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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service (77)

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

2009

For calendar year 2009, or tax year beginning and ending Initial return Final return 6 Check all that apply: Initial Return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation Use the IRS label. Otherwise, LOWMAN FAMILY FOUNDATION, INC 20-2006281 Number and street (or P.O. box number if mail is not delivered to street address) Boom/autho print Telephone number or type. P O BOX 1699 606-329-0797 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. ASHLAND, KY 41105-1699 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Cash Accruat under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis.) **▶**\$ 1,468,427. under section 507(b)(1)(B), check here ... Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income Contributions, gifts, grants, etc., received 63,043. 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 77,734 77,734 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 68 Net gain or (loss) from sale of assets not on line 10 SCANNED MAR Gross sales price for all assets on line 6a 122,871. Capital gain net Income (from Part IV, line 2) Net short-term capital gain Income modifications 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 0 11 Other income ... <2,235 77.734 12 Total. Add lines 1 through 11 0 Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 2,637 0 STMT 2 0. **b** Accounting fees c Other professional fees 17 Interest 18 Taxes **电子通过** 19 Depreciation and depletion 2 3 2010 20 Occupancy 21 Travel, conferences, and meetings Printing and publications DEN UT 22 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 <u>2,637</u> 25 Contributions, gifts, grants paid 58,000 58,000 26 Total expenses and disbursements. 60.637 0 58.000 Add lines 24 and 25 THE REST 27 Subtract line 26 from line 12: <62,872 3 Excess of revenue over expenses and disbursements 734 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

Ciro

<u>Fo</u>	rm 99	0-PF (2009) LOWMAN FAMILY FOUNDATIO			2006281	Page 2
<u>;</u> ; •	7. 1	Balance Sheets /Abstract schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year		of year	
	_		(a) Book Value	(b) Book Value	(c) Fair Market V	
	1	Cash - non-interest-bearing	1.	1.		<u> </u>
	2	Savings and temporary cash investments	146,952.	<u>37,600.</u>	37,	<u>600.</u>
	3	Accounts receivable				
	1	Less: allowance for doubtful accounts				
	4	Pledges receivable				
	1	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	8	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges				
₹	10a	Investments - U.S. and state government obligations				
		Investments - corporate stock STMT 3	1,279,199.	1,325,679.	1,408,	366.
		Investments - corporate bonds				
		In vestments - land, buildings, and equipment basis				
	i	Less: accentulated depreciation				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	12	Investments - mortgage loans		·····		
	13	Investments - other STMT 4	131.467.	131,467.	22.	460.
	14	Land, buildings, and equipment basis ▶				
	''	Less: accumulated depreciation	MANAGEMENT OF STREET OF STREET	SHOP, GRANDA BANKAR TO DESCRIPTIONS	CONTRACTOR STREET, 7. C.	Herita Cin
	15	Other assets (describe		· · · · · · · · · · · · · · · · · · ·		
	"	Called Models (decourable P		· · · · · · · · · · · · · · · · · · ·		
	18	Total assets (to be completed by all filers)	1,557,619.	1,494,747.	1,468,	A27
_		Accounts payable and accrued expenses	1,337,013.	1,2/2,/2/		
						
_						
Liabilities		Deferred revenue				
░		Loans from officers, directors, trustees, and other disqualified persons		·		
Ë		Mortgages and other notes payable	—·			
	22	Outer nabilities (describe				
		Total Habilitates (add lines 47 through 00)		^		
_	123	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.		
S		and complete lines 24 through 26 and lines 30 and 31.	1 557 610	1 404 747		
ĕ	24	Unrestricted	1,557,619.	1,494,747.		
ala	25	Temporarily restricted			7 10 Miles	
g p	26	Permanently restricted				
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here				
2		and complete lines 27 through 31.				
ā	27	Capital stock, trust principal, or current funds	<u></u>			
SSB	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
ţ	29	Retained earnings, accumulated income, endowment, or other funds			P. 2. 激 通 数	
ž	30	Total net assets or fund balances	1,557,619.	1,494,747.		
						25.2
_	31	Total liabilities and net assets/fund balances	1,557,619.	1,494,747.	SERVICE SERVICES	
E	art	III Analysis of Changes in Net Assets or Fund E	Balances			
_	-					
1		net assets or fund balances at beginning of year - Part II, column (a), line	e 30			
	(mus	st agree with end-of-year figure reported on prior year's return)		<u>1</u>	1,557,	<u>619.</u>
2		r amount from Part I, line 27a	•	2		872.
3	Othe	r increases not included in line 2 (itemize)	•	3		0.
4		lines 1, 2, and 3		4	1,494,	747.
5		eases not included in line 2 (iternize)		5		0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6	1,494,	
_				· · · · · · · · · · · · · · · · · · ·	Form 990-PF	

