analysis of line 9:  |               |                                       |             |                           |
| a Excess from 2003   | _             |                                       | -           |                           |
| c Excess from 2005   |               |                                       |             |                           |
| d Excess from 2006   |               | -                                     |             |                           |
| e Excess from 2007   |               |                                       |             |                           |
| 6 EV0033 II AIII EAA   |               |                                       |             | Form <b>QQD-PF</b> (2007) |

|   | ION, INC.                             |                             |                             | 20-809                       | 96424 Page 10 |
|---|---------------------------------------|-----------------------------|-----------------------------|------------------------------|---------------|
| Part XIV Private Operating F  | · · · · · · · · · · · · · · · · · · · |                             | -A, question 9)             | <u>N/A</u>                   | ·             |
| 1 a If the foundation has received a ruling o   |                                       |                             |                             |                              |               |
| foundation, and the ruling is effective fo  |                                       |                             | ▶ └                         |                              |               |
| <b>b</b> Check box to indicate whether the found  |                                       | ng foundation described i   |                             | 4942(j)(3) or 494            | 42(j)(5)      |
| 2 a Enter the lesser of the adjusted net  | Tax year                              |                             | Prior 3 years               | 1 411 2004                   |               |
| income from Part I or the minimum   | (a) 2007                              | (b) 2006                    | (c) 2005                    | (d) 2004                     | (e) Total     |
| investment return from Part X for   |                                       |                             |                             |                              |               |
| each year listed  |                                       |                             |                             |                              |               |
| <b>b</b> 85% of line 2a .   |                                       |                             |                             |                              |               |
| c Qualifying distributions from Part XII,   |                                       |                             |                             |                              |               |
| line 4 for each year listed   |                                       |                             |                             |                              |               |
| d Amounts included in line 2c not   |                                       |                             |                             |                              |               |
| used directly for active conduct of   |                                       |                             |                             |                              |               |
| exempt activities   |                                       | . <u> </u>                  |                             |                              | <del> </del>  |
| e Qualifying distributions made directly  |                                       |                             |                             |                              |               |
| for active conduct of exempt activities.  |                                       |                             |                             |                              |               |
| Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter:                     |                                       |                             |                             |                              |               |
| (1) Value of all assets (2) Value of assets qualifying  |                                       |                             |                             |                              |               |
| under section 4942(j)(3)(B)(i)  |                                       |                             |                             | -                            | <del></del>   |
| b "Endowment" alternative test - enter<br>2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed                     |                                       |                             |                             |                              |               |
| c "Support" alternative test - enter:   |                                       |                             |                             |                              |               |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |                                       |                             |                             |                              |               |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)                                      |                                       |                             |                             |                              |               |
| (3) Largest amount of support from  |                                       |                             |                             |                              |               |
| an exempt organization  |                                       |                             |                             |                              |               |
| (4) Gross investment income   |                                       |                             |                             |                              |               |
| Part XV Supplementary Info  |                                       |                             | if the foundation           | had \$5,000 or mo            | re in assets  |
| at any time during t  | he year-see the i                     | nstructions.)               |                             |                              |               |
| 1 Information Regarding Foundation  | n Managers:                           |                             |                             |                              |               |
| a List any managers of the foundation wh<br>year (but only if they have contributed in  |                                       |                             | ributions received by the   | foundation before the close  | of any tax    |
| ALLAN C. BIR  |                                       | <del></del> -               |                             |                              |               |
| b List any managers of the foundation wh  | o own 10% or more of the              | e stock of a corporation (  | or an equally large portion | on of the ownership of a par | tnership or   |
| other entity) of which the foundation has<br><b>NONE</b>  | s a 10% or greater interes            | iL                          |                             |                              |               |
| 2 Information Regarding Contributi  | on, Grant, Gift, Loan,                | Scholarship, etc., Pr       | ograms:                     |                              |               |
| Check here ► X if the foundation o<br>the foundation makes gifts, grants, etc.  | nly makes contributions t             | o preselected charitable (  | organizations and does r    |                              |               |
| a The name, address, and telephone num  | per of the person to whom             | n applications should be    | addressed:                  |                              | <del></del>   |
| <b>b</b> The form in which applications should b  | e submitted and informat              | ion and materials they sh   | ould include:               |                              |               |
| c Any submission deadlines:   |                                       |                             |                             |                              |               |
| d Any restrictions or limitations on awards   | s, such as by geographica             | l areas, charitable fields, | kınds of institutions, or o | other factors:               |               |

FOUNDATION, INC.

