Department of the Treasury

EXTENSION GRANTED TO 11/15/10

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 2009

or c	calendar year 2009, or tax year beginning		, and ending		
C	Check all that apply: Initial return	Initial return of a fo		Final return	
	Amended return	Address chang	je	Name change	
	the IRS Name of foundation			A Employer identification	number
	label. Herwise, MBI EDUCATIONAL FOUND.	ATION, INC.		54-2005704	
	print Number and street (or P O box number if mail is not del	•	Room/suite	B Telephone number	
or	type. 944 GLENWOOD STATION	LANE	204	(434)296-3	288
	Specific City or town, state, and ZIP code			C If exemption application is p	ending, check here
msu		22901		D 1. Foreign organizations	
<u> </u>	Check type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	mputation
<u></u>		Other taxable private founda		E If private foundation state	
	air market value of all assets at end of year J Accounting a Accounting Accou	ng method: LX Cash ner (specify)	Accrual	under section 507(b)(1)	• •
	\$ 176,275. (Part I, colu		asis.)	F If the foundation is in a (under section 507(b)(1)	
	art Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	116,900.			
	2 Check In the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,655.	1,655.	1,655.	STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				RECEIV
	b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10				K SUE!V
Revenue	b assets on line 6a				2
evel	7 Capital gain net income (from Part IV, line 2)		0.		S AUG 172
ř	8 Net short-term capital gain	<u>-</u>		0.	
	9 Income modifications Gross sales less returns				OGDEN.
	10a and allowances				
	b Less Cost of goods sold		··		
	c Gross profit or (loss) 11 Other income				
	11 Other income 12 Total. Add lines 1 through 11	118,555.	1,655.	1,655.	
╛	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
i	14 Other employee salaries and wages				
اير	15 Pension plans, employee benefits				
se	16a Legal fees STMT 2	165.	0.	0.	165
Expenses	b Accounting fees STMT 3	1,000.	0.	0.	1,000
ű					
ativ	17 Interest	33.	0.	0.	33
istr	19 Depreciation and depletion		J.	<u> </u>	
and Administrative	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
and	22 Printing and publications	3,848.	0.	0.	3,848
<u>g</u>	23 Other expenses STMT 5	77,604.	0.	0.	77,604
Operating	24 Total operating and administrative	92 650	•	^	00 (50
ö	expenses. Add lines 13 through 23	82,650. 10,000.	0.	0.	82,650 10,000
	25 Contributions, gifts, grants paid 26 Total expenses and disbursements.	10,000			10,000
	Add lines 24 and 25	92,650.	0.	O.	92,650
ᅥ	27 Subtract line 26 from line 12:				22,030
	Excess of revenue over expenses and disbursements	25,905.			
	b Net investment income (if negative, enter -0-)		1,655.		
	c Adjusted net income (if negative, enter -0-)			1,655.	

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		
	(must agree with end-of-year figure reported on prior year's return)	1	150,370.
2	Enter amount from Part I, line 27a	2	25,905.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	176,275.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	176,275.

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form **990-PF** (2009)

92,650<u>.</u>

See the Part VI instructions.