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.

See the Part VI instructions.

UIII	SOUTH (COS) LOWMAN FAMILY FOUNDATION, INC.	<u> 44-</u>	AUUQ	401		<u> </u>
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	978	- 399 II	nsuu	cuon	18) 1047
12	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \subseteq \text{and enter "N/A" on line 1.} \)				, ie	4
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			d. 5 /		W.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	. संस्कृतस्थ	arasioni.	1,5	<u>. CC</u>
	of Part I, line 27b		1	- 1		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			I'M in		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_2_				<u></u>
3	Add lines 1 and 2	3			L, 5!	<u>55.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			<u> 0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	-1980AND1	(F2)******	1,5	<u>55.</u>
6	Credits/Payments:					
8	2009 estimated tax payments and 2008 overpayment credited to 2009					
	Exampt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
đ	Backup withholding erroneously withheld 64				弹性	數量
7	Total credits and payments. Add lines 6a through 6d	7				<u>53.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u>44.</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1,5	<u>46.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be; Credited to 2010 estimated tax	<u> 11</u>	L			
	Statements Regarding Activities			FATTET, AT		
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	
	any political campaign?			18		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			16	20.50 PM	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				整张
	distributed by the foundation in connection with the activities.			100		HEET.
	Did the foundation file Form 1120-POL for this year?			1c	917237d	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		
	(1) On the foundation. ▶ \$ O. (2) On foundation managers. ▶ \$ O.	-				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				170	
_	managers. ▶ \$ 0.				海 野	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	THE WATER	X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		200		
•-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	¦	 [/]	4a 4b		X
_		N	!/Æ .	4D		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	• •		0	45.0	X
					7	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or			7		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat 	a lave				100
	remain in the governing instrument?	5 1Q4V			11000	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?	٠		7	X	
′	if "Yes," complete Part II, col. (c), and Part XV.			300	e de la	4 24
۵.	Enter the states to which the foundation reports or with which it is registered (see instructions)				1 F. F.	100
oa	KY					
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1.5		
	of each state as required by General Instruction G? If "No," attach explanation			0.	X	٠
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	andar		8b	A	0.02.11
J	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	51IUdl		9		X
40	Did any parsons become substantial contributors during the tox year?			10		<u> </u>

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orn	1990-PF (2009) LOWMAN FAMILY FOUNDATION, INC Statements Regarding Activities (continued)	20-2006	281	Page 5
41	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1	
"	could be \$400 MANY IS Blood attach achadula face instructions		1	x _
19	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		11	 _
12	August 17, 20002		12	\mathbf{x}_{-}
18	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			X
10	Website address > N/A			<u> </u>
14		▶ 606-32	29-07	97
•	Located at ▶PO BOX 1699, ASHLAND, KY	ZIP+4 ▶41		
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check here	_		
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 	N/	À
П	Statements Regarding Activities for Which Form 4720 May Be Required	1,		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			es No
11	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	<u> </u>	Yes X No		
		Yes X No		
		Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
		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			
	termination of government service, if terminating within 90 days.)	Yes X No		
	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 20 of the instructions)?	N/A	1b	201210
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?		10	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
2	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begins	nina		
		Yes X No		
	If "Yes," list the years			
1	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorr	ect		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta			
	statement - see instructions.)	N/A	2b	
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	21,72		
	>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
		Yes X No		
1	b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule			
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	N/A	3b	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	/	4a	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	ose that	700	63 1 12 70
	had not been removed from jeonardy before the first day of the tay year beginning in 20002	voj mat	46	Y