20-8096424 Page 11

| Part XV Supplementary Informati<br>Grants and Contributions Paid During th |   |                                      |                                  |          |
|--|---|--------------------------------------|----------------------------------|----------|
| Recipient  | If recipient is an individual.  |                                      |                                  |          |
| <del></del>  | show any relationship to  | Foundation status of                 | Purpose of grant or contribution | Amount   |
| Name and address (home or business)  | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation<br>status of<br>recipient | CONTRIBUTION                     | Amount   |
| Paid during the year   |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
| NONE   |   |                                      |                                  |          |
| -1021.2  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
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|  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
| Total  |   |                                      | . ▶ 3a                           |          |
| Approved for future payment  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
| NONE   |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
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|  |   |                                      |                                  |          |
|  |   |                                      |                                  |          |
| Total  |   |                                      | <b>▶</b> 3b                      | m 990-PF |

FOUNDATION, INC.

20-8096424 Page 12

| Part XVI-A Analysis of Income-Produ  |  | ted business income | Evol   | ided by section 512, 513, or 514 |                                       |
|--|--|---------------------|--|----------------------------------|---------------------------------------|
| Enter gross amounts unless otherwise indicated.  | (a)<br>Business                              | (b) Amount          | (C)<br>Exclu-<br>sion                            | (d) Amount                       | (e) Related or exempt function income |
| 1 Program service revenue:   | code   | Amount              | code   | Amount                           |                                       |
| a  | -  |                     | <del> </del>                                     |                                  |                                       |
| ь  |  |                     | <del> </del>                                     |                                  |                                       |
| <u> </u>   | ı  |                     | ╂  |                                  |                                       |
| d  | -  |                     |  |                                  |                                       |
| e  | -  |                     |  |                                  |                                       |
| Topo and contracts from any annual accounts  | -  |                     | +-   |                                  |                                       |
| <ul> <li>g Fees and contracts from government agencies</li> <li>2 Membership dues and assessments</li> </ul> |  |                     | <del> </del>                                     | <u>-</u>                         | <del></del>                           |
| 3 Interest on savings and temporary cash   | -  |                     | -  |                                  | , _, _, _, _, _, _, _, _, _, _,       |
| investments  |  |                     |  |                                  |                                       |
| 4 Dividends and interest from securities   |  | -                   | <del> </del>                                     | -                                | 9,068.                                |
| 5 Net rental income or (loss) from real estate:  |  |                     | <del> </del>                                     |                                  | 2,000.                                |
| a Debt-financed property   |  | -                   | <del>                                     </del> |                                  |                                       |
| b Not debt-financed property   | -  |                     | -  |                                  |                                       |
| 6 Net rental income or (loss) from personal  |  |                     | <u> </u>   |                                  |                                       |
| property .   |  |                     | ]  |                                  |                                       |
| 7 Other investment income  | •  |                     | ļ  |                                  |                                       |
| 8 Gain or (loss) from sales of assets other  |  | <del> </del> -      | 1  |                                  |                                       |
| than inventory   | 1  |                     |  |                                  | 13,503.                               |
| 9 Net income or (loss) from special events   |  | -                   |  |                                  |                                       |
| 10 Gross profit or (loss) from sales of inventory  |  |                     |  |                                  |                                       |
| 11 Other revenue:  |  |                     |  |                                  | <del></del>                           |
|  |  |                     |  |                                  |                                       |
| ab   | •  |                     | <u> </u>   |                                  | <u> </u>                              |
| c  | -  |                     | <del> </del> -                                   |                                  |                                       |
| d  | i i  |                     | <u> </u>   |                                  |                                       |
| 2  |  |                     |  |                                  |                                       |
| 12 Subtotal. Add columns (b), (d), and (e)   |  | 0.                  | <u> </u>   | 0.                               | 22,571.                               |
| 13 Total. Add line 12, columns (b), (d), and (e)   | <u>-                                    </u> |                     | -  | 13                               |                                       |
| (See worksheet in line 13 instructions to verify calculations.)  |  | •                   |  | _                                |                                       |
| Part XVI-B Relationship of Activities  | to the Acc                                   | omplishment of E    | kemp   | t Purposes                       |                                       |
| Line No. Explain below how each activity for which inc   |  |                     | contri   | outed importantly to the accom   | pplishment of                         |
|  |  |                     | ידיד מי  | OF TATTECHMENT                   | m.c                                   |
| 4 &8 THE INCOME FROM THESE HELD FOR CHARITABLE PU  |  |                     |  |                                  |                                       |
| THE PURPOSE OF THE ORG   |  |                     |  |                                  |                                       |
| GUERIN BY AWARDING SCH   |  |                     | 10   | BOPPORT BI III                   | EODOKE                                |
| GOERIN DI AMARDING SCH   | IODAKSHI                                     | <u>. r. p</u>       |  |                                  |                                       |
|  |  |                     |  |                                  |                                       |
|  |  |                     |  |                                  |                                       |
|  |  |                     | -  |                                  |                                       |
|  |  |                     |  |                                  |                                       |
|  | <del> </del>                                 |                     |  |                                  |                                       |
|  |  | ·· <del>···</del> · |  |                                  | <del></del>                           |
|  |  |                     |  |                                  |                                       |
|  |  |                     | •  | · •                              | <del> </del>                          |
|  |  | <del></del>         | -  |                                  |                                       |
|  | <del></del>                                  |                     | ·····  | <del></del>                      |                                       |
|  |  |                     |  | <del></del>                      |                                       |
|  |  | <del></del>         |  |                                  |                                       |
|  |  | : <u>-</u>          |  |                                  |                                       |

