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Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Treated as a Private Foundation

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

OMB No 1545-0052

2009

For calend	ar year 2009, or tax year beginning		, and ending		
G Check a	ıll that apply: Initial return	Initial return of a fo	rmer public charity	Final return	l
	Amended return	Address chang	je <u> </u>	Name change	
Use the IR	Name of foundation			A Employer identification	number
label.	THE NEHRING FAMILY FO	UNDATION			
Otherwise	e, C/O FLOYD TROUTEN, SS	&G		34-1838148	
print	Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
or type.	DATES BORON ROLL			440-248-87	'87
See Specia	City or town, state, and ZIP code			C if exemption application is p	ending, check here
111811 0011011	SOLON, OH 44139			D 1. Foreign organizations	s, check here . \blacktriangleright
	ype of organization: X Section 501(c)(3) ex	kempt private foundation		Foreign organizations me check here and attach co	eeting the 85% test, omputation
Sect	tion 4947(a)(1) nonexempt chantable trust	Other taxable private founda	tion	E If private foundation sta	tus was terminated
I Fair mark	ket value of all assets at end of year J Account	ing method: X Cash	Accrual	under section 507(b)(1)(A), check here
•	art II, col. (c), line 16)	ther (specify)		F If the foundation is in a	60-month termination
▶\$	19,417. (Part I, colu	ımn (d) must be on cash b	oasis)	under section 507(b)(1)(B), check here . 🕨
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 0	Contributions, gifts, grants, etc., received		~	N/A	
2 0	Check X If the foundation is not required to attach Sch. B				
3 8	nterest on savings and temporary cash investments	2.	2.		STATEMENT 1
	Dividends and interest from securities	885.	885.		STATEMENT 2
5a 0	Gross rents				
b١	Net rental income or (loss)		-	,	
⊕ 6a ∧	Net gain or (loss) from sale of assets not on line 10	895.			
Bevenue	Gross sales price for all assets on line 6a 5,653.				
8 7 c	Capital gain net income (from Part IV, line 2)		895.		
<u> </u>	Vet short-term capital gain				
Q° C	TOTE Modifications				
	1()				
	ess Cost of goods sold	, .			
N Adu	Gos Boldiloss)		· · · · · · · · · · · · · · · · · · ·		
_ ' ' '	orner income . 1821 .	4 700	4 700		
	rotal: Add lines Parough 11	1,782.	1,782.		
	enmensation of utilizers, directors, trustees, etc		0.	 	0.
- 1	Other employee salaries and wages			- "	
g 15 F	Pension plans, employee benefits	5,425.	0.		5 425
= 1	Legal fees STMT 3 Accounting fees STMT 4	4,625.	0.		5,425. 4,625.
		4,023.	<u> </u>		4,025.
ml c	Other professional fees Interest				
18 18 7 18 18 7	Taxes STMT 5	36.	0.		0.
	Depreciation and depletion	30.	<u> </u>		· · · · · · · · · · · · · · · · · · ·
E 20	Decupancy		<u></u>		
¥ 21 7	Travel, conferences, and meetings				
73	Printing and publications		···········		
ē 23 (Other expenses STMT 6	202.	0.		202.
.= 1	Total operating and administrative				1 2020
ig .	expenses. Add lines 13 through 23	10,288.	0.		10,252.
O 25	Contributions, gifts, grants paid	3,000.	· · · · · · · · · · · · · · · · · · ·		3,000.
	Total expenses and disbursements.				, , , , , , , , , , , , , , , , , , ,
	Add lines 24 and 25	13,288.	0.		13,252.
	Subtract line 26 from line 12:			1	<u> </u>
i i	Excess of revenue over expenses and disbursements	-11,506.			
	Net investment income (If negative, enter -0-)		1,782.		
	Adjusted net income (if negative, enter -0-).			N/A	
923501 02-02-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions.		Form 990-PF (2009)