	990-RF (2009) MBI EDUCATIONAL FOUNDATION, IN	NC.	54-2	200570	1	Page 4
Par			948 -	see instr	uctio	<u>ns)</u>
	exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e					
	Date of ruling or determination letter: (attach copy of letter if nec					4 =
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► LX and enter 1%				<u>17.</u>
	of Part I, line 27b	(5,11, 40, 10,				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%					^
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	2			$\frac{0.}{17.}$
_	Add lines 1 and 2 Subtitle A (income) toy (demostre section 4047(a)(1) trusts and tayable foundations only 0	there enter (1)	3 4			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C Fax based on investment income . Subtract line 4 from line 3. If zero or less, enter -0-	miers enter -0-)	5		-	17.
	Credits/Payments:					<u> </u>
	2009 estimated tax payments and 2008 overpayment credited to 2009	6a				
	Exempt foreign organizations - tax withheld at source	6b				
	Fax paid with application for extension of time to file (Form 8868)	6c	1			
	Backup withholding erroneously withheld	6d	1			
	Fotal credits and payments. Add lines 6a through 6d	00	7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched	8			
		E STATEMENT 7	9			17.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	Refunded -	11			
	t VII-A Statements Regarding Activities		<u></u>			
1a [During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it participate or intervene	ın		Yes	No
a	any political campaign?			1a		X
b [Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions for definition)?		1b		X
1	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials publishe	d or			
(distributed by the foundation in connection with the activities.					
c [Did the foundation file Form 1120-POL for this year?			1c		X
d E	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:				
(1) On the foundation. > \$ 0 . (2) On foundation managers	s.▶\$0.				
e E	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax imposed on foundation				
r	managers. ► \$0 .					
2 ł	Has the foundation engaged in any activities that have not previously been reported to the II	RS?		2		X_
1	f "Yes," attach a detailed description of the activities.					
3 H	Has the foundation made any changes, not previously reported to the IRS, in its governing i	instrument, articles of incorporation, o)r			
	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			3	<u> </u>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the yea	ır?		4a		X
	if "Yes," has it filed a tax return on Form 990-T for this year?		N/		ļ	<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•		5	ļ	X
	If "Yes," attach the statement required by General Instruction T.				•	
-	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:			ł	
	By language in the governing instrument, or	described and described and				
•	By state legislation that effectively amends the governing instrument so that no mandator	y directions that conflict with the state	: iaw		J.,	
	remain in the governing instrument?			6_	X	
	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.	no.) .				
	Enter the states to which the foundation reports or with which it is registered (see instructio מסני	lis) -				
	VA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttornov Conoral (or decimate)				
	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A of each state as required by <i>General Instruction G? If "No," attach explanation</i>	morney deficial (of designate)		0.	x	
		ation 4042(i)(2) or 4042(i)(5) for eals	ndar	8b	├^	_
	is the foundation claiming status as a private operating foundation within the meaning of se year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," c		iiuai	9	x	
-	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	•	TMT	8 10	X	
IV L	any persons become eabstained continuetors during the tax year. It is, attach a schedu	no noung men names and addresses D		<u>~ 10</u>	1 42	

orm 990-PF (2009), MBI EDUCATIONAL FOUNDATI			<u>54-20057</u>	04	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	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))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,	ľ		
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t				
the prevention of cruelty to children or animals?	or educational purposes, or t		es X No	ŀ	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	lor the eventions described		5 LAL 140	1	
		in negulations	N/A	5b	
section 53.4945 or in a current notice regarding disaster assistance (see instru	·			อม	
Organizations relying on a current notice regarding disaster assistance check his				-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —		- 1	
expenditure responsibility for the grant?		I/A LY	es L No	ŀ	
If "Yes," attach the statement required by Regulations section 53.4945	• *				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				
a personal benefit contract?		Y ₀	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Yo	es 🗓 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attribute	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trusto	es, Foundation Ma	magers, Highl	y		
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their	compensation.				
4.14	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(€	e) Expense count, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	acc	llowances
				1	
SEE STATEMENT 10		0.	О.		0.
		1		1	
				1	
				╁──	
					
				┼	
				1	
		j		ĺ	
				<u> </u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	Τ,	\ F
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e	e) Expense count, other
1	devoted to position	(0)	compensation	a	llowances
NONE					
				<u> </u>	
				i	
		<u> </u>		1	
		1			
		<u> </u>			
				 	
· · · · · · · · · · · · · · · · · · ·					
*				<u> </u>	
otal number of other employees paid over \$50,000			▶		0

Form 990-RF (2009) MBI EDUCATIONAL FOUNDATION, INC. 54-	2005704 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	> 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE FOUNDATION DEVELOPS CLASSES FOR THE ADVANCED EDUCATION AND TRAINING IN MODULAR CONSTRUCTION METHODS AND TECHNIQUES.	
2	95,800.
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 THE FOUNDATION HAS NO PROGRAM-RELATED INVESTMENTS	
	0.
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.
<u> </u>	Form 990-PF (2009)