723621 02-20-08

| _         |                                |   | ATION, INC.                    |  |   | 096424               |  | ge 13 |
|-----------|--------------------------------|---|--------------------------------|--|---|----------------------|--|-------|
| Р         | art X                          | /II Information R<br>Exempt Organ       |                                | ers To and Transactions a                  | nd Relationships With None                      | charitable           | e  |       |
| 1         | Did th                         | e organization directly or ind          | rectly engage in any of th     | ne following with any other organization   | described in section 501(c) of                  |                      | Yes  | No    |
|           |                                |   |                                | section 527, relating to political organia |   |                      |  |       |
| a         | Trans                          | fers from the reporting found           | ation to a noncharitable e     | exempt organization of:                    |   |                      | i  |       |
|           | (1) (                          | Cash                                    |                                |  |   | 1a(1)                |  | Х     |
|           |                                | Other assets                            |                                |  |   | 1a(2)                |  | X     |
| b         |                                | transactions:                           |                                |  |   |                      |  |       |
|           | (1) 8                          | Sales of assets to a noncharita         | ible exempt organization       |  |   | 1b(1)                |  | X     |
|           | ٠,                             | Purchases of assets from a no           |                                | nization                                   |   | 15(2)                |  | X     |
|           |                                | Rental of facilities, equipment,        | . •                            |  |   | 1b(3)                |  | Х     |
|           | ٠.                             | Reimbursement arrangements              | <u>-</u>                       |  |   | 1b(4)                |  | X     |
|           |                                | oans or loan guarantees                 |                                |  |   | 1b(5)                |  | X     |
|           | ٠.                             | Performance of services or mi           | embershin or fundraising       | solicitations                              | •   | 1b(6)                |  | X     |
|           |                                | ng of facilities, equipment, ma         | -                              |  | •   | 1c                   | <del>                                     </del> | X     |
|           |                                | -                                       |                                |  | ays show the fair market value of the go        |                      | L  |       |
| ·         |                                |   |                                |  | in any transaction or sharing arrangem          |                      | 3613,  |       |
|           |                                | nn (d) the value of the goods,          |                                |  | in any dansaction of sharing arrangem           | SIIG SHOW III        |  |       |
| /a\       | Line no                        | (b) Amount involved                     |                                | ncharitable exempt organization            | (d) Description of transfers, transactions      | and sharps or        |  |       |
| (4)       | LING NO                        | (B) Amount involved                     | (c) Name of nor                |  | (0) Description of transfers, transactions      | , and snaring a      | rangeme  | กเร   |
|           |                                |   |                                | N/A  |   |                      | _  |       |
|           |                                |   |                                |  | -   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  | <u> </u>  |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  | <u> </u>  |                      |  |       |
|           |                                |   |                                |  |   | <del> </del>         |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  | -     |
|           |                                |   |                                |  |   |                      |  | -     |
| 2 a       | is the                         | foundation directly or indirec          | tly affiliated with, or relati | ed to, one or more tax-exempt organiza     | ations described                                |                      |  |       |
|           |                                | tion 501(c) of the Code (othe           | -                              |  |   | Yes                  | X  | No    |
| b         |                                | s," complete the following sch          |                                |  | •   |                      |  |       |
|           |                                | (a) Name of or                          |                                | (b) Type of organization                   | (c) Description of rela                         | tionship             |  |       |
|           |                                | N/A                                     |                                |  |   | <del></del>          |  |       |
|           |                                |   |                                |  |   |                      |  |       |
|           |                                |   |                                |  |   |                      |  |       |
| _         |                                |   | · · · ·                        |  |   |                      |  |       |
| -         |                                |   |                                |  | <del> </del>                                    |                      | -  |       |
|           | Under p                        | enalties of perjury, I declare that I I | nave examined this return, inc | duding accompanying schedules and stateme  | nts, and to the best of my knowledge and belief | f, it is true, corre |  |       |
|           | -                              | nplete Declaration of preparer (other   |                                |  | aa aay kaawladaa                                |                      | •  |       |
|           | . (                            |   | ) d                            |  |   |                      |  |       |
| 5         | $\frac{1}{8}$                  | gnature of officer or trustee           |                                | D  |   |                      |  |       |
| 윈         | <b>y</b> 01                    |   | <u> </u>                       | V  |   |                      |  |       |
| Sign Here | ج °,                           | Preparer's signature                    | 1-ms                           | -cen                                       |   |                      |  |       |
| ଊ         | aid<br>arer's<br>Only          | 400                                     | X X                            | OVID LLC                                   |   |                      |  |       |
|           | Paid<br>Preparer's<br>Use Only | Firm's name (or yours LONE              |                                | ROUP, LLC                                  |   |                      |  |       |
|           | چَ                             | if self-employed),                      | AMERICAN SC                    | UARE, STE                                  |   |                      |  |       |

d self-employed), address, and ZIP code INDIANAPOLIS, IN 46282

#### Schedule B

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

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No 1545-0047

Name of organization

BIR FAMILY ST. THEODORE GUERIN FOUNDATION, INC.

Employer identification number

20-8<u>096424</u>

Organization type (check one): Filers of: Section: Form 990 or 990-EZ \_\_\_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule-see instructions.) General Rule-For organizations 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 Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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) Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but

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

requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

they must check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing

Page 1 of 1 of Part I Employer identification number

Name of organization BIR FAMILY ST. THEODORE GUERIN FOUNDATION, INC.