Cash - non-referes bearing Cash - non-referes		art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End or	f year
Sorrogs and fempoarcy cash evestments 3 Accounts receivable ► Less silvourance for deabtid accounts ► 4 Pellogs receivable 5 Grants receivable 5 Grants receivable 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Breening of Sealer cutter 7 Breening of Sealer cutter 8 Breening of Sealer cutter 8 Breening of Sealer cutter 9 Pregued expenses and deferred charges 10 Investments - Comparate blook 11 Investments - Comparate blook 12 Investments - Comparate blook 13 Investments - Comparate blook 14 Land, fluidings, and equipment basis ► 15 Other assess (describe ► 15 Other assess (describe ► 16 Total assest (to be completed by all filters) 16 Total assest (be be completed by all filters) 19 Deferred revenue 10 Deferred revenue 11 Mortgags and equipment basis ► 12 Investments - Comparate blook 19 Deferred revenue 10 Deferred revenue 11 Causes from officers, devices, trustees, and dever departed pressue 11 Mortgags and equipment basis Sealer 12 Mortgags and equipment basis Sealer 12 Investments - Comparate blook 15 Total assest (be not be completed by all filters) 19 Deferred revenue 10 Deferred revenue 11 Mortgags and other notes payable 12 Total flabilities (action fees 1 through 22) 10 Total flabilities (action fees 1 through 22) 10 Total flabilities (action fees 1 through 28 and lines 30 and 31. 10 Total in a sealer of persons that follow \$F4.5 117, check here Sealer 10 Total in a sealer of persons but follow \$F4.5 117, check here Accomplete lines 2 through 28 and lines 30 and 31. 10 Total in a sealer of mort flabilities and net assess/mort flowed on line 2 (termops) 1. 10 Total in a sealer or from balances as beginning of year - Part II, column (b), line 30 (must agree with end-civity and purpoped or prior year's return) 1	, L <u>r</u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable		1	Cash - non-interest-bearing	5,763.		
Less allowance for doubtful accounts ▶ 4. Pelidager screwhole ▶ 5. Grants receivable 5. Grants receivable 5. Grants receivable 6. Receivable out on officers, directors, rustees, and other disqualified persons 7. Where has text rescribe 1. Less allowance for doubtful accounts ▶ 1. Less allowance for foother full accounts ▶ 1. Less allowance for foother full accounts ₱ 1.		2	Savings and temporary cash investments			
Pricegor scenariols		3	Accounts receivable ▶			
Pricegor scenariols			Less: allowance for doubtful accounts	*		-
S Grafts receive the Country of		4				· · · · · · ·
S Grants recovable 6 Reconsides due from officers, directors, trustees, and other disqualified persons 7 bee mate relieve receive 1 beest individence for doubtful accounts b Less: allowance for doubtful accounts b Less: allowance for doubtful accounts b Less: allowance for doubtful accounts b 1 inventiments - caponate stock c investments - cuts and state government obligations b investments - corporate bonds 1			Less: allowance for doubtful accounts			`
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disqualified persons 7 ther rots indisasteroids 8 Inventiones for a count of accounts 9 Prepared expenses and olderred charges 10 Investments - Congrate stock c Investments - congrate s		6	Receivables due from officers, directors, trustees, and other			
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		7				,
Investments - U.S. and state government obligations b Investments - Corporate stock c Investm		`			. ^	~
Prepare exponess and detered charges	Ø	8	Inventories for cale or use		1	
b Investments - corporate stock c Investments - corporate stoc	set	9				
b Investments - corporate stock c investments - corporate bonds 11 Investments - corporate bonds 11 Investments - mortgage leans 13 Investments - other 13 Investments - other 14 Land, buildings, and equipment basis 15 Other assets (describe	As	1 -	• • • • • • • • • • • • • • • • • • • •			
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Land, buildings, and equipment basis		1		37 412	33 073	19 417
tess secumulated deprecation 15 Other assets (describe ►) 16 Total assets (to be completed by all filers)		1	• • • • • • • • • • • • • • • • • • • •	37,112.	33,0131	13,417.
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26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 43,175. 31,669. Part III. Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 Enter amount from Part I, line 27a 2 Chereases not included in line 2 (itemize) 3 Other increases not included in line 2 (itemize) 5 Ocreases not included in line 2 (itemize) 5 Ocreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part III, column (b), line 30 6 31,669.	_	I	· · · · · · · · · · · · · · · · · · ·			** *
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31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Occeases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.	5	27		68 032	60 032	
31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Occeases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.	ets	1				,
31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Occeases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.	(SS		•			×
31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Occeases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.) t		•			, , , , , , , , , , , , , , , , , , , ,
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.	Ž	30	lotal net assets or tuno dalances	43,1/3.	31,009.	t
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.			Year I Hebitial according to the second Here of the second	42 175	22 072	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.	_	31	<u> </u>		33,013.	<u> </u>
(must agree with end-of-year figure reported on prior year's return)143,175.2 Enter amount from Part I, line 27a2-11,506.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 3431,669.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30631,669.	P	art	Analysis of Changes in Net Assets or Fund B	alances		
(must agree with end-of-year figure reported on prior year's return)143,175.2 Enter amount from Part I, line 27a2-11,506.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 3431,669.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30631,669.	_	Tota	net accets or fund halances at heninging of year - Deet II column (a) line	30		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 2 -11,506. 3 0. 4 31,669.	'		•	ou .		12 175
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 Other increases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 3 0. 4 31,669.	9	•			· 1	43,1/3. _11 ENC
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 4 31,669. 5 0. 6 31,669.			•		1	
5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.						
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 31,669.			• • • • • • • • • • • • • • • • • • • •		· —	
				olumn (h) luga 20		
	<u>-</u>	ı uld	net assets of futtu balances at end of year (line 4 fillings line 5) - Part II, Co	Junin (U), line 30	. [6	

