

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



OMB No	1545-0052
2(009

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

				Tuz	year begiiii				criairi	_			, 20
G	Checl	k all th	at apply	<u></u>	Initial return	1	Initial return o	-	blic charity	_	L	Fina	I return
_				<u>L</u>	Amended re	eturn	Addres	s change		Ц	lame change		
		1	Name of four	ndatı	on						A Employer iden	tification n	umber
U	lse the	IRS								ŀ			
	labe	1.	KUHLE FA	MI	LY FOUNDA	MOITA					20	-3995	755
(Otherw	′ 1	Number and	stre	et (or PO box n	umber if n	nail is not delivered to street a	address)	Room/suit	е	B Telephone number (s	ee page 10 of U	he instructions)
	рпп												
	or typ	1	2425 EAS	T (CAMELBACK	ROAL	, SUITE 750				(6	502) 2	85-5022
	ee Spe Istructi			_	e, and ZIP code		•				C If exemption appli	cation is	▶
	isti ucti		-								pending, check he D 1 Foreign organia		t hara
			PHOENIX,	A	Z 85016						2 Foreign organia		·
н	Chec		of organizat			n 501/	c)(3) exempt private for	ındatıon			85% test, chec	k here and at	ttach
Ė	\neg		•		npt charitable t		Other taxable private		מר		computation		
1			value of all	•				ash X Acc			E If private foundation		
•			m Part II, col						iuai		under section 507		
	16) ▶		2,58			(Part I	ther (specify) column (d) must be on	cash hasis			F If the foundation is		
6					and Expense		column (a) mast be on	Cusii busis j			under section 507		Disbursements
	ai l I	total of	amounts in c	olun	and Expense ans (b), (c), and	d(d)	(a) Revenue and	(b) Net inve	stment	(4	c) Adjusted net		or charitable
		may no	ot necessanly	equ.	al the amounts	in	expenses per books	incom	е		income		purposes
\neg			,,,		of the instructi							(ca	ish basis only)
			ons, gifts, grants, e	etc , re ound:	eceived (attach sche ation is not requ R	edule) .						_	
		Check 🕨	- Citadi	00.									
			-		orary cash invest				7 5 2 5			+	
					m securities		57,535.	5	7,535.	.		AT	<u>CH 1</u>
	5a (Gross r	ents										
	1 d	Net renta	al income or (los	ss) _									
익	6a N	Net gain	or (loss) from s	ale o	f assets not on hi	ne 10	-22,405.	· · · · · · · · · · · · · · · · · · ·					
ē	D C	assets o	n line 6a		220	<u>,771.</u>							
(چ	7 (Capital	gain net incor	ne (f	from Part IV, lir	ne 2) .							
Revenue	8 1	Net sho	rt-term capital	l gan	n		- · · · · - · · · · · · · · · · · · · ·						
İ	10 a (Gross sa and allov	iles less returns vances				\ <u>-\\</u>						
			st of goods solo										
	с (Gross p	profit or (loss)	(atta	ch schedule)								
	11 (Other ir	ncome (attach	sch	edule)								
	12	Total A	Add lines 1 thr	ough	n 11		35,130.	5	7,535.				
	13 (ompen	sphogod phigen	s į d ir	ectors, trustees,	etc	0.						
	14 (ther e	mployee sala	ries	ecters rustees, and wages								
es	15 F	ensor	n plans, emplo	yee	benefits 6								
enses	16 a l	l∰ fe	ee s (e) te ch (sci	h ệ dủ		l							
	b A				chedule)	i 2	3,825.		1,913.			Ο.	1,912
E E	С (p the	rofessional fe	es (2	attach schedule)							
ţ	17 I	hterest	OGDE	HW	ENT[3		14.		0.			Ο.	0
tra	18	laxes (a	illach schedule)	(see	page 14 of the instr	tuctions)* *	14,806.		0.		(o.	0
in S					edule) and depl		200	V CO D NI C I	0 N 1				
Ē			*				E.	XTENSI	UN				
ĕ			-		meetings		A	TTACH	ED				
JUG.													
ğ					chedule) ATC		7,084.		7,053.				
Operating and Administrative Exp					inistrative exp								
ber			es 13 through				25,729.		8,966.		t e	o.	1,912
ō			utions, gifts, g				105,460.						105,460
					ents Add lines 24		131,189.		8,966.			o .	107,372
_			t line 26 from			3110 20							
					es and disbursem	ents	-96,059.						
					(if negative, er			4	8,569.			_	
	1				negative, enter				,		-0-	-	
_		,		<u>. '''-</u>		- /: •		L			<u>_</u>		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 52261J 2228 10/10/2010 11:08:23 PM V 09-8.2

JSA ** ATCH 4

Form 990-PF (2009) PAGE 1

1990746

20-3995755

D	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End o	t year
	41 t ju	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash - non-interest-bearing	2 566		44 200
	2	Savings and temporary cash investments	2,566.	44,388.	44,388.
ı	3	Accounts receivable	1		•
		Less allowance for doubtful accounts			· · · · · · · · · · · · · · · · · · ·
	4	Pledges receivable	-		
ļ		Less allowance for doubtful accounts ▶			
١	5	Grants receivable	_		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			· · · · · · · · · · · · · · · · · · ·
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10 a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) A.T.C.H6.	2,080,686.	2,538,003.	2,538,003.
	11 ^C	Investments - corporate bonds (attach schedule)			
	12	(attach schedule) Investments - mortgage loans			
	13	Investments - other (attach schedule)			·
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
\Box		instructions Also, see page 1, item I)	2,083,252.	2,582,391.	2,582,391.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
ilti	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	ļ		
Balances	24	Unrestricted			
au	25	Temporarily restricted			
		Permanently restricted			
or Fund		Foundations that do not follow SFAS 117,			
교		check here and complete lines 27 through 31. ► X			
ō	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0 000 050		
155	29	Retained earnings, accumulated income, endowment, or other funds	2,083,252.	2,582,391.	
et /	30	Total net assets or fund balances (see page 17 of the	0 000 050	0 500 001	
Ž	l	instructions)	2,083,252.	2,582,391.	
	31	Total habilities and net assets/fund balances (see page 17			
		of the instructions)	2,083,252.	2,582,391.	
		Analysis of Changes in Net Assets or Fund			
1		I net assets or fund balances at beginning of year - Part II, co		1	
					2,083,252.
		er amount from Part I, line 27a			-96,059.
		er increases not included in line 2 (itemize) ATTACHI	MENT_7	3	595,198.
		lines 1, 2, and 3		4	2,582,391.
		reases not included in line 2 (itemize)		5	
6	Tota	I net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), III	ne 30 6	2,582,391.