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	147,272.
C	Fair market value of all other assets	10	20,800.
đ	Total (add lines 1a, b, and c)	1d	168,072.
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	168,072.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,521.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	165,551.
6	Minimum investment return. Enter 5% of line 5	6	8,278.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	****
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Ρ	art XII Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	92,650. 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:		
a	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	92,650.
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	17.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	92,633.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ne section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

·	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		700.0 p. 10 1000		
line 7				0.
2 Undistributed income, if any, as of the end of 2009	-			
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ N/A				
a Applied to 2008, but not more than line 2a			0.	
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 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (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 Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		۸		
amount - see instructions	· · · · · · · · · · · · · · · · · · ·	0.		
e Undistributed income for 2008. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2009. Subtract	·==		0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
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 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:			· · · · · · · · · · · · · · · · · · ·	-
a Excess from 2005				
b Excess from 2006		ŀ		
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				
	-			5 000 PE (0000)

Form 990-PF (2009) MBI EDU Part XIV Private Operating Fo	CATIONAL FO	UNDATION, I	NC.	54-20	05704 Page 10
			A, question 9)		
1 a If the foundation has received a ruling or		,			
foundation, and the ruling is effective for		-	▶		
b Check box to indicate whether the found	ation is a private operatir	ig foundation described in	section X	4942(j)(3) or 49	42(<u>j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	. <u>.</u>	Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed	1,655.	810.	0.	0.	2,465.
b 85% of line 2a	1,407.	689.	0.	0.	2,095.
c Qualifying distributions from Part XII,	2/10/1	0031			2/0/30
line 4 for each year listed	92,650.	45,057.	8,322.	24,598.	170,627.
•	32,030.	40,007.	0,344.	24,330.	110,021.
d Amounts included in line 2c not					
used directly for active conduct of				0	•
exempt activities	0.	0.	0.	0.	<u> </u>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	92,650.	45,057.	8,322.	24,598.	170,627.
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets	176,275.	150,370.	85,317.	41,889.	453,851.
``	110,213.	130,370.	03,317.	41,000.	_ 433,031.
(2) Value of assets qualifying	176,275.	150,370.	85,317.	41,889.	<u>45</u> 3,851.
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter	1/0,2/5.	130,370.	65,317.	41,003.	433,631.
2/3 of minimum investment return					
shown in Part X, line 6 for each year					_
listed					0.
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)					0.
(2) Support from general public			-		
and 5 or more exempt					
organizations as provided in					^
section 4942(j)(3)(B)(iii)		-			0.
(3) Largest amount of support from					•
an exempt organization					0.
(4) Gross investment income					0.
Part XV Supplementary Info			f 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 who	have contributed more	than 2% of the total contr	butions received by the f	foundation before the clos	e of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(d)(2).)	-		-
NONE					
b List any managers of the foundation who	own 10% or more of the	e stock of a cornoration (or an equally large portion	n of the ownership of a na	rtnershin or
other entity) of which the foundation has			or an oquany large porter	n or and difficulty of a pa	anoromp of
NONE	-				
NONE	0 0 1	O-b-lbis	<u> </u>		
2 Information Regarding Contribution					
Check here ► X if the foundation of					
the foundation makes gifts, grants, etc. (mpiete items 2a, b, c, and	<u>0.</u>
a The name, address, and telephone number	per of the person to whor	n applications should be a	addressed:		
b The form in which applications should be	e submitted and informat	ion and materials they sh	ould include:		
		•			
c Any submission deadlines:					
2 . my sastimosion addimino.					
d Any restrictions or limitations on awards	such as by gengraphica	l areas, charitable fielde	kinds of institutions, or of	ther factors:	
u Any restrictions of inflications on awards	, ocom as by goograpino	ir ar sas, oriai itabic iiclus, i	minos of misulations, of the	mor lactors.	
200004 00 00 40					orm 990-PF (2009)
923601 02-02-10					-01111 330-E 1 . (2003)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year ANTHONY BONTRAGER NONE N/A SCHOLARSHIP 2,500. 602 WOODBRIDGE COURT MIDDLEBURY, IN 46540 BALL STATE UNIVERSITY NONE N/A SCHOLARSHIP 5,000. AB 402 MUNCIE, IN 47306 N/A NONE 2,500. TYLER STANLEY SCHOLARSHIP 1020 W. MARSH ST. MUNCIE, IN 47303 10,000. Total **b** Approved for future payment NONE Total 923611 02-02-10

