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Department of the Treasury

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation on may be able to use a copy of this return to satisfy state ret

OMB No 1545-0052 2009

| G Check all t | | or tax year beginning Initial return | | Initial return | of a former r | oublic char | ity | | Final | return |
|--|------------------------------------|--|---------------------|---------------------|--|-------------|----------|--|---|---------------------------------------|
| | ·· -F.F.A. | Amended return | 1 | | ss change | | — Š | ame change | | |
| | Name of four | | <u> </u> | 7.00.0 | or orange | | _ | A Employer identi | fication nu | mber |
| Use the IRS | • | FAMILY FOUNDA | TION | | | | ı | | | |
| label. | | ERT H. JOHNSON | | | | | l | 20-7203381 B Telephone number (see page 10 of the instructions) | | |
| Otherwise. | | street (or P O box number | | delivered to street | addmes) | Room/su | ite | | | |
| print | I Trainber and | Succes (OFF O BOX Holling | a ii iiigii is iiot | delivered to sheet | addressy | 11001117301 | ``` | D receptore name: (a | co page 10 of | |
| or type. | 3400 14 | 69TH STREET | | | | | ı | / 9 | 131 26 | 62-4135 |
| See Specific | | | | | | L | \dashv | C If exemption appli | | 52 4155 |
| Instructions. | City or town, | state, and ZIP code | | | | | ı | pending, check he | | · · · · · [|
| | CHARME | MIDGION WG C | C200 | | | | | D 1. Foreign organiz | | |
| | | MISSION, KS 6 | | | | | | Foreign organizes 85% test, check | | |
| | _ | tion: X Section 50 | | | | | 1 | computation | | |
| | | nexempt charitable trust | | ner taxable pr | | | | E If private foundati | on status wa | s terminated |
| | | 1,5 | _ | ethod: C | ash LX Acc | crual | | under section 507 | (b)(1)(A), che | ck here . 🕨 🗀 |
| | m Part II, col | . (c), line | Other (spe | | | | | F If the foundation | ıs ın a 60-mo | nth termination |
| 16) ▶ \$ | | | | (d) must be or | cash basis.) | | | under section 507 | | |
| | | nue and Expenses (77 | he (a) Re | evenue and | (b) Net inv | estment | (c | :) Adjusted net | | nsbursements r charitable |
| may r | ot necessarily | olumns (b), (c), and (d) equal the amounts in | èxp | enses per | incon | | ,, | income | | purposes |
| colum | n (a) (see pag | e 11 of the instructions).) | | books | | | | | | h basis only) |
| 1 Contribu | tion <u>s, gift</u> s, grants, | etc , received (attach schedule) oundation is not required to | | | <u> </u> | <u></u> | | · · · · · · · · · · · · · · · · · · · | | <u> </u> |
| 2 Check I | If the fo | oundation is not required to Sch. B | `. L | | , | | | | | ^ * |
| 3 Interest | | temporary cash investments | 1 | | | | | | | · · · · · · · · · · · · · · · · · · · |
| 4 Divider | nds and intere | st from securities | | 17,763. |] | 7,763. | | | ATO | CH 1 |
| I | | | | | | | | | | • |
| 1 | | ss) | l | | | | | | - > | |
| 1 - | | sale of assets not on line 10 | | 3,044. | - | | | | 1 | |
| ≥ b Gross s | ales price for all on line 6a | 16,408 | | | | ٠, | | - | | • (|
| 7 Capita | l gain net inco | me (from Part IV, line | CFIVE | D | | 3,044. | | · | _ | , 12, 3 |
| 8 Net sh | ort-term capita | | | 10 | | , | | | : | 7 |
| | e modifications | · 1 1 | | 10 8 | 4 * . | 7 | | | ٠. | , , |
| 10 a Gross sa | ales less returns | I OI MAI | i 2 9 20 | 110 12 | , | | | | 1 | • , |
| | wances · · · · · ost of goods sold | | | | 4 7,5" | | | | , | · · · , |
| | | (attach schedule) .OC | THERE | | _ | | | | | |
| 11 Other | ncome (attach | schedule) | | * | <u> </u> | | _ | | ` | -, |
| 1 | | rough 11 | | 20,807 | | 20,807. | | | ` | - 55 5 |
| <u> </u> | | | ` | 0 | l | | | | | <u> </u> |
| | | rs, directors, trustees, etcries and wages | • | | | ·· | | | | <u> </u> |
| 14 Other | | - | | | | | | | | |
| <u> </u> | | byee benefits | - | | | _ | | | | |
| iba Legal1 | | hedule) | | 2,060 | - | 0. | | | | 2,0 |
| D Accour | | ach schedule) | | | | | | <u>-</u> | | |
| c Other | | ees (attach schedule) | | | | | | | | |
| 17 Interes | | | | | | | | | | |
| 2 18 Taxes (| | (see page 14 of the instructions | | | | | | | | |
| 19 Depred | • | schedule) and depletion | , — | | | | | | | |
| 20 Occup | - | | | · - | | | | | | |
| 21 Travel, | | and meetings | | | | | | | | |
| हैं। 22 Printin | | tions | | 1 204 | | 1 204 | | | | |
| 23 Other | | ıch schedule) [2] | 1 - | 1,394 | | 1,394. | | | + | |
| ছ 24 Totalo | perating and | administrative expense | s. | 2 454 | | , ,,, | | _ | | 2 2 |
| 21 Travel, 22 Printin 23 Other 24 Total of Add Iir | es 13 through | 1 23 | | 3,454 | | 1,394. | | C | <u>'- </u> | 2,0 |
| 25 Contril | outions, gifts, | grants paid | | 22,715 | | | | | | 22,7 |
| 26 Total exp | enses and disbur | sements. Add lines 24 and 2 | 25 | 26,169 | | 1,394. | | C |) - | 24,7 |
| 27 Subtra | ct line 26 from | n line 12: | 4 1 12 | | 1. | . | • | - 5 | ľ | ` |
| a Excess of | f revenue over exp | penses and disbursements | | -5,362 | | 0~ | | | , , | , |
| 1 | estment inco | ome (if negative, enter -0- | -) | |] | 19,413. | | | | , , |
| D Net in | Country and | | | | | | | | | |

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 87773S A10P 3/19/2010 4:06:02 PM V 09-5

Form 990-PF (2009)