Fort	n 990-PF (2009)		20-39957	55		Page 3
Pa	nt IV Capital Gains	and Losses for Tax on Inv	estment Income			
	(a) List and	describe the kind(s) of property sold (e	g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	2-story br	ick warehouse, or common stock, 200 s	hs MLC Co)	P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)
<u>1a</u>	SEE PART IV SCHEI	DULE				
<u>b</u>						
_c						
_d						
<u>e</u>					<u></u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	,
a						
<u>b</u>						
_d					·	
е					·	
Ç	omplete only for assets show	wing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	han -0-) or
а						
b						
c						
d						
е					-	
_	0		gain, also enter in Part I, line 7			
2	Capital gain net income or (net capital loss) {	(loss), enter -0- in Part I, line 7	2		-22,405.
3	Net short-term capital gain of	or (loss) as defined in sections 1222	?(5) and (6)			
	If gain, also enter in Part I, I	ine 8, column (c) (see pages 13 and	d 17 of the instructions)			
		ne 8		3		
		der Section 4940(e) for Reduc		ome		
(Fo	or optional use by domestic	private foundations subject to the se	ection 4940(a) tax on net investmen	t income)	
lf s	ection 4940(d)(2) applies, le	eave this part blank				
Wa	as the foundation liable for th	ne section 4942 tax on the distributa	ible amount of any year in the base	period?		Yes X No
If "	Yes," the foundation does n	ot qualify under section 4940(e) Do	not complete this part			
1		unt in each column for each year, se	ee page 18 of the instructions before	e making	any entries	
	(a) Base period years	(b)	(c)		(d) Distribution ra	tio
C	alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
	2008	86,807.	2,757,072.			0.031485
	2007	153,031.	2,042,424.			0.074926
	2006	74,828.	997,646.			0.075005
	2005	0.	492,500.			0.000000
	2004					
2	Total of line 1, column (d)			2		0.181416
3	Average distribution ratio for	or the 5-year base period - divide th				
	-	ation has been in existence if less the	-	3		0.045354
	•		,			
4	Enter the net value of none	charitable-use assets for 2009 from	Part X line 5	4	2.	159,670.
7	Enter the net value of none	statilable ase assets for 2000 itom	rant A, illie 5			200,000
5	Multiply line 4 by line 3			5		97,950.
J	winding into 4 by line 3			-		31,330.
c	Enter 10/ of material	tincomo (10/ of Dort Libra 27h)				106
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		6	-	486.
_	A 141			_		00 435
7	Add lines 5 and 6			7	-	98,436.
_						107 275
8	Enter qualifying distribution		1.161.1 W. (1.1.14.1.11.1.1.1.1.1.1.1.1.1.1.1.1.1.1	8		107,372.
	Part VI instructions on page	eater than line 7, check the box i je 18	in Part VI, line 1b, and complete	ınaı part	using a 1% ta	x rate. See the

Form 9	990-PF (2009) ' 20-3995755		F	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4	86.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2		4	86.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4	86.
6	Credits/Payments Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 0.			
	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868) 6c 4,000.			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		4,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,5	14.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 3,514. Refunded 11	•		
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
-	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
c		1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-10		
	(1) On the foundation \$\ \\$ \ 2. On foundation managers \$\ \\$ \ 0.			
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
·	on foundation managers > \$			
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			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
- Tu	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u>-</u>	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			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
		6	Х	
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8а	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
oa	instructions) NAZ			
b				
U	(or designate) of each state as required by General Instruction G?/If "No," attach explanation	o _F	Х	
9		<u>8b</u>		
3	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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	_		х
40	27)? If "Yes,"complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	4.		Х
	names and addresses	10		

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

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Par	t VI <u>I-E</u>	Statements Regarding Activities for	Which Form 472	20 May Be Requir	ed (contin	ued)		
5 a	Dunng	the year did the foundation pay or incur any amount	to		_			
	(1) Ca	irry on propaganda, or otherwise attempt to influence	legislation (section 49	945(e))?	Yes	X No		
	(2) Int	luence the outcome of any specific public election (se	ee section 4955), or to	carry on,				
	dır	ectly or indirectly, any voter registration drive?			Yes	X No		
	(3) Pr	ovide a grant to an individual for travel, study, or othe				X No		
		ovide a grant to an organization other than a charitab	•		- —			1
		ction 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	-		Yes	X No		
		ovide for any purpose other than religious, chantable,	. •			•		1 1
		rposes, or for the prevention of cruelty to children or a	•		Yes	X No		
		answer is "Yes" to 5a(1)-(5), did any of the transa				_		
D	•	answer is fees to 5a(1)-(5), did any of the transa ations section 53 4945 or in a current notice regardi		•			5b	1 17
	-		=		· ·	. <u></u>	30_	N/A
	_	izations relying on a current notice regarding disaster			-			
С		inswer is "Yes" to question 5a(4), does the foundation	•			<u>г</u>		
		se it maintained expenditure responsibility for the grai			. Yes	No		N/A
		," attach the statement required by Regulations sections,	• •					
6 a	Did the	e foundation, during the year, receive any funds, direc	ctly or indirectly, to pay	y premiums		[V]		
		ersonal benefit contract?			. Yes	X No		,,
b		e foundation, during the year, pay premiums, directly	or indirectly, on a pers	sonal benefit contract?			6b	X
		" to 6b, file Form 8870						
	•	time during the tax year, was the foundation a party	•	•	. L Yes	X No		
		did the foundation receive any proceeds or have any			U. I.I. D.		7b	N/A
Pai	t VIII	Information About Officers, Directors and Contractors	, Trustees, Foun	idation wanagers	, Highly Pa	iia Empi	oyees,	
1	List al	officers, directors, trustees, foundation man		mpensation (see pa	ge 22 of the	instruction	ons).	
		(a) Name and address	(b) Tille, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributi employee bene			se account, owances
			devoted to position		and deferred con		Other un	
				0		اہ		0
<u>A.I.</u>	TACI	IMENT 8		0.		0.		0
		 -						
						ļ		
	C		- 4h 4h ilua	dad an line 4 . acc n	22 of th	- in at-		
2		ensation of five highest-paid employees (othe e, enter "NONE."	r than those includ	jed on line 1 - see p	age 23 or th	e instruct	ions).	
			(b) Title, and average		(d) Contribu	tions to	(a) C	
(a) Name	and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee b	eferred		se account, owances
			devoted to position		compens	ation		
	NONE			<u></u>				
			· · · · · · · · · · · · · · · · · · ·					
					ļ			
						ļ		
Tota	ıl numi	per of other employees paid over \$50,000 .	 	 	<u></u>			NONE
							Form 99	90-PF (2009)