inter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,655.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:				-	
a Debt-financed property					
b Not debt-financed property		. <u> </u>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			_		
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	ļ		\perp		.
b			\bot		
C	ļ		<u> </u>		
d	<u> </u>				
e				4 655	
12 Subtotal. Add columns (b), (d), and (e)	L).	1,655.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,655
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accom	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which inco	me is reported in c	olumn (e) of Part XV	I-A contributed	I importantly to the accomp	lishment of
the foundation's exempt purposes (other than					
			***************************************	-	

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
-	
923621 02-02-10	Form 990-PF (2009)

923622

signature

Firm's name (or yours

if self-employed), address, and ZIP code

VA

HANTZMON WIEBEL LLP,

818 E. JEFFERSON ST

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2009

54-2005704 EDUCATIONAL FOUNDATION, INC. Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rul Note. Only a section 501(c)(7), (8), or (10) organization (a) one of the confidence General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

-00	1 of	1 of Part
age	T 0	_ UF at

Name of organization

Employer identification number

TIPE DECEMBER 1 CONDITE TON 1 THE	\mathtt{MBI}	EDUCATIONAL	FOUNDATION,	INC.
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54-2005704

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ACTON MOBILE INDUSTRIES 8007A CORPORATE DRIVE BALTIMORE, MD 21236	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	WHITLEY MANUFACTURING CO., INC. 201 WEST FIRST ST. SOUTH WHITLEY, IN 46787	\$8,000.	Person X Payroll
(a) No.	Name, additions, and PIP RS USE	deregate contributions	(d) Type of contribution
	NOT FOR PUBLIC I	NSPECTION *	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF	OTHER E	OTHER EXPENSES			STATEMENT 5		
	(A) KPENSES ER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		(D) CHARITA PURPOS	
TRAINING AND PROGRAM DEVELOPMENT CREDIT CARD FEES DUES AND SUBSCRIPTIONS MISCELLANEOUS	76,541. 125. 800. 138.		0. 0. 0.		0. 0. 0.	8	41. 25. 00. 38.
TO FORM 990-PF, PG 1, LN 23	77,604.		0.		0.	77,6	04.
FORM 990-PF	OTHER	ASSETS			ST	ATEMENT	6
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FA	IR MARKE' VALUE	r
CONTRIBUTIONS HELD BY AFFILIATED COMPANY) <u></u>	11,050.		20,800.		20,8	00.
TO FORM 990-PF, PART II, LINE 1	5	11,050.		20,800.		20,8	00.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

ACTON MOBILE INDUSTRIES

8007A CORPORATE DR BALTIMORE, MD 21236

WHITLEY MANUFACTURING CO., INC. 201 WEST FIRST ST.