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Form 990-PF (2009) LOWMAN FAMILY FOUNDATIO		Recuired (contin	20-20062	81 Page 6
5a During the year did the foundation pay or incur any amount to:	1.01111 47.25 1112, 150 1	Toquii oo (carar	000)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	ion 4945(e))?	□ Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955);				
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	85?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizat				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	1
(5) Provide for any purpose other than religious, charitable, scientific, literar	ry, or educational purposes, or t	for		
the prevention of cruelty to children or animals?			s 🔀 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u			異	
section 53.4945 or in a current notice regarding disaster assistance (see inst	tructions)?		N/A	54
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	n from the tax because it mainta	ined		
expenditure responsibility for the grant?		I/A 🔲 Yo	s 🔲 No 💈	
If "Yes," attach the statement required by Regulations section 53.49	945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, t				
a personal benefit contract?		Ye	ss 🗴 No 🧮	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?			66 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				
b If yes, did the foundation receive any proceeds or have any net income attrib				<u>76 </u>
Information About Officers, Directors, Trus Paid Employees, and Contractors	stees, Foundation Ma	anagers, Highl	y	
1 List all officers, directors, trustees, foundation managers and the	ir compensation.			· · · · · · · · · · · · · · · · · · ·
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	einployee benefit pizas and deferred compensation	account, other allowances
		1		
	7	İ	[,	
SEE STATEMENT 5		0.	0.	0.
		1		
	_	1		
	_			
2 Compensation of five highest-paid employees (other than those i	included on line 4). If none	antes BLONE I	<u> </u>	
2 Compensation of the highest-paid employees (other than those i	(b) Title, and average	, enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(cl) Contributions to employee benefit plans and deterred	account, other allowances
NONE	devoted to position	-	compensation	allowalices
NONE				•
	 	 	 	
	-		ţ	
		 	 	
	\dashv		1	
		+	 	
	i i			
	_			
	-			
Total number of other employees paid over \$50,000			. •	0

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Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC		
(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 Summary of Direct Charitable Activities		▶1 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the I, etc.	Expenses
1 N/A		
2		
3		
4		
Rait DCB Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 N/A	1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3		0.
		Form 990-PF (2009)

	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	indations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;		
	Average monthly fair market value of securities	1a	1,109,972.
	Average of monthly cash balances	1b	90,255.
C	Fair market value of all other assets		
	Total (add lines 1a, b, and c)	10	1,200,227.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
8	Subtract line 2 from line 1d	3	1,200,227.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18,003.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		1,182,224.
6_	Minimum investment return. Enter 5% of line 5	6	59,111.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	ind certain	
1	Minimum investment return from Part X, line 6	1	59,111.
22	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.)		
	Add lines 2a and 2b	2¢	1,555.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	57,556.
4	Recoveries of amounts treated as qualifying distributions		0.
5	Add lines 3 and 4		57,556.
6	Deduction from distributable amount (see instructions)	6	0.
<u></u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		57,556.
L	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charatable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>58,000.</u>
b	Program-related investments - total from Part IX-B	16	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	<u>. </u>
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	58,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,000.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	nualifies for	the section

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4940(e) reduction of tax in those years.