Part VIII Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	anagers, Highly Paid Emplo	oyees,	1 290
3 Five highest-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	
NONE			
Total number of others receiving over \$50,000 for professional services		▶	NONE
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical inform of organizations and other beneficianes served, conferences convened, research papers produced, etc.	ation such as the number	Expe	nses
1 N/A	,		
2			
3			
4			
Part IX-B Summary of Program-Related Investments (see page 23 of the Institute Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amo	unt
		Ano	um
1 NONE			
2			
All other program-related investments. See page 24 of the instructions			
3 NONE			

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions)	ın foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	2,169,984.
b	Average of monthly cash balances	1b	22,574.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1d	2,192,558.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,192,558.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	32,888.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,159,670.
6_	Minimum investment return. Enter 5% of line 5	6	107,984.
Pa	Tart XI Distributable Amount (see page 25 of the instructions) (Section 4942(J)(3) and (J)(5) private foundations and certain foreign organizations check here ► and do not complete this page 25.		
1	Minimum investment return from Part X, line 6	1	107,984.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b			
С	Add lines 2a and 2b	2c	486.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	107,498.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	107,498.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	107,498.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	107,372.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	107,372.
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 (see page 26 of the instructions)	5	486.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	106,886.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years	her the four	idation

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				107,498.
2	Undistributed income, if any, as of the end of 2009			*****	
	F				
	Total for pnor years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009			,	
	From 2004				
·	• • • • • • • • • • • • • • • • • • • •				
ď	From 2006				
	From 2008				
f	Total of lines 3a through e	34,962.			
4	Qualifying distributions for 2009 from Part XII,				
•	line 4 \(\) \$ 107,372.				
а	Applied to 2008, but not more than line 2a				
h	Applied to undistributed income of prior years (Election				
-	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				107 270
	Applied to 2009 distributable amount				107,372.
	Remaining amount distributed out of corpus	0.			106
5	Excess distributions carryover applied to 2009 . (If an amount appears in column (d), the same	126.			126.
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	34,836.			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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.				
đ	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
7	distributed in 2010				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	34,836.			
10	Analysis of line 9				
а	Excess from 2005				
b	Excess from 2006				
С	Excess from 2007 34,836.				
d					
е	Excess from 2009				

justed net income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a	4942(j)(3) or 4942(j)(5) (e) Total
b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Pnor 3 years Lor the minimum investment return from Part X for each year listed B 55% 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 C Qualifying distributions made directly for active conduct of exempt activities C Qualifying distributions made directly for active conduct of exempt activities 2 C C Qualifying distributions made directly for active conduct of exempt activities 2 C C Qualifying distributions made directly for active conduct of exempt activities 2 C C Qualifying distributions made directly for active conduct of exempt activities 2 C Supplies 3a, b, or c for the alternative lest enter (1) Value of all assets 2 C Supplies 3a, b, or c for the alternative lest enter (2) of minimum investment return shown in Part X, line 6 for each year listed C "Support alternative lest -enter (1) Total support other hand gross exertiment moral process exertiment moral gross exertiment exertiment exertiment exertiment exertiment exertiment exertiment exertiment ex	(e) Total
Tax year Pnor 3 years Justed net income from Part I of the minimum investment return from Part X for each year listed 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 C Qualifying distributions made directly for active conduct of exempt activities C Qualifying distributions made directly for active conduct of exempt activities C Qualifying distributions made directly for active conduct of exempt activities C Q Value of all assets (2) Value of all assets (2) Value of assets qualifying under section 4942(Q)(S)(B)(D) C "Support alternative test- ment return shown in Part X, line 6 for each year listed C "Support alternative test- ment return shown in Part X, line 6 for each year listed C "Support alternative test- ment return shown in Part X, line 6 for each year listed (1) Total support other than gross investment income (interest, dividends, renis, payments on secunities loans (section 512(a)(b)), or orgaliss), or orgaliss), or orgaliss), (2) Support from general exempt organizations a year organization (4) Gross investment income (information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contribute before the close of any tax year (but only if they have contributed more than 2% of the total contribute before the close of any tax year (but only if they have contributed more than 25,000) (See section	(e) Total
Justed net income from Part or the adjusted net income from Part I or the minimum investment return from Part X or each year listed	
i or the munimum investment return from Part X for each year listed b 85% of line 2a C Qualifying distributions from Part XII, line 4 for each year issted d d Amounts included in line 2c not used directly for active conduct of exempt activities Subtract line 2d from line 2c C Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 3 Complete 3a, b, or c for the alternative test-enter (1) Value of all assets (2) Value of assets qualifying under section 4942(0)(30)(0) b "Endowment" alternative test-enter (1) Total support other than gross investment income (interest, dividents), and is, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities loans (section 3120)(5)), or royallies j, payments on securities lateral	
year listed 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 directly for active conduct of exempt activities C Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2c not exempt activities Subtract line 2d from line 2d from line 2c not exempt activities Subtract line 2d from	
b 85% of line 2a	
XII, tine 4 for each year listed . d Amounts included in line 2c not used directly for active conduct of exempt activities	
d Amounts included in line 2c not used directly for active conduct of exempl activities	
used directly for active conduct of exempt activities	
directly for active conduct of exempt activities Subtract line 2d from line 2c	
2d from line 2c	
a "Assets" alternative test- enter (1) Value of all assets (2) Value of assets qualifying under section 4942(p)(3)(B)(p)	
(1) Value of all assets (2) Value of assets qualifying under section 4942()(3)(8)(6)	
(2) Value of assets qualifying under section 4942(n)(3)(8)(n) b "Endowment" alternative testenter 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 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 (n)(3)(B)(m) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation has at any time during the year - see page 28 of the instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
b "Endowment" alternative testenter 2/3 of minimum investment return shown in Part X. Inne 6 for each year 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 royalities) (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(B)(m) (3) Largest amount of support from an exempt organization (4) Gross investment income . Part XV Supplementary Information (Complete this part only if the foundation has at any time during the year - see page 28 of the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contribution before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
ment return shown in Part X, line 6 for each year 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 royalities), (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (j)(3)(8)(m)	
Inne 6 for each year 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 royalities) (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation has at any time during the year - see page 28 of the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed for the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
(1) Total support other than gross investment income (interest, dividends, rents, payments on seculnes loans (section 512(a)(5)), or royallies). (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(8)(ii)	
gross investment income (interest, dividends, rents, payments on seculnes loans (section 512(a)(5)), or royalities). (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(B)(ii)	
payments on secunties loans (section 512(a)(5)), or royalities). (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(B)(iii) (3) Largest amount of support from an exempt organization	
or royalites). (2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(8)(iii)	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942 (i)(3)(8)(9)(ii)	
exempt organizations as provided in section 4942 (i)(3)(B)(ii)	
(3) Largest amount of support from an exempt organization (4) Gross investment income . Part XV Supplementary Information (Complete this part only if the foundation has at any time during the year - see page 28 of the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
Part XV Supplementary Information (Complete this part only if the foundation had at any time during the year - see page 28 of the instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See sections)	
Part XV Supplementary Information (Complete this part only if the foundation had at any time during the year - see page 28 of the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
Part XV Supplementary Information (Complete this part only if the foundation had at any time during the year - see page 28 of the instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	
at any time during the year - see page 28 of the instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section)	d \$5.000 or more in assets
a List any managers of the foundation who have contributed more than 2% of the total contributed before the close of any tax year (but only if they have contributed more than \$5,000) (See section	- +0,000 0o.o dobblo
before the close of any tax year (but only if they have contributed more than \$5,000) (See section	
RICHARD & SHELLEY KUHLE	
b List any managers of the foundation who own 10% or more of the stock of a corporation (of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	r an equally large portion of the
N/A	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ► X if the foundation only makes contributions to preselected charitable org unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of to organizations under other conditions, complete items 2a, b, c, and d	anizations and does not accept he instructions) to individuals or
a The name, address, and telephone number of the person to whom applications should be addressed	
b The form in which applications should be submitted and information and materials they should include	<u> </u>
The family which applications should be submitted and information and materials tries should includ	•
c Any submission deadlines	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields factors	, kinds of institutions, or other