Part IV Capital Gains a	and Losses for Tax on I	nvestment	Income					
	ibe the kind(s) of property sold (e. rehouse; or common stock, 200 sh] ` P - Pu	acquired rchase mation	(c) Date a (mo., d	ay, yr.)	(d) Date sold (mo., day, yr.)
1a AMERICAN CAPITA		U			P	08/2		08/07/09
b COSTCO WHOLESA	LE				P	07/1	9/05	09/21/09
C								
đ							_	
е				<u> </u>	_			<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss s (f) minus	(g)
a 3.		<u> </u>	7 65					3.
ь 5,650.			4,75	8.				892.
С		 						
d								
e	(1)	11 - 4 4 - 4	40/04/60					
Complete only for assets snowin	g gain in column (h) and owned by	·			r	(I) Gains (C ol. (k), but r		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (i)	1	·	Losses	(from col. ((h))
	as of 12/31/69	Uver	col. (j), if any					
a		-						3.
<u>b</u>				_				892.
C								
d								
е					.,			
2 Capital gain net income or (net ca		er in Part I, line î -0- in Part I, line		} 2				895.
3 Net short-term capital gain or (los	s) as defined in sections 1222(5)	and (6):						
If gain, also enter in Part I, line 8,		(-)-		<i>]</i>				
If (loss), enter -0- in Part I, line 8							N/A	<u> </u>
Part V Qualification U	nder Section 4940(e) fo	or Reduced	Tax on Net	inves	tment lr	come		
(For optional use by domestic private	foundations subject to the section	1 4940(a) tax on	net investment in	ncome.)				
If continue 40.40/d/(0) continue legisle the	in new blank							
If section 4940(d)(2) applies, leave the	iis part diank.							
Was the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ye	ar in the base pei	rıod?				Yes X No
If "Yes," the foundation does not qual								
1 Enter the appropriate amount in	each column for each year, see ins	tructions before	making any entri	es.		_		***
(a) Base period years	(b)			(c)			Distri	(d) bution ratio
Calendar year (or tax year beginnii	ng in) Adjusted qualifying d	istributions	Net value of no	oncharitat	ile-use asse	ts	(col. (b) dr	vided by col. (c))
2008		4,635.			38,16	8.		.121437
2007		11,632.			58,84			.197685
2006		6,873.			65,79			.104461
2005		9,552.			78,76			.121271
2004		9,979.			77,65	1.		.128511
2 Total of line 1, column (d)						. 2		.673365
3 Average distribution ratio for the	5-year base period - divide the tota	I on line 2 by 5,	or by the number	of years				
the foundation has been in exister						3		.134673
							1	
4 Enter the net value of noncharitat	ole-use assets for 2009 from Part >	K, line 5				4		22,366.
		•				<u> </u>		· · · · · · · · · · · · · · · · · · ·
5 Multiply line 4 by line 3						5	l	3,012.
		•	•		•			
6 Enter 1% of net investment incon	ne (1% of Part I, line 27h)					6		18.
	(2				•			
7 Add lines 5 and 6						7		3,030.
		•			-	<u> </u>		-,
8 Enter qualifying distributions from	n Part XII. line 4					l _	1	12 252
	n line 7, check the box in Part VI, lii			•	••	. 8	L	13,252.