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,			THE REST OF THE PARTY OF	
line 7				57,556.
2 Undistributed Income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	The Marian Court of the Court o
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 68,376.				建物等
b From 2005 28,700.				
e From 2006 34,587.				
d From 2007				
e From 2008 8,607.				
f Total of lines 3a through e	140,270.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 58,000.				
a Applied to 2008, but not more than line 2a		en andere bereicht der eine Gestellt der Gestellt der Gestellt der Gestellt der Gestellt der Gestellt der Gest Bei der Gestellt de	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
e Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				<u>57,556.</u>
e Remaining amount distributed out of corpus	444.			
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:				
8 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	- 140,714.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			U.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010	25 675. 源原线3-44. 2 67			U.
7 Amounts treated as distributions out of			and the second s	
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004			Barrier Company	
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	68,376.		The state of the s	
9 Excess distributions carryover to 2010.	00,570.		1 mg 3: 12 oxist 5 o	-0 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Subtract lines 7 and 8 from line 6a	72,338.			
10 Analysis of line 9:	12,330.	4.4	20 Se 0 1 19 19 19 19 19 19 19 19 19 19 19 19 1	13 12 14 14 15 15
a Excess from 2005 28,700	300 300 300 300 300 300 300 300 300 300	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		المراجع
b Excess from 2006 34,587	The second of the	·		4
c Excess from 2007	18.7 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	• • • • • • • • • • • • • • • • • • • •		1,0
d Excess from 2008 8,607	The state of the s	· ·	11年。李明	
e Excess from 2009 444			and the second	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
			A CONTRACTOR OF THE PROPERTY O	Form 990-PF (2009)

Form 990-PF (2009) LOWMAN	FAMILY FOU	NDATION. IN	C		006281 Page 10
Private Operating Fo			 _	N/A	
1 a if the foundation has received a ruling or					
foundation, and the ruling is effective for				10101010	
b Check box to indicate whether the found		ting foundation described		4942(j)(3) or 4	1942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 2000	(0) 7-4-1
income from Part I or the minimum	(a) 2009	(b) 2008	(e) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed		_		-	
b 85% of line 2a					
e Qualifying distributions from Part XII,		1			
line 4 for each year listed		<u> </u>		 	
d Amounts included in line 2c not			ŀ		
used directly for active conduct of		!	-		
exempt activities					<u> </u>
e Qualifying distributions made directly		j		}	1
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
 "Assets" alternative test - enter; 					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					ļ
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year			}		
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					1
investment income (interest, dividends, rents, payments on					
securities loans (section					1
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	<u> </u>			1 1 1 2 2 2 2 2	<u></u>
Part XV Supplementary Info	rmation (Comp	lete this part only	y if the foundation	n had \$5,000 or n	nore in assets
at any time during t	ne year-see the	instructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh			ntributions received by the	e foundation before the c	lose of any tax
year (but only if they have contributed n	nore than \$5,000). (See	e section 507(a)(2).)			
SEE STATEMENT 6	 		. 		
b List any managers of the foundation wh			n (or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater inte	rest			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of	only makes contribution	is to preselected charitab	le organizations and does	not accept unsolicited re-	quests for funds. If
the foundation makes gifts, grants, etc.	`			complete items 2a, b, c, a	na a.
a The name, address, and telephone num	ber of the person to wh	nom applications should l	oe addressed:		
			·		
b The form in which applications should t	oe submitted and inforr	nation and materials they	should include:		
Any submission deadlesses					
c Any submission deadlines:					
d Any restrictions or limitations on award	s siich as hy nannranh	ucal areas charitable field	ls kinds of institutions or	other factors:	
vary resultations of minitations of award	o, agen da ny Acohighi	गण्या बाच्वर, जावास्वराट पहार	is, nitus of institutions, Of	onici iaciora.	

3 Grants and Contributions Paid During the 1 Recipient	If recipient is an individual,		A	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year		-		
		Į		
		[
		İ		
SEE STATEMENT 7	<u> </u>	<u> </u>	D 00	E9 000
Total	<u> </u>	<u> </u>	<u>▶ 3a</u>	58,000.
,,		ļ		
				Į
NONE				
		1		
		}		
Total			. > 3b	0.

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(4)
•	(a) Business	(b) Amount	(c) Excau- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		0000	7 - 1100	10.1000110
•	 		+		
	 		\vdash		
d					
•					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		
investments			1 -	55 504	
4 Dividends and interest from securities		en en en en en en en en en en en en en e	14	77,734.	
5 Net rental income or (loss) from real estate:		id vinalikalikalika ili.	edal E		Amarata Charles Afrai
a Debt-financed property b Not debt-financed property	\vdash	·	1-		
6 Net rental income or (loss) from personal			1-1		
property]				
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					
than inventory		·	18	<143,012.	<u> </u>
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory	 				
11 Other revenue:					
<u> </u>	 		┼		
b			+-		
d		<u>-</u>		-	
e					
12 Subtotal Add columns (b), (d), and (e)		0		<65,278.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13_	<65,278.
(See worksheet in line 13 instructions to verify calculations.)					
Relationship of Activities to					
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than			A contrit	outed importantly to the accor	mplishment of
					