Part XV Supplementary Information (c 3 Grants and Contributions Paid Duri	ng the Year or App	roved for Fu	iture Payment	· · · · ·
Recipient	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
Name and address (home or business)	any foundation manager or substantial contributor	reapient	continbution	
a Paid during the year				
a mma cumpam o				
ATTACHMENT 9				
		1		
Total		<u> </u>	▶ 3a	105,460
b Approved for future payment				103,400
b //pprovoc for factors paymon.				
		1		
			•	
Total			▶ 3b	

nter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
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					
4 Dividends and interest from securities			14	57,535.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	1		18	-22,405.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory	1				
1 Other revenue a					
b	ł				
c					
	1				
d					
d				35,130.	
d					
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie	o verify calcula	ations)	Exempt Pur	13	35,130
d e 2 Subtotal Add columns (b), (d), and (e)	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purped in column	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) complishment of	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to Part XVI-B Relationship of Activitie Line No. Explain below how each activitie accomplishment of the	o verify calculars to the Ac	ations) ccomplishment of lich income is report exempt purposes	Exempt Purpled in column (other than	ooses (e) of Part XVI-A cor	35,130.

		Exempt Orga	nizations								
1	ın sec	ne organization directly	ode (other than	section 501(c)(3)	organizations	with or in	any other org section 527,	anization described relating to political		Yes	No
а	Transfe	zations? ers from the reporting fou	ndation to a noncl	nantable exempt organ	nization of				-	ł	
	_	ısh		• • • • • • • • • •			• • • • • • • •		. 1a(1)		X
h		her assets		• • • • • • • • • • • • • • • • • • • •			• • • • • • •		. 1a(2)		X
		les of assets to a noncha	intable exempt or	anization					1b(1)		Х
		rchases of assets from a							1b(2)		Х
		ental of facilities, equipme				 		. 	1b(3)		Х
		eimbursement arrangeme							1b(4)		Х
		ans or loan guarantees							1b(5)		Х
	(6) Pe	erformance of services or	membership or fu	ndraising solicitations				<i></i>	. 1b(6)		Х
С	Sharin	g of facilities, equipment,	mailing lists, othe	r assets, or paid emplo	oyees				. <u>1c</u>		Х
d	If the	answer to any of	the above is "\	es," complete the	following s	chedule	Column (b)	should always sho	w the	faır	market
	value	of the goods, other	assets, or servi	ces given by the	reporting fo	undation	If the found	ation received les	s than	faır	market
	value	in any transaction of	sharing arrang	ement, show in co	olumn (d) tl	ne value	e of the goods	s, other assets, o	servic	es re	ceived
(a)	ine no	(b) Amount involved	(c) Name of n	onchantable exempt orga	nızatıon		scription of transfe	rs, transactions, and sha	arıng arra	ngemer	ıls
		N/A	<u>-</u>			N/A					
		 									
											
_											
								···			
											
2a		foundation directly or n 501(c) of the Code (otl	•							es	X No
b		," complete the following									_
		(a) Name of organization	1	(b) Type of o	organization			c) Description of relatio	nship		
											
									ad		
	Under belief,	penalties of penjury, I ded it is true, correct, and corr	are that have example to Declaration of	amined this return, inclu of preparer (other than t	iding accompa axpayer or fidi	nying sch iciary) is l	edules and staten based on all inform	nents, and to the best mation of which prepa	of my i	nowled	ige and wiedge
	/	1/4h 1/1				101	21/10	Executive 1	Dirc	cto	~
ē	Sı	grature of officer or trustee				Date	—	Title		<u> </u>	
Η̈́					Date			Preparer			
Sign Here	حد.	Preparer's	(2)				Check if self-employe	ed Dinumber page 30 o	See Sign the instr	ature ou uctions)	n)
Sig	arer	signature	10		10/13	3/2010		P0074			
	Paid Preparer's Use Only	Firm's name (or yours if	KPMG L	LP				EIN ▶ 13-556	5207		
	4 3	self-employed), address	60 EAS	T RIO SALADO	PKWY, SI						
_		and ZIP code	TEMPÉ,	AZ		8:	5281-9125	Phone no 480-	459-3	500	

ATTACHMENT 1

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PE,

	NET	INVESTMENT	INCOME	
REVENUE	AND	EXPENSES	PER BOOKS	
			DESCRIPTION	

57,535.

57,535.

DIVIDENDS

57,535.