THE NEHRING FAMILY FOUNDATION

	n ago-PF (2009) C/O FLOYD TROUTEN, SS&G			1838.			Page 4
Pá	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	0 <u>(</u> e), or 4	948 -	- see in	stru	ctio	ns)
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 letter if necessary-see instructions						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%)	1				18.
	of Part I, line 27b						
C	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b	, J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0.
3	Add lines 1 and 2		3				18.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0-		5				18.
6	Credits/Payments					************	
а	2009 estimated tax payments and 2008 overpayment credited to 2009						
	Exempt foreign organizations - tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868)	250.					
	Backup withholding erroneously withheld 6d						
	Total credits and payments Add lines 6a through 6d		7			2	50.
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	•	9				
10		•	10			2	32.
	Enter the amount of line 10 to be Credited to 2010 estimated tax > 232 • Re	funded 🕨	11				0.
_	art VII-A Statements Regarding Activities	IUIIUCU P		<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	or intervene	ın			Yes	No
	any political campaign?	01 111(01)0110		ľ	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for i	tefinition\2		ŀ	1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	•	d or	F			
	distributed by the foundation in connection with the activities.	us publishe	0 0,				
c	Did the foundation file Form 1120-POL for this year?			ľ	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			ŀ	16		
	(1) On the foundation ► \$ (2) On foundation managers ► \$	0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on four						
•	managers > \$ 0.	Jacon					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			Ì	2		х
•	If "Yes," attach a detailed description of the activities.			ŀ			-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of inc	ornoration o					
Ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	orporation, o	•	i	3	•	х
42	e Did the foundation have unrelated business gross income of \$1,000 or more during the year?			F	4a	-	X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		21	′ * }	5		Х
٠	If "Yes," attach the statement required by General Instruction T.			F	-		*********
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ļ			
Ū	By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict visit is a state of the conflict of the confl	with the state	law				
	remain in the governing instrument?	אונוו נווס אנמנס	iaw		6	X	Ì
7	Did the foundation have at least \$5,000 in assets at any time during the year?			F	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.			⊦		41	
Ω-	·			ŀ			
04	Enter the states to which the foundation reports or with which it is registered (see instructions)						
		noto\					
0	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design of each state as required by General Instruction C3 If "No." attach and leading	iale)				Х	
n	of each state as required by General Instruction G? If "No," attach explanation	\\E\ 6c= cc!=	ada-	-	8b	Λ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(3) year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV))(5) IOI Cale	nuar	İ			х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and add			-	9 10		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
	any persons become substantial contributors during the tax year. If "Yes," attach a schedule listing their names and add	162262			IU :		43