JSA



| P | art II | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End o | |
|-------------|----------------------|--|--|----------------|-----------------------|
| _ | | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | 5 465 | |
| | 2 | Savings and temporary cash investments | 2,301. | 5,465. | 5,465. |
| | 3 | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | ľ | | |
| | | disqualified persons (attach schedule) (see page 16 of the instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | ······································ | | |
| - | | Less. allowance for doubtful accounts ▶ | | | |
| S | | Inventories for sale or use | | | |
| Assets | | Prepaid expenses and deferred charges | | | |
| As | 10 a | Investments - U.S. and state government obligations (attach schedule) | | | |
| | b | Investments - corporate stock (attach schedule) | 201,925. | 193,399. | 501,437. |
| ٠ | | Investments - corporate bonds (attach schedule). | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | , , |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other (attach schedule) | | | - |
| | 14 | Land, buildings, and | · · · · | · | |
| | | equipment basis Less accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe | | | |
| | | Total assets (to be completed by all filers - see the | | | |
| | | instructions Also, see page 1, item I) | 204,226. | 198,864. | 506,902. |
| | | | | | , |
| | | Grants payable | | | , , , , |
| S | | Deferred revenue | | | * *** |
| Liabilities | | Loans from officers, directors, trustees, and other disqualified persons | | | |
| igi | | Mortgages and other notes payable (attach schedule) | | | |
| Ë | | Other liabilities (describe | | | |
| | | | - | | - (4) - (4) - (4) |
| | 23 | Total liabilities (add lines 17 through 22) | | | · |
| _ | | Foundations that follow SFAS 117, check here | | | . (1 |
| | | and complete lines 24 through 26 and lines 30 and 31. | } | | |
| es | 24 | Unrestricted | | | |
| Š | 25 | Temporarily restricted | | | |
| ala | 25 | | | | |
| e e | 24 25 26 27 | Foundations that do not follow SFAS 117, | | | |
| 'n | | check here and complete lines 27 through 31. | | | |
| F | 27 | Capital stock, trust principal, or current funds | | | |
| si | 20 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | , |
| Net Assets | | Retained earnings, accumulated income, endowment, or other funds | 204,226. | 198,864. | 1 |
| As | 30 | T i | | | |
| let | | Total net assets or fund balances (see page 17 of the | 204,226. | 198,864. | |
| ~ | 31 | instructions) | 201/2201 | | 1 |
| | 31 | ` . • | 204,226. | 198,864. | |
| ŀ | ort 11 | of the instructions) | | 150,004. | |
| _ | | | | agree with | |
| 1 | | net assets or fund balances at beginning of year - Part II, | | - | 204,226. |
| 2 | | of-year figure reported on prior year's return) | | | -5,362. |
| 2 | Ente | r amount from Part I, line 27a | | | -5,362. |
| | | | | ((| 100 064 |
| | | ines 1, 2, and 3 | | | 198,864. |
| 5 | Decr | eases not included in line 2 (itemize) | | 5 | 100.064 |
| <u>6</u> _ | Iotal | net assets or fund balances at end of year (line 4 minus li | ine 5) - Part II, column (b), | line 30 6 | 198,864. |

| Part IV | Capital Gains | and Losses for Tax on Inv | estment Income | T- 75 | | |
|-----------------|--|---|--|--|---|---------------------------------------|
| | | d describe the kind(s) of property sold (| | (b) How acquired P-Purchase | (c) Date acquired | (d) Date sold (mo., day, yr.) |
| e P | 2-story br E PART IV SCHE | rick warehouse; or common stock, 200 | sns MLC Co) | D-Donation | (mo., day, yr) | (, 00),),,) |
| | E PART IV SCHE | DOLE | | <u> </u> | | ļ· |
| _b | | | | | | |
| d d | | | | | | |
| e e | | | | | | |
| | | (f) Depreciation allowed | (g) Cost or other basis | | (h) Gain or (lo | ree) |
| (e) | Gross sales price | (or allowable) | plus expense of sale | | (e) plus (f) mini | |
| <u>a</u> | | | | | | |
| _b | | | | | | |
| C | | | | } | | |
| <u>d</u> | | | | | | |
| <u>e</u> | | | <u> </u> | ļ | | |
| Compl | ete only for assets st | | ned by the foundation on 12/31/69 | | Gains (Col (h) g | |
| (i) F.I | 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 | COI. | (k), but not less t Losses (from co | |
| a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | | | | | | |
| <u>e</u> | | | <u> </u> | | | |
| 2 Capit | al gain net income or | (not contal local | gain, also enter in Part I, line 7 | | | 2 044 |
| | | (11 | (loss), enter -0- in Part I, line 7 | 2 | | 3,044. |
| | | or (loss) as defined in sections 12 | | 1 1 | | |
| _ | | line 8, column (c) (see pages 13 | | l . i | | |
| | | ine 8 | | 3 | | |
| | | | uced Tax on Net Investment Ince e section 4940(a) tax on net investi | | | ····- |
| Was the | | · | outable amount of any year in the b | ase репо | d? [| Yes X No |
| | | | ; see page 18 of the instructions be | efore mak | ıng anv entries | |
| | (a) | (b) | (c) | l love man | (d) | · |
| Calendar | Base period years year (or tax year beginning in) | Adjusted qualifying distributions | Net value of nonchantable-use assets | | Distribution of (col. (b) divided by | col (c)) |
| | 2008 | 24,708. | 445,594. | | | 0.055450 |
| | 2007 | 29,644. | 470,120. | | | 0.063056 |
| | 2006 | 0. | 508,865. | <u> </u> | | 0.00000 |
| | 2005 | | | | | |
| | 2004 | | | , _ | | |
| | | | | | | 0 120506 |
| | I of line 1, column (d) | | | 2 | | 0.118506 |
| | | for the 5-year base period - divide | | 1 - 1 | | 0.00000 |
| num | ber of years the found | lation has been in existence if less | s than 5 years | 3 | | 0.039502 |
| 4 Ente | r the net value of non | charitable-use assets for 2009 fro | m Part X, line 5 | 4 | | 490,117. |
| 5 Mult | iply line 4 by line 3 | | | 5 | | 19,361. |
| | • | | | | | · · · · · · · · · · · · · · · · · · · |
| 6 Ente | r 1% of net investmer | nt income (1% of Part I, line 27b) | | 6 | | 194. |
| 7 Add | lines 5 and 6 | | | 7 | | 19,555. |
| 8 Ente | r qualifying distributio | ns from Part XII, line 4 | n Part VI, line 1b, and complete t | 8 | | 24,775. |
| It line Part | e 8 is equal to or gre VI instructions on pag | eater than line 7, check the box i e 18. | n Part VI, line 1b, and complete t | nat part | using a 1% ta: | x rate. See the |