TOTAL

- ACCOUNTING FEES

PART I

FORM 990PF,

1990746

52261J 2228 10/10/2010 11:08:23 PMV 09-8.2

2	
ATTACHMENT	

CHARITABLE <u>PURPOSES</u>	1,912.	1,912.
ADJUSTED NET INCOME	.0	0
NET INVESTMENT INCOME	1,913.	1,913.
REVENUE AND EXPENSES PER BOOKS	3,825.	3,825.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 2

- INTEREST EXPENSE PART FORM 990PF,

CHARITABLE PURPOSES	.0	0
ADJUSTED NET INCOME	.0	0
NET INVESTMENT INCOME	.0	0
REVENUE AND EXPENSES PER BOOKS	14.	14.
		TOTALS
DESCRIPTION	INTEREST	

ATTACHMENT 3

FORM 990PF, PART I - TAXES

CHARITABLE <u>PURPOSES</u>	0.	0
ADJUSTED NET INCOME	.0	0
NET INVESTMENT INCOME	.0	0.
REVENUE AND EXPENSES PER BOOKS	14,806.	14,806.
		TOTALS
DESCRIPTION	FEDERAL TAXES	

PAGE 19

1990746

- OTHER EXPENSES PART FORM 990PF, REVENUE AND EXPENSES PER BOOKS DESCRIPTION
BANK SERVICE CHARGES
FILING FEES
PENALTY

NET INVESTMENT <u>INCOME</u> 7,053.

7,084.

TOTALS

ATTACHMENT 5

1990746

10/10/2010 11:08:23 PMV 09-8.2 52261J 2228

ATTACHMENT 6

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

MUTUAL FUND PORTFOLIO

ENDING BOOK VALUE

ENDING FMV

2,538,003.

2,538,003.

2,538,003.

2,538,003.

TOTALS

PAGE 20

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION_

AMOUNT

UNREALIZED LOSS

595,198.

TOTAL

595,198.

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		INS AND LOSSES FOR TAX ON INVEST			ĮΡĮ	5 .		
Kind of Pr	operty		Desc	ription		D D	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	뮈	Gain	
price less	allowed/	other	as of	as of	FMV over		or	
xpenses of sale	allowable	basis	12/31/69	12/31/69	adj basis	Ц	(loss)	
						П		
		PUBLICLY TF	RADED SECURI	TIES LT		P	VARIOUS	VARIOUS
		PROPERTY TY	PE: SECURIT	IES		П		
20,771.		243,176.				П	-22,405.	
20, / / 1.		213,210.					22,103.	
						11		
TAL GAIN (LO	SS)	.					-22,405.	
						Н		
						П		
						11		
						Н		
						H		•
						П		
		İ				Н		
						П		
						11		
						$ \ $		
						Н		
						Ш		
						$ \cdot $		
						П		
						П		
						Н		
						П		
		1				$\ \cdot \ $		
								Ì
						1	I	1
						ייו		1

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	Ö	Ö	0			
CONTRIBUTIONS EX TO EMPLOYEE //	Ö	°.	0			
COMPENSATION	Ö	0	0			
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	TREASURER 1.00	GRAND TOTALS			

SHELLEY LOUISE INCH KUHLE 2425 EAST CAMELBACK ROAD, SUITE 750 PHOENIX, AZ 85016

RICHARD KUHLE 2425 EAST CAMELBACK ROAD, SUITE 750

NAME AND ADDRESS

PHOENIX, AZ 85016

PAGE 22

KUHLE FAMILY FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PONNATION STATUS OF RECIPIENT NAA NAA NAA NAA NAA NAA NAA		RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
10 SUPPORT EDUCATIONAL PROGRAMS OF ALL SAINTS' 509 (A) (1)	RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
10 HELP TO HELP SUPPORT BUILDLING HEALTHIER LIVES, FREE 509(A) (1) 10 HELP TO SERVE THE EDUCATIONAL PROGRAMS AND 509(A) (1) 10 SUPPORT THE NEED OF KIDNEY PATIENTS 509(A) (1) 10 SUPPORT THE HEALTH CARE NEEDS OF WOMEN, CHILDREN 10 SUPPORT 11 TO SUPPORT THE HEALTH CARE NEEDS OF WOMEN, CHILDREN 11 AND THE ELDERLY 12 SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN 14 AND THE ELDERLY 15 AND THE ELDERLY 16 SOO(A) (1) 17 AND THE ELDERLY 18 AND THE ELDERLY	SCOPAL CHURCH	N/A	TO SUPPORT EDUCATIONAL PROGRAMS OF ALL SAINTS'	2,000
N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A SUG(A)(1) N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A N/A TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS AT ASU N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A SUG(A)(1) N/A N/A N/A SUG(A)(1) N/A N/A N/A SUG(A)(1) N/A N/A N/A SUG(A)(1) N/A N/A SUG(A)(1) N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A SUG(A) SUG(A) N/A N/A N/A N/A N/A N/A N/A N	6300 N CENTRAL AVENUE	509(A)(1)		
N/A	PHOENIV, AZ 85012-1109			
509(A)(1) N/A 508(A)(1) N/A SUPPORT THE NEED OF KIDNEY PATIENTS N/A 509(A)(1) N/A N/A TO FUND BUSINESS ALUMII PROGRAMS AT ASU TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS AT ASU N/A AT ASU SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY AND THE ELDERLY	AMERICAN HEART ASSOCIATION	N/P	TO HELP SUPPORT BUILDLING HEALTHIER LIVES, FREE	2,500
N/A SO9(A)(1) N/A SO9(A)(1) N/A SO9(A)(1) N/A N/A N/A TO EUND BUSINESS ALUMNI PROGRAMS TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS AT ASU N/A N/A SO9(A)(1) N/A SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY AND THE ELDERLY	7272 GPEENVILLE AVE	509(A)(1)	OF CARDIOVASCULAR DISEASES AND STROKE	
HELP TO SERVE THE EDUCATIONAL PROGRAMS AND SUPPORT THE NEED OF KIDNEY PATIENTS N/P SO9 (A) (1) N/A N/A SO9 (A) (1) N/A TO FUND BUSINESS ALUMNI PROGRAMS TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS AT ASU N/P N/P SO9 (A) (1) N/P AT ASU SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY AND THE ELDERLY	DALLAS, TX 75231			
509(A)(1) SUPPORT THE NEED OF KIDNEY PATIENTS N/P	ARIZONA KIDNEY FOUNDATION	N/N	HELP TO SERVE THE EDUCATIONAL PROGRAMS AND	915
N/P 509(A)(1) N/B N/B TO SUPPORT INITIATIVES ALUMNI PROGRAMS AT ASU N/F N/F SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY AND THE ELDERLY	5921 EAST INDIAN BEND ROAD	509(A)(1)	SUPPORT THE NEED OF KIDNEY PATIENTS	
N/P N/P SO9(A)(1) N/P TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS AT ASU N/P N/P N/P SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY AND THE ELDERLY	PARADISE VALLEY, ¤Z 85253			
509(A)(1) N/A 509(A)(1) AT ASU N/A N/A N/A SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY	ASU FOUNDATION	4/N	TO FUND BUSINESS ALUMNI PROGRAM	3,050
N/a 509(A)(i) AT ASU N/A SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY		509(A)(1)		
N/A 509(A)(i) AT ASU AT ASU N/A N/A 509(A)(i) AT ASU SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY	80-2260			
SO9(A)(1) N/F SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY	ASU WOMEN IN PHILANTHROFY	N/A	TO SUPPORT INITIATIVES AND SCHOLARSHIP PROGRAMS	1,500.
N/F SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AND THE ELDERLY		509(A)(1)	AT ASU	
N/A SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN AREN DRIVE 509(A)(1)	TEMPE, AZ 85280-2260			
NREN DRIVE 509(A)(1)	BOARD OF VISITORS	N/P	SERVE THE HEALTH CARE NEEDS OF WOMEN, CHILDREN	2,250
5020	1801 EAST CACTUS WREN DRIVE	509(A)(1)	AND THE ELDERLY	
.020				
	020			