Page 5

Pa	irt VII-A Statements Regarding Activities (continued)	0140		
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	$\neg \neg$		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	 		
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► JOHN KEDZIOR Telephone no. ►216-64	12-3	342	
	Located at ▶ 6055 ROCKSIDE WOODS BLVD. SUITE 200, CLEVELAND, O ZIP+4 ▶4			
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here		_	TT
	and enter the amount of tax-exempt interest received or accrued during the year	· N	/A	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
<u> </u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly):			,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1		;
	a disqualified person?			į
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?]
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 1		
	for the benefit or use of a disqualified person)?	1 1		ĺ
	(6) Agree to pay money or property to a government official? (Exception, Check "No"			į
	If the foundation agreed to make a grant to or to employ the official for a period after		,	Ι,
	termination of government service, if terminating within 90 days.)			;
t	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			l ,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	16		- '
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		
	before the first day of the tax year beginning in 2009?	1c	•	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):	1 1		ľ
á	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009? Yes X No			·
	If "Yes," list the years , , , ,			,
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			l '
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			,
	statement - see instructions.) N/A	2b	•	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	, , , , , , , , , , , , , , , , , , ,			١ .
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
1	olf "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after		^	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1 1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			١,
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	3ь		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	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?	4b		Х
	Fo	rm 990	-PF(2009)

	_			
	-			
	3			
				<u> </u>
	-			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none	enter "NONE."		<u> </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
				<u> </u>
	+			
			<u> </u>	
	4			
Total number of other employees paid over \$50,000				0

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	<u> </u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u>]</u>	
	<u></u>	
	_	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services		_ ▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the uced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on l	ines 1 and 2.	Amount
1 N/A		
2		
All other program related investments. Con instructions		
All other program-related investments. See instructions.		
0		
Total. Add lines 1 through 3		0.
Total Add lines tillough 5	<u> </u>	Earm 990-DE (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	19,466.
b	Average of monthly cash balances	1b	19,466. 4,645.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	24,111.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .	i	
2	Acquisition indebtedness applicable to line 1 assets	2	1,404.
3	Subtract line 2 from line 1d	3	22,707.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	341.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	22,366.
6	Minimum investment return. Enter 5% of line 5	6	1,118.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	ıd certain	· · · · ·
1	Minimum investment return from Part X, line 6	1	1,118.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	18.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,100.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,100.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,100.
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	13,252.
b	Program-related investments - total from Part IX-B	1b	0 .
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	13,252.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	18.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,234.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.	qualifies for the	section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				1,100.
2 Undistributed income, if any, as of the end of 2009			_	
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 6,138.				
bFrom 2005 5,662.				
cFrom 2006 3,642.		•		t t
dFrom 2007 8,758. eFrom 2008 2,763.				
· L 	26,963.		,	1
f Total of lines 3a through e	20,303.			
4 Qualifying distributions for 2009 from				T.
Part XII, line 4: ►\$ 13,252.			0.	
a Applied to 2008, but not more than line 2a			V •	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			,	
c Treated as distributions out of corpus	0.			1
(Election required - see instructions)				1,100.
d Applied to 2009 distributable amount	12,152.		-	1,100.
e Remaining amount distributed out of corpus	0.	-		0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount				*
must be shown in column (a)) 6 Enter the net total of each column as indicated below:			,	; ;
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	39,115.			, t _d
bPrior years' undistributed income. Subtract				
line 4b from line 2b		0.		1
c Enter the amount of prior years'				
undistributed income for which a notice of				!
deficiency has been issued, or on which				; ;
the section 4942(a) tax has been previously assessed	-	0.		1
d Subtract line 6c from line 6b. Taxable	,			
amount - see instructions	*	0.		* .
e Undistributed income for 2008. Subtract line		*		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2010		· · · · · · · · · · · · · · · · · · ·		0.
7 Amounts treated as distributions out of		i		1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	_,		
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	6,138.			
9 Excess distributions carryover to 2010.	22 077			
Subtract lines 7 and 8 from line 6a	32,977.			
10 Analysis of line 9:		*		
a Excess from 2005 5,662. b Excess from 2006 3,642.				'
o de				
0.000				
40 450	ļ			
e Excess from 2009 12,152.				Form 990-PF (2009)