20-8096424

| Part I | Contributors | (See Specific | Instructions.) |
|--------|--------------|---------------|----------------|
|--------|--------------|---------------|----------------|

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Aggregate contributions    | (d) Type of contribution   |
|------------|--|--------------------------------|--|
| 1          | ALLAN & CYNTHIA BIR  14378 CYPRESS ISLAND CIRCLE  PALM BEACH GARDENS, FL 33410 | \$ 300,850.                    | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Aggregate contributions    | (d)<br>Type of contribution  |
|            |  | \$                             | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>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)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Aggregate contributions    | (d)<br>Type of contribution  |
|            |  | \$                             | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c)<br>Aggregate contributions | (d)<br>Type of contribution  |
|            |  | \$                             | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4  | (c) Aggregate contributions    | (d)<br>Type of contribution  |
|            |  | \$                             | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)  |

| COLUMBIA MARSICO 21ST       294.       51.         COLUMBIA REAL ESTATE       2,469.       2,414.         EXCELSIOR VALUE AND       270.       138.         FIRST EAGLE GLOBAL       3,581.       2,763.         METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.   | 1,00<br>2,00<br>1,00<br>1,50<br>6,00<br>1,50<br>6,00                  | 14462531130445   |
|---|---|--|
| ARTISAN INTL FUND  BLACKROCK INTERNATIONAL  COLUMBIA MARSICO 21ST  COLUMBIA REAL ESTATE  EXCELSIOR VALUE AND  FIRST EAGLE GLOBAL  METROPOLITAN WEST HIGH  OAKMARK INTL FD CLASS 1  PIONEER CULLEN VALUE  PIONEER HIGH YIELD FUND  SCH ADV CASH RESRV PREM  SCH ADV CASH RESRV PREM  SCHWAB VALUE ADVANTAGE  SELECTED AMERICAN SHARES  THIRD AVENUE VALUE FUND  1,602.  2,042.  2,042.  2,042.  51.  2,469.  2,414.  270.  138.  2,763.  1,511.  0.  1,511.  1,511.  0.  1,623.  4,623.  72.  0.  344.   | 3,<br>1,00<br>2,<br>11,81<br>1,51<br>6,<br>4,<br>8,<br>7,<br>2!<br>31 | 34<br>36<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31           |
| BLACKROCK INTERNATIONAL       3,103.       2,042.         COLUMBIA MARSICO 21ST       294.       51.         COLUMBIA REAL ESTATE       2,469.       2,414.         EXCELSIOR VALUE AND       270.       138.         FIRST EAGLE GLOBAL       3,581.       2,763.         METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344. | 3,<br>1,00<br>2,<br>11,81<br>1,51<br>6,<br>4,<br>8,<br>7,<br>2!<br>31 | 34<br>36<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31<br>31           |
| COLUMBIA MARSICO 21ST       294.       51.         COLUMBIA REAL ESTATE       2,469.       2,414.         EXCELSIOR VALUE AND       270.       138.         FIRST EAGLE GLOBAL       3,581.       2,763.         METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.   | 24<br>1, 5;<br>6;<br>40<br>8, 7, 2;<br>3;                             | 24<br>5<br>3<br>1<br>1<br>3<br>1<br>3<br>1<br>4<br>4<br>5  |