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of | the ins | truction | 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 | · | 1 | 94. |
| | here ► X and enter 1% of Part I, line 27b | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% | | | لـــــ |
| | 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-) 2 | | <u></u> 1 | 94. |
| 3 | Add lines 1 and 2 | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 94. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | . 74. |
| 6 | Credits/Payments: | | | |
| | 2009 estimated tax payments and 2000 overpayment credited to 2009 | | • | . |
| | Exempt foreign organizations-tax withheld at source | | , | Ì |
| C | rax paid with application for extension of time to the (Form 8888) | | | |
| | Backup withholding erroneously withheld 6d 7 | | 8 | 318. |
| 7 | Total credits and payments. Add lines 6a through 6d | | | |
| 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. | | | 24. |
| 11 | Enter the amount of line 10 to be: Credited to 2010 estimated tax 624 Refunded 11 | | | |
| _ | 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 | T | Yes | No |
| | participate or intervene in any political campaign? | 1 a | | 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 | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | 9 | 4 5 |
| | (1) On the foundation >\$(2) On foundation managers >\$ | 1 | | **) |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | , ^ | , | 76 |
| | on foundation managers. ▶ \$ | · | <u></u> | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | . 2 | <u> </u> | 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 | | | X |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | . 3 | | X |
| 4a | • | | | $\frac{x}{x}$ |
| p | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | 1 |] |
| | 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: | ŀ | | 5 |
| | By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | ` ` |
| | conflict with the state law remain in the governing instrument? | 6 | | X |
| 7 | 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 | Х | |
| 8a | | • | | , |
| - | KS | | | |
| ь | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | _ | | |
| 7 | (or designate) of each state as required by General Instruction G? If "No," attach explanation | . 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | |
| | 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page | |] |] |
| | 27)? If "Yes," complete Part XIV | . 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| _ | names and addresses | . 10 | | X |

Form 990-PF (2009)

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X

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

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? . . .

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

| | rt VII-B Statements Regarding Activities for | or which form 4 | 720 May Be Requ | ired (continued) | | |
|----------|--|----------------------------|----------------------|---|-------------|--------------|
| 5a | During the year did the foundation pay or incur any amou | nt to: | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influer | | 4945(e))? | Yes X No | . | |
| | (2) Influence the outcome of any specific public election | = | | | | |
| | directly or indirectly, any voter registration drive? | • | - | Yes X No | | |
| | (3) Provide a grant to an individual for travel, study, or other | | | | 1 1 | |
| | (4) Provide a grant to an individual for travel, study, or our | - | · · | | | |
| | · · | | | Yes X No | | |
| | section 509(a)(1), (2), or (3), or section 4940(d)(2)? (| | | ,iesivo | |] } |
| | (5) Provide for any purpose other than religious, chantal | · | | Yes X No | | |
| | purposes, or for the prevention of cruelty to children of | | | , | ' | |
| þ | If any answer is "Yes" to 5a(1)-(5), did any of the trans | | | | | |
| | Regulations section 53.4945 or in a current notice regard | | | F-7 | · · 5b | |
| | Organizations relying on a current notice regarding disast | ter assistance check h | ere | ▶□ | | |
| ¢ | If the answer is "Yes" to question 5a(4), does the foundation | ation claim exemption f | rom the tax | | | |
| | because it maintained expenditure responsibility for the gi | rant? | | . Yes X No | | |
| | If "Yes," attach the statement required by Regulations sec | tion 53 4945-5(d) | | |) | |
| 6a | Did the foundation, during the year, receive any funds, of | lirectly or indirectly, to | pay premiums | | | |
| | on a personal benefit contract? | • | | Yes X No | | |
| ь | Did the foundation, during the year, pay premiums, direct | | | ∄ ? | 6b | X |
| | If "Yes" to 6b, file Form 8870. | | | | | |
| 7 a | At any time during the tax year, was the foundation a pa | rty to a prohibited tax | shelter transaction? | Yes X No | , | `, , |
| | If yes, did the foundation receive any proceeds or have a | | | | 7b | X |
| | rt VIII Information About Officers, Directors | | | | | |
| | and Contractors | | | | | |
| 1_ | | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Expens | e account |
| | (a) Name and address | hours per week | (If not paid, enter | employee benefit plans | | owances |
| | | devoted to position | -0-) | | Other and | 711411003 |
| | | devoted to position | -0-) | and deferred compensation | Other and | |
| Α̈́T | TACHMENT 3 | devoted to position | - 0-) 0. | | Other and | 0 |
| ΑŢ | TACHMENT 3 | devoted to position | -0-) | and deferred compensation | otter and | |
| ĀŢ | TACHMENT 3 | devoted to position | -0-) | and deferred compensation | Other and | |
| ΑŢ | | devoted to position | -0-) | and deferred compensation | Ottler all | |
| | | devoted to position | -0-) | and deferred compensation | Ottler alle | |
| | | devoted to position | -0-) | and deferred compensation | Ottler alle | |
| | | devoted to position | -0-) | and deferred compensation | Ottler alle | |
| | | devoted to position | 0. | and deferred compensation 0. | | |
| | Compensation of five highest-paid employees (ot | devoted to position | 0. | and deferred compensation 0. | | |
| | | devoted to position | 0. | e page 23 of the inst | ructions). | 0 |
| | Compensation of five highest-paid employees (ot | her than those inc | 0. | e page 23 of the inst | | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." | her than those inc | 0 . | e page 23 of the inst | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |
| | Compensation of five highest-paid employees (ot If none, enter "NONE." a) Name and address of each employee paid more than \$50,000 | her than those inc | 0 . | e page 23 of the inst (d) Contributions to employee benefit plans and deferred | ructions). | O e account, |

| Part VIII | Information About Officers, Directors, Trustees, Foundation Managand Contractors (continued) | ers, Highly Paid Employ | /ees, |
|--------------|---|-----------------------------|------------------|
| 3 Five high | est-paid independent contractors for professional services (see page 23 of | the instructions), If none, | enter "NONE." |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | | |
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| | | | |
| Total number | er of others receiving over \$50,000 for professional services | | ▶ NONE |
| | | | |
| Part IX-A | Summary of Direct Charitable Activities | | |
| | dation's four largest direct chantable activities during the tax year Include relevant statistical informations and other beneficiaries served, conferences convened, research papers produced, etc | ion such as the number | Expenses |
| | and differ building and day buildings controlled, papers processes, de | | |
| 1 N/A | | | |
| | | · | |
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| 2 | | | |
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| 3 | | | |
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| | | | |
| 4 | | | |
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| | | | |
| Part IX-B | Summary of Program-Related Investments (see page 23 of the instru | ctions) | |
| | two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | CHOI IS) | Amount |
| 1 NONE | the largest program related missing made by the learning me act year and all all a | | 711100111 |
| 1 NONE | | | İ |
| | | · | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| | ram-related investments. See page 24 of the instructions | | |
| 3 NONE | | | |
| | | | |
| | · | | |