					
				·	· — — — — — — — — — — — — — — — — — — —
		······································			
					
					

Form 990-PF (2009) LOWMAN FAMILY FOUNDATION, INC 20-2006281 Page 18 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No

	•	irectly engage in any of the followire:)(3) organizations) or in section 5	- · · · · -	• • •		e3 NO
	• •	lation to a noncharitable exempt or	=			X
						X
	er transactions:					A
		ahla avamnt organization				X
						X
						X
						X
						X
(8)	Performance of services or me	emberchin or fundraising solicitation		· · · · · · · · · · · · · · · · · · ·	1b(6)	X
						X
				ys show the fair market value of the goo		
				in any transaction or sharing arrangeme		٠,
		, other assets, or services received.				
) Line no		(c) Name of noncharitable		(d) Description of transfers, transactions,	and sharing erran	gements
	1-11	N/A	<u></u>			
						
	<u> </u>					
		†				
		<u> </u>				
		 				
				 		
	 	 				
	+					
	 	 	 	 		
	 	 				
	 	 		 		
		 		 		
		 		 		
	-	 				
	 					
• le f	ha faundation directly or indirec	ath affiliated with as soluted to an	or more toy evernet everning	tions dooswhad		
	-	ctly affiliated with, or related to, one	4: F070		Yes	X No
111 5	rooman 601/a) at the Cade (athe	31 UIAII SECUON SO I(C)(S)) OI III SEC	SUUTI 521 f		2941	L MO
	ection 501(c) of the Code (other	, ,				
	res," complete the following sch	hedule.				
	res," complete the following sch (a) Name of or	hedule.	(b) Type of organization	(c) Description of relat		
	res," complete the following sch	hedule.				
	res," complete the following sch (a) Name of or	hedule.				
	res," complete the following sch (a) Name of or	hedule.				
	res," complete the following sch (a) Name of or	hedule.				
b If "	/es," complete the following sch (a) Name of or N/A	nedule. ganization	(b) Type of organization	(c) Description of relat	tionship	
b If Y	(es, complete the following school (a) Name of or N/A	nedule. ganization	(b) Type of organization	(c) Description of relat	tionship	
b If Y	(es, complete the following school (a) Name of or N/A	nedule. ganization have examined this return, including acceptable.	(b) Type of organization	(c) Description of relat	tionship	
Under and c	(es," complete the following sch (a) Name of or N/A er penalties of persury, I declare that I complete Decideration of preparer (oth	nedule. ganization have examined this return, including acceptable.	(b) Type of organization ompanying schedules and statement all information of which preparer has all inform	(c) Description of relation of relation of relations (c) Description	tionship	
Under and c	(a) Name of or N/A repenalties of perainty I declare that I complete Decideration of preserver (other)	nedule. ganization have examined this return, including acceptable.	(b) Type of organization ompanying schedules and statement all information of which preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement of the preparer ha	(c) Description of relations of relations of relations of relations of the description of relations of the description of relations of the description of relations of the description of relations of the description of relations of relations of the description of relations of re	tionship	
Under and c	r penalties of pentiny I declare that I complete Declaretion of preparer (other preparer) and the preparer of	nedule. ganization have examined this return, including acceptable.	(b) Type of organization ompanying schedules and statement all information of which preparer has all inform	(c) Description of relations of relations and to the best of my knowledge and belief as any knowledge Title Check if Self-	tionship	
Under and c	r penalties of pentiny I declare that I complete Declaretion of preparer (other preparer) and the preparer of	have examined this return, including according than taxpayer or fidudary) is based or	(b) Type of organization ompanying schedules and statement all information of which preparer had been been been been been been been bee	(c) Description of relations of relations and to the best of my knowledge and belief as any knowledge Title Title Check if self-employed	tionship	
Under and c	r penalties of pentiny I declare that I complete Declaretion of preparer (other preparer) and the preparer of	have examined this return, including according that taxpayer or fiduciary) is based or first than taxpayer. The control of the	(b) Type of organization ompanying schedules and statement all information of which preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement as a statement of the preparer had been statement of the preparer ha	(c) Description of relations of relations and to the best of my knowledge and belief as any knowledge Title te -7-/0 Check if self-employed	tionship	
Under and c	r penalties of persury. I declare that I compute Decideration of preparer (other signature of officer or trustee Preparer;'s signature of officer or trustee Run's name (or yours of self-employed). P. O.	have examined this return, including accept than taxpayer or fidulary) is based or first than taxpayer.	(b) Type of organization ompanying schedules and statement all information of which preparer had been partially as the property of the proper	(c) Description of relationship (c) Description of relationshi	tionship	g number