| COLUMBIA REAL ESTATE       2,469.       2,414.         EXCELSIOR VALUE AND       270.       138.         FIRST EAGLE GLOBAL       3,581.       2,763.         METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.  | 1;<br>8;<br>1,5;<br>6;<br>4(<br>8,7,7,2)<br>3;                        | 5<br>3<br>1<br>1<br>3<br>1<br>3<br>1<br>4<br>4<br>2<br>5   |
| EXCELSIOR VALUE AND 270. 138.  FIRST EAGLE GLOBAL 3,581. 2,763.  METROPOLITAN WEST HIGH 1,511. 0.  OAKMARK INTL FD CLASS 1 5,262. 4,623.  PIONEER CULLEN VALUE 473. 72.  PIONEER HIGH YIELD FUND 1,804. 956.  SCH ADV CASH RESRV PREM 740. 0.  SCHWAB VALUE ADVANTAGE 257. 0.  SELECTED AMERICAN SHARES 318. 0.  THIRD AVENUE VALUE FUND 1,602. 344.  | 1;<br>8:<br>1,5:<br>6:<br>4:<br>8:<br>7:<br>2!                        | 3<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1<br>1 |
| FIRST EAGLE GLOBAL       3,581.       2,763.         METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.   | 8:<br>1,5:<br>6:<br>40<br>84<br>74<br>2!<br>3:                        | 1<br>1<br>3<br>1<br>0<br>4<br>4<br>2<br>5  |
| METROPOLITAN WEST HIGH       1,511.       0.         OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.  | 1,5:<br>6:<br>40<br>8,<br>7,<br>2!                                    | 1<br>3<br>10<br>4<br>4<br>25   |
| OAKMARK INTL FD CLASS 1       5,262.       4,623.         PIONEER CULLEN VALUE       473.       72.         PIONEER HIGH YIELD FUND       1,804.       956.         SCH ADV CASH RESRV PREM       740.       0.         SCHWAB VALUE ADVANTAGE       257.       0.         SELECTED AMERICAN SHARES       318.       0.         THIRD AVENUE VALUE FUND       1,602.       344.   | 6:<br>4(<br>84<br>74<br>2!<br>3:                                      | 3<br>10<br>14<br>14<br>15  |
| PIONEER HIGH YIELD FUND 1,804. 956.  SCH ADV CASH RESRV PREM 740. 0.  SCHWAB VALUE ADVANTAGE 257. 0.  SELECTED AMERICAN SHARES 318. 0.  THIRD AVENUE VALUE FUND 1,602. 344.   | 84<br>74<br>2!<br>3:  | 4<br>4<br>25   |
| SCH ADV CASH RESRV PREM 740. 0. SCHWAB VALUE ADVANTAGE 257. 0. SELECTED AMERICAN SHARES 318. 0. THIRD AVENUE VALUE FUND 1,602. 344.   | 74<br>2!<br>3:  | 4<br>25  |
| SCHWAB VALUE ADVANTAGE 257. 0. SELECTED AMERICAN SHARES 318. 0. THIRD AVENUE VALUE FUND 1,602. 344.   | 2!<br>3:  | 25   |
| SELECTED AMERICAN SHARES 318. 0. THIRD AVENUE VALUE FUND 1,602. 344.  | 3:  |  |
| THIRD AVENUE VALUE FUND 1,602. 344.   |   |  |
|   |   |  |
| TOTAL TO FM 990-PF, PART I, LN 4 25,069. 16,001.  | <u> </u>  | ; 5<br>—   |
|   | 9,0   | 6  |
| FORM 990-PF ACCOUNTING FEES STATEMEN  | NT  | _  |
| (A) (B) (C) (I<br>EXPENSES NET INVEST- ADJUSTED CHART<br>DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURI  |   |  |
| TAX PREPARATION FEE 850. 0.   |   | 1  |
| TO FORM 990-PF, PG 1, LN 16B 850. 0.  |   |  |
| FORM 990-PF OTHER PROFESSIONAL FEES STATEMEN  |   | _  |
|   |   |  |
|   |   |  |
|   | D)  |  |
| (A) (B) (C) (I EXPENSES NET INVEST- ADJUSTED CHARD DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURE  | ITA   |  |
| EXPENSES NET INVEST- ADJUSTED CHARI   | ITA   |  |