20-7203381

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreignsee page 24 of the instructions.) | gn foundations | , |
|-----|--|------------------------|----------|
| 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 | 490,490. |
| b | Average of monthly cash balances | 1b | 7,091. |
| С | Fair market value of all other assets (see page 24 of the instructions) | 1c | 0. |
| d | Total (add lines 1a, b, and c) | 1d | 497,581. |
| 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 | <u> </u> |
| 3 | Subtract line 2 from line 1d | 3 | 497,581. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 | | |
| | of the instructions) | 4 | 7,464. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 490,117. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 24,506. |
| Pa | Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here and do not complete this private that the private is the private that the private is the private that the private is the private that th | ite operating part) | |
| 1 | Mınımum investment return from Part X, line 6 | 1 | 24,506. |
| 2 a | 104 | | |
| b | Income tax for 2009. (This does not include the tax from Part VI.) | 1 | |
| C | Add lines 2a and 2b | 2c | 194. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 24,312. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | | 5 | 24,312. |
| 6 | Add lines 3 and 4 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 | 24,312. |
| Pa | art XII Qualifying Distributions (see page 25 of the instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | 04 335 |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 24,775. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | <u> </u> |
| 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) | 3 b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 24,775. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | 1 _ 1 | 104 |
| | Enter 1% of Part I, line 27b (see page 26 of the instructions) | 5 | 194. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 24,581. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years. | vhether the found | dation |

| Pa | rt XIII Undistributed Income (see page 26 of the instructions) | | | | | | | | | |
|--------|---|--|---------------------|---|--|--|--|--|--|--|
| | | (a) | (b) | (c) | (d) | | | | | |
| 1 | Distributable amount for 2009 from Part XI, | Corpus | Years prior to 2008 | 2008 | 2009 | | | | | |
| | line 7 | | | | 24,312. | | | | | |
| 2 | Undistributed income, if any, as of the end of 2009 | | | | | | | | | |
| а | Enter amount for 2008 only | | | 14,117. | | | | | | |
| ь | Total for pnor years 20 07 ,20 06 ,20 05 | | | | | | | | | |
| 3 | Excess distributions carryover, if any, to 2009 | | | | | | | | | |
| а | From 2004 | | | | | | | | | |
| b | From 2005 | | | | | | | | | |
| C | From 2006 | | | | ` | | | | | |
| d | From 2007 | • | | | | | | | | |
| | From 2008 | | | | * | | | | | |
| f | Total of lines 3a through e | 0. | | | | | | | | |
| 4 | Qualifying distributions for 2009 from Part XII, | | | | Ì | | | | | |
| | line 4: ▶ \$ | , | | 14,117. | | | | | | |
| а | Applied to 2008, but not more than line 2a | | | 14,11, | · · · | | | | | |
| b | Applied to undistributed income of prior years (Election | , | | , | \ , <i>^</i> | | | | | |
| | required - see page 26 of the instructions) | | | | | | | | | |
| С | Treated as distributions out of corpus (Election required - see page 26 of the instructions) | | | | , , , , | | | | | |
| а | Applied to 2009 distributable amount | | | | 10,658. | | | | | |
| | Remaining amount distributed out of corpus | 0. | | | | | | | | |
| 5 | Excess distributions carryover applied to 2009 | 0. | | | 0. | | | | | |
| | (If an amount appears in column (d), the same | , | | | , ,, | | | | | |
| 6 | amount must be shown in column (a)) Enter the net total of each column as | | | | | | | | | |
| Ū | indicated below: | t . | , | , | | | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 0. | | | | | | | | |
| b | Prior years' undistributed income Subtract | × , , | | , | * | | | | | |
| | line 4b from line 2b | <u>, </u> | | , | The second | | | | | |
| 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 | 3 m, 11 m | | . , §, , | a grand a fai | | | | | |
| | been previously assessed | | | | | | | | | |
| d | Subtract line 6c from line 6b. Taxable | | | ,"", | *,* | | | | | |
| е | amount - see page 27 of the instructions Undistributed income for 2008. Subtract line | , , , , , , | | | | | | | | |
| | 4a from line 2a. Taxable amount - see page | | | j | ng κ ' γ γ γ γ γ γ γ γ γ γ γ γ γ γ γ γ γ γ | | | | | |
| | 27 of the instructions | | , | . , 4 | | | | | | |
| f | Undistributed income for 2009. Subtract lines 4d and 5 from line 1 This amount must be | * * * * * | ŧ | | | | | | | |
| | distributed in 2010 | ,, | | 3 | 13,654. | | | | | |
| 7 | Amounts treated as distributions out of corpus | | | , | , | | | | | |
| | to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the | | , | 47 / | , | | | | | |
| | 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. | 0. | , | , , , | ~ `, | | | | | |
| | Subtract lines 7 and 8 from line 6a | 0. | | | · | | | | | |
| | Analysis of line 9: | - | | | · . | | | | | |
| | Excess from 2005 | | | , | . * | | | | | |
| b | Excess from 2006 | | | | • | | | | | |
| c C | Excess from 2007 | \- , | | , , , | | | | | | |
| d e | Excess from 2008 | , | , | | | | | | | |
| _ | | | L | 1 | | | | | | |

| Pa | rt XIV Private Oper | rating Foundations (| (see page 27 of the | instructions and Pai | rt VII-A, question 9) | NOT APPLICABLE |
|--------|---|--|-----------------------------|--|--|--|
| 1 a | If the foundation has | | | | ating | |
| | foundation, and the rulin | g is effective for 2009, e | nter the date of the ruling | | . ▶ . | |
| b | Check box to indicate wh | | private operating found | | 4942(|)(3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- | Tax year | | Prior 3 years | | (e) Total |
| | Justed net income from Part I or the minimum investment return from Part X for each | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | |
| | year listed | | | | | |
| 0 | 85% of line 2a | | | | | |
| · | XII, line 4 for each year listed . | | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 a | 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 | | | | | |
| b | 4942(j(X)(B)(i) "Endowmen!" alternative test- enter 2/3 of minimum invest- ment return shown in Part X, | | | | | |
| | line 6 for each year listed | | | | | |
| С | "Support" alternative test - enter (1) Total support other than | | | | | |
| | gross investment income | | | | | |
| | (interest, dividends, rents, payments on secunties | | | | | |
| | loans (section 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public and 5 or more exempt organizations as provided in section 4942 | | | | | |
| | (j)(3)(B)(iii) | | | | | |
| | (4) Gross investment income. | | | | <u> </u> | <u> </u> |
| Pa | | ary Information (C during the year - se | | | ation had \$5,000 | or more in assets |
| _ | Information Regardin | <u> </u> | <u> </u> | structions. | | |
| a | List any managers of before the close of any | the foundation who h | nave contributed mor | e than 2% of the tota more than \$5,000). (So | l contributions receives section 507(d)(2).) | ved by the foundation |
| | ATTACHM | ENT 4 | | | | |
| b | List any managers of ownership of a partne | the foundation who | | | | / large portion of the |
| | NONE | | | | | |
| 2 | Information Regardin | g Contribution, Grant | , Gift, Loan, Scholarsl | hip, etc., Programs: | | |
| | | for funds If the foun | dation makes gifts, g | grants, etc. (see page | | and does not accept ons) to individuals or |
| а | The name, address, a | | of the person to who | m applications should b | e addressed: | |
| b | The form in which app | | bmitted and informati | on and materials they | should include. | |
| | ATTACHM | | | | | |
| С | Any submission deadl | ines: | | | | |
| | NONE | | | | 11. 6.14. 11 | 1 - 4 4 4 4 5 |
| d | Any restrictions or life factors: | | , such as by geogra | aphical areas, charita | ble fields, kinds of | institutions, or other |
| | _ ATTACHM | ENT 7 | | | | |