a The name, address, and telephone number of the person to whom applications should be addressed:

FLOYD A. TROUTEN, (440)248-8787

32125 SOLON ROAD, SOLON, OH 44139

b The form in which applications should be submitted and information and materials they should include:

NONE SPECIFIED

c Any submission deadlines:

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Form **990-PF** (2009)

C/O FLOYD TROUTEN, SS&G

34-1838148 Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CLEVELAND LUTHERAN HIGH NONE 501C(3) UNRESTRICTED 1,000. SCHOOL 3850 LINDEN ROAD ROCKY **RIVER, OH 44116** PROVIDENCE HOUSE NONE 501C(3) 1,000. UNRESTRICTED 2037 WEST 32ND ST CLEVELAND, OH 44113 501C(3) MALACHI HOUSE NONE 1,000. UNRESTRICTED 2810 CLINTON CLEVELAND, OH 44113 3,000. → 3a Total b Approved for future payment NONE Total

923611 02-02-10

nter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a			+		
h					
^			 		
d					
e		i	\vdash		
1					
g Fees and contracts from government agencies	-		 		· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments	-				
3 Interest on savings and temporary cash					
investments			14	2.	
4 Dividends and interest from securities	-		14	885.	
5 Net rental income or (loss) from real estate:	*		1		,
a Debt-financed property		, ,	-		*
b Not debt-financed property	-				
6 Net rental income or (loss) from personal					
property					
7 Other investment income	ļ				
8 Gain or (loss) from sales of assets other			18	895.	
than inventory	-		10	033.	
9 Net income or (loss) from special events	-	•	-		
O Gross profit or (loss) from sales of inventory	-		 		
1 Other revenue:				•	
<u>a</u>	 	···	├		
b	——		 		
<u> </u>			-		
d			<u> </u>		
e		0.	ļ	1,782.	
	1 1		1 "		0
2 Subtotal. Add columns (b), (d), and (e)	,	U .		4.4	
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)				. 13	
2 Subtotal. Add columns (b), (d), and (e)		· · ·	•	. 13	1,782
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Acco		cemp	· · · · · · · · · · · · · · · · · · ·	
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1		omplishment of Ex		t Purposes	1,782
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	me is reported i	omplishment of Ex		t Purposes	1,782
2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	me is reported i	omplishment of Ex		t Purposes	1,782
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Page 13

P	art XV	Information Re		and Transactions ar	nd Relationships With Nonchar	itable	•	
1	Did th	e organization directly or indi	rectly engage in any of the followi	ng with any other organization	described in section 501(c) of		Yes	No
)(3) organizations) or in section 5					
			ation to a noncharitable exempt or					
	(1) C			9		1a(1)	-	х
		ther assets	• • • •	• • •	• •	1a(2)		X
1		transactions:		•	•	14(2)		
		ales of assets to a noncharita	hle exempt organization			45/41		х
			ncharitable exempt organization	•••	• • • • • • • • • • • • • • • • • • • •	1b(1)		X
			. •		• • • • • • • • • • • • • • • • • • • •	1b(2)		
		ental of facilities, equipment,			• • • • • • • • • • • • • • • • • • • •	1b(3)		X
		eimbursement arrangements		·· · · · · ·		1b(4)		X
		oans or loan guarantees				1b(5)		X
			mbership or fundraising solicitati			1b(6)		X
			iling lists, other assets, or paid en			1c		X
- (ays show the fair market value of the goods, of		ets,	
					in any transaction or sharing arrangement, sh	OW IT		
	colum	n (d) the value of the goods,	other assets, or services received	•				
(a)	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and si	haring an	angeme	ents
			N/A	··				
_		 -						
								