10/10/2010

52261J 2228

1990746

ATTACHMENT 9 (CONT'D)

FORM 990PF, PART XV. - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	N/A TO FUND THE BROPHY FASHION SHOW PROGRAM 5,600 SO9(A)(1)	N/A 509(A)(1) COUNSELING, COMMUNICATION, AND TECHNOLOGY	N/A 509(A)(1) SELF-EXPRESSION AND HEALTHY RELATIONSHIPS	N/A 1,000 FROVIDE THE TOOLS AND RESOURCES FOR THE NEEDS OF 1,000 HOMELESS YOUTH	N/A 509(A)(1) DIABETES, BRAIN TUMORS, AND CONGENITAL HEART DEFECTS	N/A 500 MDA CLINICS AND ADVANCE ITS RESEARCH EFFORTS TO FIND TREATMENTS AND CURES FOR NEUROWUSCULAR
RELATIONSHIP TO SUBSTAN' AND FOUNDATION STATUS O	N/A 509(A)(1)	N/A 509(A)(1)	N/A 509(A)(1)	N/> 509(A)(1)	N/A 509(A)(1)	N/A 509 (A) (1)
RECIPIENT NAME AND ALDRESS	BROPHY COLLEGE PREPARATORY 4701 N CENTRAL AVE PHOENIX, AZ 85012	FOUNDATION FOR BLIND CHILDREN 1235 E HARMONT DRIVE PHOENIA, AZ 35020	GIRLS LEADERSHIP INSTITUTE PO BOY 478 SANTA CRUZ, C ² 95061	HOME BASE YOUTH SERVICES 931 E DEVONSHIPE AVE PHOENIN, NZ 85914	PHOENIA CHILDREN'S HOSPITAL FOUNDATION 2929 EAST CAMELBACK ROAD SUITE 122 PHOENIA, AZ 85016	MUSCULAP DYSTROPH, ASSOCIATION 3300 E SUNPISE DR TUCSON, PZ 85718

ATTACHMENT 9 (CONT'D)

KUHLE FAMILY FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE FEAR

AMOUNT	H BUILDING 10,000	SKILL 40,000 CRISIS	110N SHOW 28,350	ING THE FREE 500 R SERVED,
PURPOSE OF GRANT OR CONTRIBUTION	IO SUPPORT FUNDRAISER FOR NEW CHURCH BUILDING	PROVIDE EDUCATIONAL OPPORTUNITIES, SKILL ENHANCEMENT, SERVICES TO PEOPLE IN CRISIS	TO FUND CAMPUS IMPROVEMENTS AND FASHION SHOW PROGRAM	ASSIST EDUCATIONAL PROGRAMS, INCLUDING THE FREE SCHOOL ADMISSIONS PROGRAMS FOR UNDER SERVED, AT-RISK YOUTH THROUGHOUT ARIZONA
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/P	N/A
	509(A)(1)	509(A)(1)	509(A)(1)	509(A)(1)
RECIPIENT NAME AND ALDRESS	ST FRANCIS VAVIER	VALLEY OF THE SUN UNITED WAY	AAVIER COLLEGE PREPARATORY	ARIZONA SCIENCE CENTER
	4715 N CENTRAL AVE	1515 EAST OSBORN ROAD	4710 N FIFTH STREET	600 E WACHINGTON ST
	PHOENIX, AZ 95012	PHOEHIX, AZ 85014	PHOEHLY, AZ 85012	PHOEHIN, AZ 35004

105,460

TOTAL CONTRIBUTIONS PAID

V 09-8 2

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T. if applicable).

OMB No 1545-0092

2009

Employer identification number Name of estate or trust KUHLE FAMILY FOUNDATION 20-3995755 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (c) Date sold (mo , day, yr) (b) Date acquired (mo, day, yr) (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property
(Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (mo , day, yr) (mo, day, yr) 6a -22,405.b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a,

Schedule D (Form 1041) 2009

-22,405.

Par	t III Summary of Parts I and II		(1) Benefic	lanes.	(2) Esta	ite's	Page 2
, a.	Caution: Read the instructions before completing this p	oart.	(see pag		or trus		(3) Total
13	Net short-term gain or (loss)	13	, , , ,				
14	Net long-term gain or (loss):						
а	Total for year	14a		l			-22,405.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b		T t			*
	28% rate gain	14c					
15	Total net gain or (loss). Combine lines 13 and 14a ▶	15					-22,405.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form int V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Pa						
Par	t IV Capital Loss Limitation						
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lii	ne 4c, if a trust	, the sn	naller of		
а	The loss on line 15, column (3) or b \$3,000				<u>.</u> L	16 (3,000.
Note Carr	The loss on line 15, column (3) or b \$3,000 If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pagyove/Worksheeton page 7 of the instructions to figure your capital loss carryove	e 1, lin	ne 22 (or Form	990-T, In	ne 34), is a lo	oss, con	nplete the Capital Loss
	Tax Computation Using Maximum Capital Gains Rate						
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu) are gains	or an am	nount is ente	ered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			J. G., G.,	iount io one	J. 00 III	in dittion i ditti dila
	tion: Skip this part and complete the worksheet on page 8 of the instruct						
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or						
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero						
	n 990-T trusts. Complete this part only if both lines 14a and 15 ar						
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and	complete the	e works	sheet on pa	ige 8 d	of the instructions if
eithe	er line 14b, col (2) or line 14c, col (2) is more than zero						
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17			-	
18	Enter the smaller of line 14a or 15 in column (2)					-	
	but not less than zero						
19	Enter the estate's or trust's qualified dividends						
	from Form 1041, line 2b(2) (or enter the qualified					1	
	dividends included in income in Part I of Form 990-T) 19						
20	Add lines 18 and 19						
21	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g, otherwise, enter -0 ▶ 21					ĺ	
22	Subtract line 21 from line 20 If zero or less, enter -0		22			}	
23	Subtract line 22 from line 17 If zero or less, enter -0-		. 23				
24	Enter the smaller of the amount on line 17 or \$2,300		. 24				
25	Is the amount on line 23 equal to or more than the amount on line 24?						
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box						
	No. Enter the amount from line 23		25				
26	Subtract line 25 from line 24		. 26				
27	Are the amounts on lines 22 and 26 the same?						
	Yes Skip lines 27 thru 30 go to line 31 No. Enter the smaller of line 17 or lin	e 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28				
			• • •				
29	Subtract line 28 from line 27		29				
30	Multiply line 29 by 15% (15)					30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat						
	(see the Schedule G instructions in the instructions for Form 1041) .					31	
22	Add lines 20 and 24					20	
32	Add lines 30 and 31					32	
33	(see the Schedule Guistructions in the instructions for Form 1041)	e och	euule IOI ES	iaies ar	iu Husts	33	