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

2009

Employer identification number

LOWMAN FAMILY FOUNDATION, INC 20-2006281 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 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 Vill, 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 in the heading 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 Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

LOWMAN FAMILY FOUNDATION. INC

20-2006281

111	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	B.B. & JOANNE LOWMAN 3500 LOWMAN DR ASHLAND, KY 41102	\$63,043.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

LOWMAN FAMILY FOUNDATION SALES OF SECURITIES 2009

20-2006281

SALES OF SECURITIES	QUANTIT	QUANTIT DATE ACQ	COST	DATE SLD §	DATE SLD SALES PRICE	GAIN/(LOSS)	Lors
CNG	*	4/5/2007	1 4 4 0	00,00	0,00	77.707) ; -
WELLSCRADED	- 4	1000/10/0	011.10	01/13/09	24.02	(404./4)	. ب
WELLS PARGO	-	3/21/2001	231.98	01/14/09	22.73	(209.25)	_
AMEREN CORP	500	4/4/2007	10,179.00	02/26/09	4,848.18	(5,330.82)	_
BANK OF AMERICA CORP	200	8/1/2005	8,781.21	02/26/09	1,067.64	(7,713.57)	ــ
BRISTOL MYERS SQUIBB CO	90 90 90	09/23/05	7,397.89	02/26/09	5,805,25	(1.592.64)	_
CITIGROUP INC	200	6/7/2005	9,784.22	02/26/09	489.20	(9.295.02)	· _
LILLY ELI & CO	200	4/9/2007	11,256.00	02/26/09	6.181.17	(5.074.83)	ا۔ ا
PNC FINL SVCS GROUP	9	4/5/2007	16,186.84	02/26/09	591.07	(15,595.77)	.
PFIZER	400	3/27/2007	10,312.00	02/26/09	5,043.02	(5,268.98)	
REGIONS FINANCIAL CORP(NEW)	300	10/25/2005	9,292.70	02/26/09	1,161.28	(8,131.42)	ب
US BANCORP	900	4/5/2007	10,518.00	02/26/09	4.472	(6.045.95)	لـ ا
WELLS FARGO	တ္တ	3/27/2007	11,033.02	02/26/09	554	(10,479.11)	_
ALEXANDRIA REAL ESTATE	4 0	12/18/2006	40,328.00	02/26/09	16,330.95	(23,997.05)	ل ـ ا
SL GREEN REALTY	202	1/25/2007	30,311.01	02/26/09	2,535.79	(27,775,22)	_
SIMON PROPERTY GROUP	300	12/18/2006	29,998.57	02/26/09	10,065.56	(19,933.01)	ر
CBL & ASSOC PPTYS	~	12/18/2006	5.69	04/29/09	0.40	(5.29)	.
LONG TERM			206,127.29		59,194.62	(146,932.67)	
CATERPILLAR	130	01/15/09	4,977.27	02/26/09	3,146.12	(1,831.15)	S
ABBOTT LABS	694	12/30/2008	36,893.04	02/26/09	35,268.05	(1,624.99)	ဟ
SAN JUAN BASIN RTY TR	220	2/26/2009	8,840.29	09/18/09	10,240.07	1,399.78	ഗ
PERMIAN BASIN RTY TR	1,125	2/26/2009	9,045.64	09/18/09	15,021.69	5,976.05	S
SHORT TERM			59.756.24		63.675.93	3.919.69	