| Form 990-PF (2009) | | • | 20-7203381 | Page 11 |
|---------------------------------------|---|-------------------------|----------------------------------|---------|
| Part XV Supplementary Information (co | ontinued) | | | |
| 3 Grants and Contributions Paid Duri | ng the Year or Appr | oved for F | Future Payment | |
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | recipient | contribution | |
| a Paid during the year | | | | |
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| ATTACHMENT 8 | | | | |
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| Total | <u> </u> | | ▶ 3a | 22,715. |
| b Approved for future payment | | } | 1 | |
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| Total | <u> </u> | <u> </u> | <u></u> <u>▶</u> 3b | <u></u> |

| nter arece | amounts unless otherwise indicated. | Lincols | ated business income | Excluded by | section 512, 513, or 514 | (e) |
|-----------------------|--|--|---|--|---------------------------------|--|
| _ | | (a) Business code | (b) Amount | (c) | (d) Amount | Related or exempt function income (See page 28 of the instructions) |
| 1 Program | service revenue: | 20311635 (2008 | Amount | - Exclusion code | Anount | the instructions) |
| | | | | | | |
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| _ | | | | + | | |
| e | | | | | | |
| · — | | | | - | | |
| g Fees | and contracts from government agencies | | | | | |
| - | ship dues and assessments | | | | | |
| | n savings and temporary cash investments | | | | | |
| Dividend | ls and interest from securities | | | 14 | 17,763. | |
| Net renta | al income or (loss) from real estate: | ·· | | | | <u></u> |
| a Debt | t-financed property | | | | | |
| b Not | debt-financed property | | | | | |
| | I income or (loss) from personal property . | | <u> </u> | | | |
| | vestment income | | | 10 | 2.044 | |
| • | oss) from sales of assets other than inventory | | | 18 | 3,044. | <u> </u> |
| | me or (loss) from special events | | | | | |
| - | rofit or (loss) from sales of inventory | ,_ | | - | | |
| | venue: a | | | | | |
| | | | | - | | |
| | | | | | · · · · · | |
| d e | | | | - | | |
| . Subtotal | . Add columns (b), (d), and (e) | (k . | | } 41 | 20,807. | |
| Total A | id line 12, columns (b), (d), and (e) | | <u> </u> | | | |
| | | | | | | |
| ee worksh | neet in line 13 instructions on page 28 | to verify calci | ulations.) | | | |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | neet in line 13 instructions on page 28 B Relationship of Activities | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | xempt Purp | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte | ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
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| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| ee worksh art XVI- | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |
| | B Relationship of Activities Explain below how each activities the accomplishment of the fo | to verify calcusto to the Ac ty for which | ulations.) complishment of E ch income is reporte exempt purposes (| ed in column other than t | oses i (e) of Part XVI-A con | tributed importantly |

| Pa | rt XVI | Information I Exempt Orga | Regarding Tran nizations | sfers To and | Transact | ions a | nd Relation | onships \ | Nith N | onc | harit | able |
|-----------|--------------------------------|--|--|--------------------------|-------------------------------|--|---------------------------------|-------------------|--------------------------|-----------------|-------------------|------------------|
| 1 | in se | the organization directly ection 501(c) of the Co | | | | | | | | | Yes | No |
| а | organ Trans | izations? ifers from the reporting for | oundation to a nonch | arıtable exempt organi | zation of. | | | | | | | |
| | (1) C | ash | | | | | | | | 1a(1) | | X |
| | | ther assets | | | | | | | | 1a(2) | | X |
| b | | transactions: | | | | | | | | | | <u> </u> - |
| | | ales of assets to a nonch | | | | | | | | 1b(1) | | X |
| | | urchases of assets from | | | | | | | | 1b(2) | | X |
| | | ental of facilities, equipm | | | | | | | | 1b(3) | | ^ |
| | | eimbursement arrangeme | | | | | | | 1 | 1b(4) | | X |
| | | oans or loan guarantees erformance of services o | | | | | | | | | | X |
| С | | ng of facilities, equipmen | | | | | | | | 1c | _ | Х |
| | | e answer to any of t | | | | | | | | | fair r | narket |
| _ | | of the goods, other | | | | | • • | = | | | | |
| | | in any transaction or | | • | _ | | | | | | | |
| | | | | | | | | | | | | |
| (a) | Line no | (b) Amount involved | (c) Name of nonch | nantable exempt organiza | | | ption of transfe | rs, transactions | , and shan | пд апта | ngeme | nts |
| | | N/A | _ | <u> </u> | | N/A | | | | | | |
| | | | <u> </u> | | | | | | | | | |
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| | | | | | | | | | | | | |
| 2a | | e foundation directly or | • | | | e tax-ex | empt organiz | ations descri | | _ | _ | 7 |
| | | on 501(c) of the Code (oth | - | :)(3)) or in section 527 | ⁷⁷ | | | | L | Ye | s 🗀 | No 🔀 |
| b | If "Ye | s," complete the following | | (L) T (| | | | | f .1=1===1 | | | |
| | | (a) Name of organization | <u> </u> | (b) Type of organ | nization | | (C |) Description | of relations | пр | | |
| | | | | | | | | | | | | |
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| | | | | <u> </u> | | _ | | | | | | |
| | | | | | | | | | | | | |
| | Under belief, | penalties of perjury, I declar it is true, correct, and comp | ire that I have examine plete Declaration of pre | d this return, including | accompanyıı yer or fiducia | ng schedu iry) is base | iles and statemed on all inform | ents, and to that | he best of preparer | my kr has ar | nowled by know | ge and wledge |
| - 1 | | / d _ | $-\sqrt{2}$ | / | 1 | 3/22/1 | . | Trui | / . | | | |
| ø | <u>S</u> 1 | ignature of officer or trustee | | | | <i>2 </i> | <u> </u> | Title | 22 | | | |
| Sign Here | | gs.or or or or or or | | | Date | | <u> </u> | | eparer's i | dentify | /ina | |
| = | 'n _ | Droposed: | _ , , , | | / | 1 | Check if self-employe | nu | mber (See ge 30 of th | Signa | ture o | n N |
| Sig | Pre d | Preparer's signature | Sel LL | _ | 3/2 | 2/10 | Son-employe | | \$ 00 0 0 0 | | | , |
| | Paid Preparer's Use Only | Firm's name (or yours if | CBIZ MHM | , LLC | | | | | -18742 | | | |
| | g S | self-employed), address, | 11440 TO | MAHAWK CREEK | PARKWA | Y | | | | | | |
| 1 | | and ZIP code | | | | | 11 | Phone no. | 913.23 | 4.1 | 000 | |

Form 990-PF (2009)

SCHEDULE D (Form 1041)

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

Department of the Treasury Internal Revenue Service Name of estate or trust

JOHNSON FAMILY FOUNDATION

C/O ROBERT H. JOHNSON, JR.