| FORM 990-PF                  | TAXES                        |                                  |              | STATEMENT            |    |
|------------------------------|------------------------------|----------------------------------|--------------|----------------------|----|
| DESCRIPTION                  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST<br>MENT INCOM  |              |                      |    |
| FOREIGN TAX PAID             | 134.                         | 13                               | 4.           |                      | 0. |
| TO FORM 990-PF, PG 1, LN 18  | 134.                         | 13                               | 4.           |                      | 0. |
| FORM 990-PF                  | CORPORAT                     | E STOCK                          |              | STATEMENT            | 5  |
| DESCRIPTION                  |                              | ;                                | BOOK VALUE   | FAIR MARKET<br>VALUE | •  |
| EQUITY FUNDS                 |                              |                                  | 242,133.     | 238,050.             |    |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10B                  | <u> </u>                         | 242,133.     | 238,05               | 0. |
| FORM 990-PF                  | CORPORAT                     | E BONDS                          |              | STATEMENT            | 6  |
| DESCRIPTION                  |                              | :                                | BOOK VALUE   | FAIR MARKET<br>VALUE | •  |
| BOND FUNDS                   |                              |                                  | 36,000.      | 34,40                | 0. |
| TOTAL TO FORM 990-PF, PART I | I, LINE 10C                  |                                  | 36,000.      | 34,40                | 0. |
|                              | F SUBSTANTIA<br>PART VII-A,  |                                  | ORS          | STATEMENT            | 7  |
| NAME OF CONTRIBUTOR          | ADDR                         | ESS                              |              |                      |    |
| ALLAN & CYNTHIA BIR          |                              | <br>8 CYPRESS IN<br>ENG EL 33/11 | SLAND CIRCLE | , PALM BEACH         |    |