(143,012.98)

122,870.55

265,883.53

TOTAL SALES OF SECURITIES

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS		COLUMN (A) AMOUNT	
INVESTMENT INCOME	•		77,734.		0.	77,73	34.
TOTAL TO FM 990-PF, PART I, L	N 4		77,734.		0.	77,73	34.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	a) Inses Books	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOME		
PROFESSIONAL FEES		2,637.	· 	0.			0.
TO FORM 990-PF, PG 1, LN 16B		2,637.	: ======	0.			0.
FORM 990-PF	co	RPORAT	E STOCK			STATEMENT	3
DESCRIPTION				во	OK VALUE	FAIR MARKE	r
CORPORATE STOCKS					1,325,679.	1,408,3	66.
TOTAL TO FORM 990-PF, PART II	, LIN	E 10B			1,325,679.	1,408,3	66.
FORM 990-PF	ОТН	ER INV	ESTMENTS			STATEMENT	4
DESCRIPTION			LUATION ETHOD	во	OK VALUE	FAIR MARKE	r
MUTUAL FUNDS		 .	FMV		131,467.	22,4	60.
TOTAL TO FORM 990-PF, PART II	, LIN	IE 13			131,467.	22,4	60.

FORM 990-PF	PART VIII - LIST TRUSTEBS AND	STATEMENT 5			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
E B LOWMAN II P O BOX 1699 ASHLAND, KY 41105		PRESIDENT 1.00	0.	0.	0.
JO ANNE LOWMAN P O BOX 1699 ASHLAND, KY 41105		SECRETARY/TREAS	SURER 0.	0.	0.
SARAH LOWMAN P O BOX 1699 ASHLAND, KY 41105		VICE PRESIDENT 0.00	0.	0.	0.
E B LOWMAN III P O BOX 1699 ASHLAND, KY 41105		VICE PRESIDENT 0.00	0.	0.	0.
KIM LOWMAN P O BOX 1699 ASHLAND, KY 41105		VICE PRESIDENT 0.00	0.	0.	0.
TOTALS INCLUDED OF	N 990-PF, PAGE 6,	PART VIII	0.	0.	0.
FORM 990-PF		XV - LINE 1A UNDATION MANAGEI	R <i>S</i>	STAT	ement 6

NAME OF MANAGER

E B LOWMAN II JO ANNE LOWMAN FORM 990-PF

STATEMENT

		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	AMOUNT
SHELTER OF HOPE 2944 WINCHESTER AVE ASHLAND, KY 41101	GENERAL OPERATION	5,000.
CHRISTIAN CHURCH OF KENTUCKY 1125 RED MILE RD LEXINGTON, KY 40504	GENERAL CHURCH PROGRAM	5,000.
CHRISTMOUNT CHRISTIAN ASSEMBLY 222 FERN WAY BLACK MOUNTAIN, NC 28711	MINISTRIES OPERATION	1,000.
COMMUNITY KITCHEN 1337 WINCHESTER AVE ASHLAND, KY 41101	FOOD SERVICES FOR NEEDY	5,000.
CARES 2516 CARTER AVE ASHLAND, KY 41101	SERVICES FOR NEEDY	5,000.
SAFE HARBOR P O BOX 2163 ASHLAND, KY 41105	GENERAL OPERATION	5,000.
LEXINGTON THEOLOGICAL SEMINARY 631 SOUTH LIMESTONE LEXINGTON, KY 40508	GENERAL SEMINARY PROGRAM	20,000.
YMCA ASHLAND 3232 OLD 13TH ST ASHLAND, KY 41101	PROGRAM OPERATION	1,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

LOWMAN FAMILY FOUNDATION, INC	•	20-2006281
UNITED ASHLAND MINISTRIES P O BOX 1699 ASHLAND, KY 41105	PROGRAM OPERATION	11,000.
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A	58,000.