Employer identification number

20-7203381

| | Form 5227 filers need to complete only Par | | 11-11-0 V- | | | |
|---------|---|------------------------------------|----------------------------------|-------------------------|----------------------------------|--|
| Par | | (b) Date acquired | (c) Date sold | ar or Less | (e) Cost or other bas | |
| | (a) Description of property (Example 100 shares 7% preferred of "Z" Co) | (mo , day, yr) | (mo , day, yr) | (d) Sales price | (see page 4 of the instructions) | the entire year Subtract (e) from (d) |
| 1a | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| | | <u> </u> | | <u> </u> | <u> </u> | |
| | Catanatha abant tanna can as (local) if any fi | mm Cabadula D | 4 loo 4b | | | 721. |
| D | Enter the short-term gain or (loss), if any, fi | om Schedule D | -1, line 1b | • • • • • • • • • • • • | | /21. |
| 2 | Short-term capital gain or (loss) from Form | s 4684, 6252, | 6781, and 882 | 4 | | 2 |
| | | | | | | |
| 3 4 | Net short-term gain or (loss) from partners Short-term capital loss carryover. Enter the | | | | | 3 |
| 4 | Carryover Worksheet | - | | | | , () |
| 5 | Net short-term gain or (loss). Combine line | s 1a through 4 | in column (f). | Enter here and on lir | ne 13, | |
| _ | column (3) on the back | <u> </u> | <u> </u> | <u> </u> | <u> </u> | 721. |
| Par | | | | e Year | (e) Cost or other bas | is (f) Gain or (loss) for |
| | (a) Description of property (Example 100 shares 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) | |
| - 6a | | | | | | |
| | | | | <u> </u> | <u> </u> | |
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| | | 1 | | | | |
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| | | | | - | | |
| b | Enter the long-term gain or (loss), if any, from | om Schedule D- | 1, line 6b | | | 3b 2,323. |
| 7 | Long-term capital gain or (loss) from Form | s 2439, 4684, (| 6252, 6781, ar | nd 8824 | | 7 |
| 8 | Net long-term gain or (loss) from partnersh | ips, S corporati | ons, and other | estates or trusts | | 3 |
| 9 | Capital gain distributions | | | | |) |
| 10 | Gain from Form 4797, Part I | | | | 1 | 0 |
| 11 | Long-term capital loss carryover Enter the | amount, if any | , from line 14 o | f the 2008 Capital Lo | ss | |
| | Carryover Worksheet | | | | 1 | 1 () |
| 12 | Net long-term gain or (loss). Combine lines | 6 6a through 11 | in column (f). | Enter here and on lir | ne 14a, | 2,323. |
| | column (3) on the back | <u> </u> | <u> </u> | <u> </u> | <u> ▶</u> 1 | 2,323. |

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

| | dule D (Form 1041) 2009 | | · · | | | Page 2 |
|-----------|--|-------------|---|-------------------------|-------------------|--|
| Pa | t III Summary of Parts I and II Caution: Read the instructions before completing this part | | (1) Beneficiaries' (see page 5) | (2) Es or tru | | (3) Total |
| 13 | Net short-term gain or (loss) | | | | | 721. |
| 14 | Net long-term gain or (loss): | | | | | |
| а | Total for year | a | | | | 2,323. |
| | Unrecaptured section 1250 gain (see line 18 of the wrksht.) 141 | - | | | | |
| С | 28% rate gain | -+ | | | | 3 744 |
| | Total net gain or (loss). Combine lines 13 and 14a | | | | | 3,044. |
| to Pa | e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 99 art V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV. | 90- V ai | T, Part I, line 4a) If lines nd the Capital Loss Cam | 14a and 1 yover Work | 5, colu sheet, | imn (2), are net gains, go as necessary |
| Pai | t IV Capital Loss Limitation | | | | | - |
| 16 | | | | | | , |
| a Note | The loss on line 15, column (3) or b \$3,000 | lino | 22 for Form 000 T lin | | 16 | omplete the Capital Loss |
| Cam | over Worksheet on page 7 of the instructions to figure your capital loss carryover. | | 22 (OF FOITH 950-1, IIII | | 1055, 0 | Omplete the Capital 2003 |
| Pai | Tax Computation Using Maximum Capital Gains Rates | | | | | |
| | n 1041 filers. Complete this part only if both lines 14a and 15 in column | | | ount is er | tered | in Part I or Part II and |
| | e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more the | | | | | |
| | tion: Skıp thıs part and complete the worksheet on page 8 of the instruction ither line 14b, col (2) or line 14c, col. (2) is more than zero, or | IS II | : | | | |
| | 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 are ga | ains | s, or qualified divide | nds are i | nclude | ed in income in Part I |
| | orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part at | nd | complete the works | heet on p | age 8 | 3 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 | | | | | |
| | 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 | | | | | |
| 22 | amount from line 4g; otherwise, enter -0 | | | | | |
| 22 23 | Subtract line 21 from line 20. If zero or less, enter -0- Subtract line 22 from line 17. If zero or less, enter -0- | • • | - 22 23 | | } | |
| 23 | Subtract line 22 from line 17. If Zero or less, enter -0- | • • | . 23 | | 1 | |
| 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? | • • | . 24 | | 1 '. ' | 1 |
| | 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 | | 1 / | |
| 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 line 22 | | 27 | | | |
| | | | 1 | | | |
| 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 Rate So | | | | | |
| | (see the Schedule Ginstructions in the instructions for Form 1041) | | | | 31 | |
| | | | | | | |
| 32 | Add lines 30 and 31 | | | <u></u> | 32 | |
| 22 | - Electric About and About a construction and the About Control Contro | | dula fau Catatau and | J T4- | | |

Schedule D (Form 1041) 2009

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34

Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule Ginstructions in the instructions for Form 1041)..............

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

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ See instructions for Schedule D (Form 1041).

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust JOHNSON FAMILY FOUNDATION

Employer identification number 20-7203381

| art I Short-Term Capital Gains an | | | 400 | | |
|--|---|----------------------------------|--|--|--|
| (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 |
| HESS CORP | VARIOUS | VARIOUS | 129. | 0. | 129 |
| KANSAS CITY SOUTHERN | 12/15/2008 | 03/12/2009 | 5,012. | 4,420. | 592 |
| | | | · - · - · - · - · - · - · · - · · · · · | | |
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| | | 1 | | } | |

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

721.