Schedule D (Form 1041) 2009

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

Name of estate or trust as shown on Form 1041 Do not	enter name and employer	r identification number i	f shown on the other side	Employer identifi	
KUHLE FAMILY FOUNDATION				20-399575	55
Part II Long-Term Capital Gains ar			han One Year	Y	,
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a PUBLICLY TRADED SECURITIES					
LT	VARIOUS	VARIOUS	220,771.	243,176.	-22,405
		-			
			:		
	 				
	<u> </u>				
	1				
					
			-		
	 				
	ļ				
			1		
		1	1	<u> </u>	
6b Total. Combine the amounts in colum	n (f) Enter here and	d on Schedule D. I	ıne 6b		-22,405
The second are difficulties in solution)-1 (Form 1041) 2009

CASH AND CASH EQUIVALENTS

	Description					;	:	Current Balance
	Money Market Funds	t Funds		•	•			\$46,423 41
	TOTAL CASH	HAND CASH	TOTAL CASH AND CASH EQUIVALENTS					\$46,423.41
l	Quantity	Price	Market Value	Unit Cost	Cost Basis/ Purchase Cost ¹	Unrealized Gain or Loss	Annual	Estimated 30-Day Yield
1	11,058 344	\$4 82	\$53,301 21	\$7 29	\$80,588 92 72,915 50	-\$27,287 71	\$1,224	2 30%
1	7,680 851	10 88	83,567 65	10 97	84,288 22 75,557 13	-720 57	757	0 91%
1	10,259 35	18 23	187,027 95	16 05	164,643 47 153,489 04	22,384 48	2,060	111%

Purchases

01/22/08*

Acquired Date

MUTUAL FUNDS

1 80%

4,247

-63,099 42

299,671 50 271,835 34

13 38

236,572 08

10 56

22,402 66

DFA INVT DIMENSIONS R GROUP INC US MICRO CAP PORTFOLIO

05/01/06* Purchases

06/02/06* Purchases

Purchases

11/19/07*

1 90%

1,279

-22,274 51

90,258 37 78,152 00

18 89

67,983 86

14 23

4,777 503

4 57%

3,581

-1,164 76

79,668 96 71,618 85

10 29

78,504 20

10 14

7,742 032

MUTUAL FUNDS continue on page 4

DFA INVT DIMENSIONS R GRP INC TWO YR GLBL FXD INCOME PORT

Purchases

01/22/08*

DFA INVT DIMENSIONS R GRP INC INTL SM CAP PORTFOLIO DFISX

05/01/06* Purchases

Purchase Cost equals Cost Basis less any reinvested dividends and interest

T LPL Financial

Account Holdings / Kuhle Family Foundation SAM 6648-4670

:
J
J
٥
Ξ
:
•
٥
)
5
٥
١
Ċ
J
۲
•
3
•
•
ı
ī
Ĺ
í.
j
١
֓

MUTUAL	MUTUAL FUNDS (continued)								
Date Acquired	Description/SecurityID	Quantity	Price	Market Value	Unit Cost	Cost Basis/ Purchase Cost ¹	Unrealized Gain or Loss	Annual Income	Estimated 30-Day Yield
05/01/06* Purchases	DFA INVT DIMENSIONS R GROUP INTL SMALL CAP VALUE PORTFOLIO DISVX	6,958 38	15 09	105,001 95	18 13	126,161 69 110,695 15	-21,159 74	1,626	1 56%
05/01/06* Purchases	DFA INVT DIMENSIONS R GRP INC US LARGE CO DFLCX	6,581 803	32 83	216,080 59	38 96	256,442 41 242,887 50	-40,361 82	4,736	2 20%
05/01/06* Purchases	DFA INVT DIMENSIONS R GRP INC US SMALL CAP VALUE PORTFOLIO DFSVX	12,647 369	19 63	248,267 85	24 08	304,552 97 278,825 78	-56,285 12	2,671	1 08%
05/01/06* Purchases	DFA INVT DIMENSIONS R GROUP INC US LARGE CAP VALUE PORTFOLIO DFLVX	22,930 156	17 06	391,188 46	22 14	507,737 14 471,171 43	-116,548 68	7,740	1 98%
05/01/06* Purchases	DFA INVT DIMENSIONS R GROUP INC REAL ESTATE SECS PORTFOLIO DFREX	10,227 088	17 23	176,212 72	21 77	222,687 06 195,373 59	-46,474 34	2,544	1 45%
05/01/06* Purchases	DFA INVT DIMENSIONS R GROUP INC GLBL FIXED INC PORTFOLIO 233203884	8,363 069	11 03	92,244 65	10 47	87,555 46 79,905 84	4,689 19	1,910	2 08%
05/01/06* Purchases	DIMENSIONAL INVESTMENT R GROUP INTERNATIONAL VALUE PORTFOLIO	11,080 744	17 05	188,926 68	21 69	240,351 33 216,308 39	-51,424 65	4,378	2 32%
05/01/06* Purchases	PINCO FD PAC INVT MGMT R TOTAL RETURN FD INSTL CL PTTRX	11,380 457	10 80	122,908 93	10 58	120,438 17 93,299 77	2,470 76	6,962	2 69%
01/03/07* Purchases	PIMCO FDS HIGH YIELD R FD INSTL CL PHIYX	6,888 351	8 80	60,617 48	9 45	65,067 89 47,112 72	-4,450 41	4,734	7 84%
MUTUALF	MUTUAL FUNDS continue on page 5								