GARDENS FL 33410

#### Form **8868**

(Rev April 2008)

Department of the Treasury

# Application for Extension of Time To cile an Exempt Organization Return

OMB No 1545-1709

| tilled the rice                           | wellde 3 separate application for each fetuni  |            | .1                           |                                    |
|---|--|------------|------------------------------|------------------------------------|
| If you Do not                             | are filing for an Automatic 3-Month Extension, complete only Part I and check this box<br>are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of t<br>complete Part II unless you have already been granted an automatic 3-month extension on a previous  |            |                              | <b>▶</b> [X]                       |
| Part                                      | Automatic 3-Month Extension of Time. Only submit original (no copies needed).  |            |                              |                                    |
| A corpo<br>Part I or                      | eration required to file Form 990-T and requesting an automatic 6-month extension - check this box and c<br>only   | omplete    |                              | <b>&gt;</b>                        |
|   | r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request<br>come tax returns.  | t an exter | nsion of time                |                                    |
| noted b<br>(not aut<br>you mu:            | nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic exter elow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electromatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or st submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic gov/efile and click on e-file for Chanties & Nonprofits | onically r | f (1) you war<br>ated Form 9 | nt the additional<br>90-T Instead. |
| Type or                                   | Name of Exempt Organization  | Emp        | lover identi                 | fication number                    |
| print                                     | BIR FAMILY ST. THEODORE GUERIN   | '          | •                            |                                    |
| -   | FOUNDATION, INC.   | 2          | 0-8096                       | 424                                |
| File by the<br>due date fo<br>filing your | Number, street, and room or suite no. If a P.O box, see instructions.  ONE AMERICAN SOLIARE SILTER 2600  |            |                              |                                    |
| return See                                |  |            |                              |                                    |
| Check t                                   | type of return to be filed (file a separate application for each return):  |            |                              |                                    |
| F <sub>C</sub>                            | orm 990 Form 990-T (corporation) Form  | 4720       |                              |                                    |
|   |  | 5227       |                              |                                    |
| $\overline{}$                             |  | 6069       |                              |                                    |
| =   |  | 8870       |                              |                                    |
|   | FOIII 1041A  | 10070      |                              |                                    |
|   | pooks are in the care of ▶ RICHARD J. SALEWICZ   |            |                              |                                    |
| Telep                                     | phone No. ► 317-634-4747 FAX No ►  |            |                              |                                    |
|   | organization does not have an office or place of business in the United States, check this box   |            |                              | ▶ □                                |
|   | s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  |            |                              |                                    |
| box 🕨                                     | . If it is for part of the group, check this box  and attach a list with the names and EINs of   | all memb   | ers the exte                 | nsion will cover.                  |
| <br>IS                                    | equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time to AUGUST 15, 2008 , to file the exempt organization return for the organization named for the organization's return for:    X   calendar year 2007   or   tax year beginning, and ending   |            | The extension                | on                                 |
| 2 If                                      | this tax year is for less than 12 months, check reason: Initial return Final return  |            | Change in a                  | ccounting period                   |
| 3a If                                     | this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any   |            |                              |                                    |
| _   | onrefundable credits, See instructions   | 3a         | \$                           | 0.                                 |
|   | this application is for Form 990-PF or 990-T, enter any refundable credits and estimated   |            |                              | •                                  |
| _   | x payments made Include any prior year overpayment allowed as a credit.  | 3b         | \$                           | 0.                                 |
|   | alance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,  |            |                              |                                    |
| de  | eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)   |            |                              | _                                  |
| Se  | ee instructions.   | 3c         | \$                           | 0.                                 |
| Caution                                   | . If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Foi   | rm 8879-l  | EO for paym                  | ent instructions.                  |
|   | For Privacy Act and Paperwork Reduction Act Notice, see Instructions.  |            |                              | 8868 (Rev. 4-2008)                 |
|   |  |            |                              |                                    |