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side

Employer identification number

| Part II Long-Term Capital Gains | | | | (a) Card and the same | |
|--|---|---------------------------------|--|--|---|
| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo , day, yr) | (c) Date sold (mo , day, ут) | (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) |
| FRONTIER OIL CORP | 04/08/2008 | 12/29/2009 | 1,164. | 2,778. | -1,614 |
| HESS CORP | 12/04/2003 | 12/29/2009 | 4,590. | 1,166. | 3,424. |
| PILGRIMS PRIDE CORP | 06/25/2007 | 10/14/2009 | 5,513. | 5,000. | 513. |
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| 6b Total. Combine the amounts in colu | umn (f). Enter here ar | nd on Schedule D, I | ine 6b | | 2,323. |

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME Date Date sold Kind of Property Description acquired Gross sale Depreciation Cost or FMV Adj. basış Excess of Gain price less allowed/ as of FMV over other as of 12/31/69 adı basis (loss) allowable 12/31/69 expenses of sale basis **VARIOUS** HESS CORP **VARIOUS** 129. 129. 12/15/2008 KANSAS CITY SOUTHERN 03/12/2009 592. 5,012. 4,420. 04/08/2008 12/29/2009 FRONTIER OIL CORP 1,164. 2,778. -1,614.12/04/2003 HESS CORP 12/29/2009 3,424. 4,590. 1,166. 06/25/2007 10/14/2009 PILGRIMS PRIDE CORP 5,513. 5,000. 513. 3,044. TOTAL GAIN(LOSS)

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

| NET INVESTMENT INCOME | 17,763. | 17,763. |
|---|----------|---------|
| REVENUE AND EXPENSES PER BOOKS | 17,763. | 17,763. |
| | | TOTAL |
| NO | | |
| DESCRIPTION | UMB BANK | |

ATTACHMENT 2

- OTHER EXPENSES FORM 990PF, PART I REVENUE AND

PER BOOKS 1,394. EXPENSES

NET INVESTMENT INCOME 1,394.

TOTALS

DESCRIPTION INVESTMENT FEES

1,394.

1,394.

4:06:02 PM V 09-5

PAGE 16

DIRECTORS, AND TRUSTEES

- LIST OF OFFICERS,

PART VIII

FORM 990PF,

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0

1.00

SHAWNEE MISSION, KS 66208

ROBERT H. JOHNSON, JR. 3408 WEST 69TH STREET

NAME AND ADDRESS

TRUSTEE

COMPENSATION

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION 0

。

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ATTACHMENT

| EXPENSE ACCT AND OTHER ALLOWANCES | 0 | 0 | 0 | | |
|---|----|---|----|--|--|
| CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | .0 | | 0. | | |

GRAND TOTALS

1.00

SHAWNEE MISSION, KS 66208

3408 WEST 69TH STREET

DIANE K. JOHNSON

TRUSTEE

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

ROBERT H. JOHNSON, JR. DIANE K. JOHNSON

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ROBERT H. OR DIANE K. JOHNSON 3408 WEST 69TH STREET SHAWNEE MISSION, KS 66208 816-292-2000

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATION FORM NOT REQUIRED. THE FOUNDATION REQUIRES THAT A CHARITY RECIPIENT PREPARE A PROPOSAL SETTING FORTH THE USE OF THE GRANT FUNDS AND THE REPORTING REQUIREMENTS OF THE CHARITY. THE FOUNDATION WILL ALSO AUTHORIZE THE RECOVERY OR RETURN OF FUNDS THAT ARE NOT USED PROPERLY.

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

ALL RECIPIENTS WILL BE 501(C)(3) TAX EXEMPT ENTITIES AND THERE WILL BE NO RELATIONSHIP BETWEEN THE RECIPIENT AND THE FOUNDATION. THE FOUNDATION WILL REQUIRE ALL CHARITIES TO COMPLY WITH THE TERMS OF THE GRANTS AND GIVE AN ANNUAL REPORT AS TO THE USE OF THE FUNDS AND THE STATUS OF ANY ON-GOING PROJECTS. IF NECESSARY, THE FOUNDATION WILL REQUIRE UPDATED BUDGET INFORMATION OR ADDITIONAL REPORTS TO ENSURE THE FUNDS ARE BEING USED PROPERLY.

ATTACHMENT 8 (CONT'D)

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

| | AMOUNT | 100 | 700 | 1,000 | 300 | 100 | .05 | 200 | 1,000. | 100. | 100 |
|---|------------------------------------|-----------------------------------|--|---|---|---|---|--|--|---------------------------------------|--|
| | PURPOSE OF GRANT OR CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTIONS | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTIONS | CHARITABLE CONTRIBUTIONS |
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | AND FOUNDATION STATUS OF RECIPIENT | NONE 501 (C) (3) | NONE 501(C)(3) | NONE 501(C)(3) | NONE 501(C)(3) | NONE 501 (C) (3) | NONE 501 (C) (3) | NONE 501 (C) (3) | NONE 501(C)(3) | NONE 501(C)(3) | NONE 501 (C) (3) |
| | RECIPIENT NAME AND ADDRESS | PAMS CHICAGO CHICAGO, IL 60609 | KANSAS CITY 200 KANSAS CITY, MO 64132 | KAUFFMANN CENTER FOR THE PERFORMING ARTS KANSAS CITY, MO 64106 | ST. ANN'S CHURCH PRAIRIE VILLAGE, KS 66208 | OPERATION BREAKTHROUGH KANSAS CITY, MO 64141 | GREATER KANSAS CITY COMMUNITY FOUNDATION KANSAS CITY, MO 64105 | SHAWNEE MISSION EDUCATION FOUNDATION SHAWNEE MISSION, KS 66204 | JUVENILE DIABETES RESEARCH FOUNDATION KANSAS CITY, MO 64105 | HOSPICE OF SALINA SALINA, KS 67402 | AMERICAN CANCER SOCIETY MERRIAM, KS 66204 |

| ATTACHMENT 8 (CONT'D) | | AMOUNT | 100 | . 000 . | . 005 | • |
|---|---|----------------------------------|---|---|---|---|
| | | PURPOSE OF GRANT OR CONTRIBUTION | CHARITABLE CONTRIBUTIONS | CHARITABLE CONTRIBUTIONS | CHARITABLE CONTRIBUTION | CHARITABLE CONTRIBUTION |
| PAID DURING THE YEAR | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | FOUNDATION STATUS OF RECIPIENT | NONE 501(C)(3) | NONE 501(C)(3) | NONE 501(C)(3) | NONE 501(C)(3) |
| FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR | | RECIPIENT NAME AND ADDRESS | ST. LUKE'S HOSPITAL FOUNDATION KANSAS CITY, MO 64150 | VILLAGE CHURCH PRAIRIE VILLAGE, KS 66208 | THE CARING FOR CARCINOID FOUNDATION BOSTON, MA 02116 | MIZZOU ALUMNI ASSOCIATION COLUMBIA, MO 65211 |