Purchase Cost equals Cost Basis less any reinvested dividends and interest

Il LPL Financial

Page 4 of 18

Account Holdings / Kuhle Family Foundation SAM 6648-4670

COPY

Date Acquired	Description/SecurityID	Quantity	Price	Market Value	Unit Cost	Cost Basis/ Purchase Cost ¹	Unrealized Gain or Loss	Annual Income	Estimated 30-Day Yield
05/01/06* Purchases	VANGUARD INDEX FUNDS R GROWTH INDEX FUND SIGNAL SHARES VIGSX	9,074 953	25 30	229,596 31	26 94	244,443 43 237,437 02	-14,847 12	2,575	1 13%
TOTAL MU	TOTAL MUTUAL FUNDS • Date of Earlest Acquisition			\$2,538,002.57		\$2,974,556.99 \$2,696,585.05	-\$436,554.42	\$53,024	
-	R Dividends and/or capital gains distributed by this security will be rei	security will be reinvested							
Value of	Value of Your LPL Financial Account			Market Value		Cost Basis/ Purchase Cost ²	Unrealized Gain or Loss	Estimated Annual Income	
			: : :	\$2,584,425.98		\$3,020,980.40 -\$436,554.42 \$2,743,008.46	-\$436,554.42	\$53,024	

TLPL Financial

Questions? Contact ClevesDelp, ChFC (419)891-9999° cleves delp@LPL COM

Purchase Cost equals Cost Basis less any reinvested dividends and interest Purchase Cost equals Cost Basis less any reinvested dividends, interest, Fixed Income and Alternative Investments

Form 8868

Application for Extension of Time To File an Exempt Organization Return

(Rev April 2009)		1- (-	Exempt (Organization R	Return		OMB I	No 1545-1709
Department of the Internal Revenue S			► File a se	parate application for each	h return.			
If you are fiIf you are fi	ling for an A	Additional (No	ot Automatic) 3-Mont	nplete only Part I and th Extension, complete I an automatic 3-month	only Part II (on pa			► X
				submit original (no cutomatic 6-month exten		and comple	ete	
Part I only							. .	▶ 🔲
All other corporatime to file inco	•	-)-C filers), partnersh	ips, REMICs, and trus	ts must use Form	7004 to re	equest	an extension of
one of the re- electronically returns, or a c	turns noted if (1) you w composite or	below (6 m ant the addi consolidated	nonths for a corpora tional (not automation d From 990-T Instea	file Form 8868 if you ation required to file c) 3-month extension ad, you must submit the visit www irs gov/efile a	Form 990-T) Howe or (2) you file Form the fully completed ar	ver, you c s 990-BL, nd signed p	cannot 6069, page 2	file Form 8868 or 8870, group (Part II) of Form
Type or	Name of Ex	kempt Organiza	ition			1		ication number
print			FOUNDATION			20-	39957	55
File by the due date for		-	orsuite no IfaPO box MELBACK ROAD, S					
filing your return See				a foreign address, see instr	ructions			
instructions	1 "	CNIX, AZ 8		,				
Form 990 X Form 990 The books)-BL)-EZ)-PF	are of ▶ TH		ooration) 401(a) or 408(a) trust) t other than above)	F	orm 4720 orm 5227 orm 6069 orm 8870		
If the organ	nization does		office or place of but	_ FAX No ▶				▶ □
for the whole	group, check	k this box .		digit Group Exemption Notes this		and attach	a list v	If this is with the
1 I reques	st an auto	omatic 3-mo 08/16 201	onth (6 months f	or a corporation rempt organization retur	•		•	
► X	calendar ye tax year be	ear <u>2009</u> o	or	,, and end	ding		- ' —	_
			nonths, check reason	Initial return	Final return		e in acc	counting period
nonrefun	dable credit	ts See instruc	ctions	T, 4720, or 6069, en			3a	\$ 4,000.
•	•			any refundable credits	s and estimated tax	payments		
			payment allowed as	a credit your payment with this	s form or if require	d denosit	3b	\$ 0.
				PS (Electronic Federal	•	•		; !

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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

Form 8868 (Rev 4-2009)

3c \$

instructions

4,000.

Form 8868 (Rev 4-2009)				Page 2		
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only P	art II and check this box			▶ X		
	nly complete Part II if you have already been granted an automatic 3-month extens						
• If you	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)					
	Additional (Not Automatic) 3-Month Extension of Time. Only fi		oies	nee	ded).		
	Name of Exempt Organization	Employer identif					
Type or print	KUHLE FAMILY FOUNDATION	20-39957	55				
File by the	Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only					
extended	2425 EAST CAMELBACK ROAD, SUITE 750						
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions	/					
return Sec	9	,			*** ' ' ' '		
	ype of return to be filed (File a separate application for each return)						
1 1	orm 990 X Form 990-PF	Form 1041- A	Γ	□ F	Form 6069		
_	orm 990-B L Form 990-T (sec 401(a) or 408(a) tr ust)	Form 4720	F	_	orm 8870		
_	orm 990-EZ Form 990-T (trust other than above)	Form 5227					
	Oo not complete Part II if you were not already granted an automatic 3-mon		ously	filed	Form 8868.		
	ooks are in the care of THE FOUNDATION	<u> </u>					
	hone No ▶ 602 866-0900 FAX No ▶			_			
	organization does not have an office or place of business in the United States, che	ck this box		-	▶□		
	is for a Group Return, enter the organization's four digit Group Exemption Number		this is	s			
	whole group, check this box If it is for part of the group, check this b		ch a				
	the names and EINs of all members the extension is for						
4 l r	equest an additional 3-month extension of time until 11/15/2010						
5 Fo	r calendar year 2009, or other tax year beginning	and ending					
		, , , , , , , , , , , , , , , , , , , ,	e in	acco	unting period		
6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period 7 State in detail why you need the extension INFORMATION NECESSARY TO PREPARE A COMPLETE A							
AC	CURATE RETURN IS NOT YET AVAILABLE.						
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentative tax, less any	T	Ι			
no	nrefundable credits. See instructions	•	8a	\$	4,000.		
b If	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	credits and estimated	. %				
ta	payments made include any prior year overpayment allowed as a credit	and any amount paid					
pre	eviously with Form 8868	·	8b	\$	4,000.		
c Ba	lance Due. Subtract line 8b from line 8a Include your payment with this form,	or, if required, deposit					
WI	th FTD coupon or, if required, by using EFTPS(Electronic Federal Tax Payment S	ystem) See instructions	8c	\$	0.		
	Signature and Verification						
	nalties of perjury, I declare that I have examined this form, including accompanying schedules an	d statements, and to the best	of my	know	ledge and belief,		
it is true, o	correct, and complete, and that I am authorized to prepare this form						
Signature	► Title ►	Date	<u> </u>				
	KPMG LLP		Form	n 886	8 (Rev 4-2009)		
	60 EAST RIO SALADO PKWY, SUITE 800						

TEMPE, AZ 85281-9125