SOUTH WHITLEY, IN 46787

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	 VESTMENTS	STATEMENT 1
SOURCE				AMOUNT
UNION BANK AND TRUST - CD				1,655.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	1,655.
FORM 990-PF	LEGAL	FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	165.	0.	0	165.
TO FM 990-PF, PG 1, LN 16A	165.	0.	0	165.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,000.	0.	0	1,000.
TO FORM 990-PF, PG 1, LN 16B	1,000.	0.	0	1,000.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION		(B) NET INVEST- MENT INCOME		
LICENSES AND TAXES	33.	0.	0	. 33.
TO FORM 990-PF, PG 1, LN 18	33.	0.	0	33.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, I		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
RALPH M TAVARES 3324 SANTA FE ST RIVERBANK, CA 95367	DIRECTOR 1.00	0.	0.	0.
TOM HARDIMAN 944 GLENWOOD STATION LN., SUITE 204 CHARLOTTESVILLE, VA 22901	EXECUTIVE DIRE	ECTOR 0.	0.	0.
MICHAEL WILMOT 5812 ALLENDER RD. WHITE MARSH, MD 21162	DIRECTOR 1.00	0.	0.	0.
BARRY P GOSSETT 8007A CORPORATE DRIVE BALTIMORE, MD 21236	DIRECTOR 1.00	0.	0.	0.
MAURY TIERNAN 1908 N. ENTERPRISE ST. ORANGE, CA 92865	DIRECTOR 1.00	0.	0.	0.
JAMES GUTHRIE 1393 N. LUCAS ST. ROCHESTER, IN 46975	DIRECTOR 1.00	0.	0.	0.
LAURIE ROBERT 115 S. SERVICE RD. W. GRIMSBY, ONTARIO, CANADA L3M 4G3	DIRECTOR 1.00	0.	0.	0.
KELLY WILLIAMS 5000 CLAYTON RD. MARYVILLE, TN 37804	DIRECTOR 1.00	0.	0.	0.
GARY HUMPHREY 2995 S. HARDING ST. INDIANAPOLIS, IN 46225	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

990-PF

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS PART XVII, LINE 1, COLUMN (D)

STATEMENT

11

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

MODULAR BUILDING INSTITUTE

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

SHARED FACILITIES AND EXECUTIVE DIRECTOR

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 12

NAME OF AFFILIATED OR RELATED ORGANIZATION

MODULAR BUILDING INSTITUTE

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

SHARED FACILITIES AND EXECUTIVE DIRECTOR

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

Form **8868** (Rev. 4-2009)

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	► X
	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	
Part		
\ corp	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete
art I o	only	▶ □
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar Income tax returns.	extension of time
noted not au ou mi	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,
Type o		Employer identification number
	MBI EDUCATIONAL FOUNDATION, INC.	54-2005704
ile by th due date iling you	Number, street, and room or suite no. If a P.O. box, see instructions 944 GLENWOOD STATION LANE. NO. 204	
eturn S	66	
Check	type of return to be filed (file a separate application for each return)	
	Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 66 Form 990-PF Form 1041-A Form 88	227 069
Tele	THE FOUNDATION - 944 GLENWOOD STATION I be books are in the care of ► CHARLOTTESVILLE, VA 22901 pephone No. ► (434)296-3288 FAX No ►	ANE, NO. 204 -
e If th	ne organization does not have an office or place of business in the United States, check this box nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	
If the pox D	ne organization does not have an office or place of business in the United States, check this box	members the extension will cover.
If the poor I	ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the lift is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for. X calendar year 2009 or	members the extension will cover.
1 1 1 2 3a 1	ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If the lift is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto AUGUST 15, 2010 , to file the exempt organization return for the organization named a sist for the organization's return for. X calendar year 2009 or and ending , and ending	members the extension will cover.
1 1 2 3a b	ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitate and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitate and attach a list with the names and EINs of all I request an automatic 3-mont	members the extension will cover. If above. The extension Change in accounting period 3a \$ 0.
1 1 2 3a 1 b 1	ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitation that are also for the organization's return for. AUGUST 15, 2010 It is for the organization's return for. It is application is for less than 12 months, check reason. Initial return 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. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	members the extension will cover. If above. The extension Change in accounting period 3a \$ 0.
1 1 2 3a 1 c 1	ne organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitated I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitate and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unitate and attach a list with the names and EINs of all I request an automatic 3-mont	members the extension will cover. Il shove. The extension Change in accounting period 3a \$ 0.

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For Privacy Act and Paperwork Reduction Act Notice, see Instructions.