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| For <u>m</u>                    | 8868 (Rev. 4-2008)   |                  |                             | Page 2             |
|---------------------------------|--|------------------|-----------------------------|--------------------|
|                                 | ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo   |                  |                             | . <b>▶</b> 🗓       |
|                                 | . Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed<br>ou are filing for an <b>Automatic 3-Month Extension, complete only Part I</b> (on page 1).  | Form             | 8868                        |                    |
| ز<br>aı ا                       |  | 000.0            |                             |                    |
| <u>. ai</u>                     | <del></del>  | 1 ——-            |                             |                    |
| Туре                            | or BIR FAMILY ST. THEODORE GUERIN  | Emp              | oyer identif                | ication number     |
| print                           | FOUNDATION, INC.   | 2                | 0-8096                      | 121                |
| File by                         | the Number and and agree of the D.O. have a second and the D.O. have a seco |                  |                             | 323                |
| extend<br>due da                | to for ONE AMERICAN SOUARE, SUITE 2600   | For IRS use only |                             |                    |
| filing th<br>return<br>instruct | See City, town or post office, state, and ZIP code. For a foreign address, see instructions.   |                  |                             |                    |
| Chec                            | k type of return to be filed (File a separate application for each return).  |                  |                             |                    |
|                                 | Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720  | = -              | orm 5227<br>orm 6069        | Form 8870          |
| STO                             | P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou   | sly file         | d Form 886                  | 8.                 |
| • Th                            | ne books are in the care of  RICHARD J. SALEWICZ   |                  |                             |                    |
| Τe                              | elephone No. ► 317-634-4747 FAX No ►   |                  |                             |                    |
| • If                            | the organization does not have an office or place of business in the United States, check this box   |                  |                             | <b>▶</b> □         |
| • If                            | this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th   | is is fo         | the whole g                 | roup, check this   |
| box                             | . If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all  | memb             | ers the exter               | sion is for        |
| 4                               | I request an additional 3-month extension of time until NOVEMBER 15, 2008.   |                  |                             |                    |
| 5                               | For calendar year 2007, or other tax year beginning, and ending_   |                  |                             |                    |
| 6                               | If this tax year is for less than 12 months, check reason Initial return Final return  |                  | Change in a                 | counting period    |
| 7                               | State in detail why you need the extension   |                  |                             |                    |
|                                 | ADDITIONAL TIME IS NEEDED TO RESEARCH A SECTION OF THE   | IN               | TERNAL                      | <u>REVENUE</u>     |
|                                 | CODE TO SEE IF IT IS APPLICABLE TO THE FOUNDATION.   |                  |                             | <del></del>        |
| <b>e</b> ∂                      | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any  |                  |                             | _                  |
|                                 | nonrefundable credits. See instructions  | 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 overpayment allowed as a credit and any amount paid  |                  |                             | •                  |
|                                 | previously with Form 8868.   | 8b_              |                             | 0.                 |
| C                               | Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit  |                  | _                           | 0                  |
|                                 | with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.   | 8c               |                             | 0.                 |
|                                 | Signature and Verification   | . b +            | التابي والمساورة            | an and halo f      |
| Under                           | r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to th<br>ue, correct, and <sub>(</sub> eogiplete, and that I am authorized to prepare this form.  | e dest o         |                             |                    |
| Signa                           | ture PA Title P CPA  | Date             | <b>►</b> <sup>ε</sup> /15/δ | <u>સ્</u>          |
|                                 | 700  |                  | Form                        | 3868 (Rev. 4-2008) |