UMB Bank, n.a. P.O. Box 419692 Kansas City, MO 64141-7014

Account Title

Account Number

Cust. Johnson Family Foundation Cust. Johnson Family Foundation PRI USD

Statement of Investment Position

| Units | Cost Basis | s | Mark | Market Value | Jo % | Estimated |
|---------------------------------|------------|------|-------|--------------|---------|---------------|
| Original Face Asset Description | Total | Unit | Total | Price | Account | Annual Income |
| Equity Securities | | | | | | |
| Common Stock | | | | | | |

Market Yield

| | 0.66 | 3.86 | 2.04 | 2.66 |
|------------------------------------|----------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| | 160.00 | 6,210.00 | 4,796.00 | 82.87% 11,166.00 82.87% 11,166.00 |
| 0.00% | 4.77% | 31.70% | 46.40% | 82.87% 82.87% |
| | 60.50 | 23.29 | 53.45 | |
| | 24,200.00 | 160,701.00 | 235,180.00 | 420,081.00 420,081.00 |
| | 15.55 | 8.88 | 9.75 | |
| | 6,219.00 | 61,289.91 | 42,879.41 | 110,388.32 |
| Frontier Oil Corp FTO 35914P105 | Hess Corp HES 42809H107 | NASB Financial Inc NASB 628968109 | Wal Mart Stores Inc WMT 931142103 | Total Common Stock iecurities |
| | 400 | 0069 | 4400 | Total Total Equity Securities |

Account Title

Cust. Johnson Family Foundation Cust. Johnson Family Foundation PRI USD

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Account Number

Statement of Investment Position (continued)

| Market | Yield | | 8.38 | 8.31 | 8.17 | 10.14 | 6.96 | 7.71 | 7.87 | 8.40 |
|--------------|--|-----------------|--|---|---|---|---|--|---|---|
| Estimated | Annual Income | | 412.50 | 787.50 | 425.00 | 418.75 | 343.75 | 387.50 | 700.00 | 387.50 |
| Jo % | Account A | | %26.0 | 1.87% | 1.03% | 0.81% | 0.97% | %66:0 | 1.76% | 0.91% |
| Market Value | Price | | 98.50 | 94.75 | 104.00 | 82.63 | 98.75 | 100.50 | 89.00 | 92.25 |
| Mark | Total | | 4,925.00 | 9,475.00 | 5,200.00 | 4,131.25 | 4,937.50 | 5,025.00 | 8,900.00 | 4,612.50 |
| Sis | Uait | | 0.97 | 0.97 | 66.0 | 1.00 | 0.95 | 0.97 | 0.92 | 1.00 |
| Cost Basis | Total | | 4,837.50 | 9,725.00 | 4,929.00 | 4,975.00 | 4,750.00 | 4,862.50 | 9,175.00 | 5,000.00 |
| ts | Original Face Asset Description Income Securities | spu | Berry Petroleum Co DTD 10/24/2006 8.250% 11/1/2016 Call 11/01/11 @ 104.13 B 085789AC9 | Carriage Services Inc DTD 7/15/2005 7.875% 1/15/2015 B- 143905AJ6 | Frontier Oil Corp DTD 9/17/2008 8,500% 9/15/2016 Sr Unsecured Notes BB 35914PAJ4 | Greenbrier Companies Inc DTD 5/11/2005 8.375% 5/15/2015 CCC 393657AB7 | Inergy LP/Inergy Fin DTD 6/15/2005 6.875% 12/15/2014 Senior Notes B+ 45661TAB7 | Iron Mtn Inc PA DTD 12/30/2002 7.750% 1/15/2015 B+ 462846AB2 | Isle of Capri Casinos Inc DTD 3/3/2004 7.000% 3/1/2014 Sr Sub Notes CCC+ 464592AG9 | Smithfield Foods Inc DTD 6/22/2007 7.750% 7/1/2017 |
| Units | Original Face Asset Des Fixed Income Securities | Corporate Bonds | 5000 | 10000 | 2000 | 2000 | 2000 | 2000 | 10000 | 2000 |

Account Title

Statement of Investment Position (continued)

| Units | | Cost Basis | | Market Value | Value | Jo % | Estimated | Market |
|-------------------------------|---|------------|------|--------------|--------|------------|---------------|--------|
| Original Fac | Original Face Asset Description Senior Notes B- 832248AQ1 | Total | Unit | Total | Price | Account An | Annual Income | Yield |
| 10000 | Swift Energy Co DTD 6/1/2007 7.125% 6/1/2017 Company Guarnt BB- 870738AF8 | 9,575 00 | 0.96 | 9,450.00 | 94.50 | 1.86% | 712.50 | 7.54 |
| 2000 | United Auto Group Inc DTD 12/7/2006 7.750% 12/15/2016 Company Guarnt B- 909440AP4 | 4,968.75 | 66.0 | 4,837.50 | 96.75 | 0.95% | 387.50 | 8.01 |
| 10000 | United Refining Co DTD 8/6/2004 10:500% Ser 2 8/15/2012 Company Guarnt B 911358AF6 | 10,262 50 | 1.03 | 9,425.00 | 94.25 | 1.86% | 1,050.00 | 11.14 |
| 10000 | Warner Chilcott Corp DTD 2/1/2006 8.750% 2/1/2015 B+ 93443MAC5 | 9,950.00 | 1.00 | 10,437.50 | 104.38 | 2.06% | 875.00 | 8.38 |
| | Total Corporate Bonds | 83,010.25 | | 81,356.25 | | 16.05% | 6,887.50 | 8.47 |
| Total Fixed Income Securities | ome Securities | 83,010.25 | | 81,356.25 | | 16.05% | 6,887.50 | 8.47 |
| Cash & Equivalents | ents | | | | | | | |
| Money Market Funds | spun | | | | | | | |
| 5465.17 | Scout Federal Money Market Inv. UMFXX 81063U701 | 5,465.17 | 1.00 | 5,465.17 | 1.00 | 1.08% | 1.08 | 0.02 |
| | Total Money Market Funds | 5,465.17 | | 5,465.17 | | 1.08% | 1.08 | 0.02 |
| Total Cash & Equivalents | quivalents | 5,465.17 | | 5,465.17 | | 1.08% | 1.08 | 0.02 |
| Total Assets | | 198,863.74 | | 506,902.42 | | 100.00% | 18,054.58 | 3.56 |
| Account Total | _ | 198,863.74 | | 506,902.42 | | | | |