				· · · · · · · · · · · · · · · · · · ·				
								
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			·-····································	· · · · · · · · · · · · · · · · · · ·	 			
	la tha	farradation disorbly as malacas	his efficient of court of a court		the state of the s			
20		-	tly affiliated with, or related to, one	• •	ations described	_	-	٦.
			r than section 501(c)(3)) or in sec	tion 5277	· · · · · · ·	Yes	X	No
	If Yes	," complete the following sch		·				
		(a) Name of org	anization	(b) Type of organization	(c) Description of relationsh	ıp		
		N/A						
			·			·		
		·-···						
_	Under pe	enalties of perjury, I declare that I h	ave examined this return, including acc	ompanying schedules and stateme	ents, and to the best of my knowledge and belief, it is to	ue, corre	ct.	
	and com	plate Declaration of preparer (other	than taxpayer or (Iduclary) is based or	rall information of which preparer h	nas any knowledge	,		
	11/1	Wid A.	1 Desta	TANJIN	L CD3			
Ф	Y	inature of difficer or trustee		- 100	CPA			
훈	J SIL	<u></u>	<u> </u>	/ Date	Title			
Sign Here	ے م	Preparer's Floyd A	Trouten III CPA	Translatio DCPA Translation Translation Community State Community		s identify	ng nun	1067
Š	arer.	Signature /	Chair: 2019,00,16 16-40-40		3/16/10 self- employed ▶ □			
	Paid Preparer's Use Only		FINANCIAL SERV	ICES, INC.	EIN >			
	Preg R		5 SOLON ROAD					
_		address, and ZIP code SOLO	N, OHIO 44139-2	2284	Phone no. (440)	24	8-8	787
						m 990		

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
MORGAN STANLEY							2.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				2 .
FORM 990-PF DIVIDENI	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
MORGAN STANLEY			885.		0.	8	85.
TOTAL TO FM 990-PF, PART I, I	LN 4		885.		0.	8	85.
FORM 990-PF		LEGAL	FEES			STATEMENT	
DESCRIPTION	EXPE	A) NSES BOOKS		EST-		(D) CHARITA E PURPOS	
LEGAL FEES		5,425.		0.		5,4	25.
TO FM 990-PF, PG 1, LN 16A =		5,425.	:	0.		5,4	25.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	. 2 - 2 - 2 - 2	4,625.	· <u></u>	0.		4,6	25.
TO FORM 990-PF, PG 1, LN 16B		4,625.		0.		4,6	25.
=	·						

FORM 990-PF	TAXES			STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM			
TAXES	36.		0.			0.	
TO FORM 990-PF, PG 1, LN 18	36.		0.			0.	
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO			(D) CHARITABLE PURPOSES		
BANK CHARGES REGISTRATION FEES	152. 50.	0.			152 50		
TO FORM 990-PF, PG 1, LN 23	202.		0.	•		02.	
FORM 990-PF	OTHER INV	ESTMENTS	·		STATEMENT	7	
DESCRIPTION	-	LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T	
INVESTMENTS		COST 33,07		33,073.	19,417.		
TOTAL TO FORM 990-PF, PART I	I, LINE 13	-		33,073.	19,4	17.	

•	990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
ADELINE CEROVAC 969 STARLIGHT DR. SEVEN HILLS, OH 44131	TREASURER 0.50	0.	0.	0.
FLOYD A. TROUTEN 32125 SOLON ROAD SOLON, OH 44139	PRESIDENT 1.00	0.	0.	0.
LINDA M. RICH 12700 LAKE AVENUE STE. 605 LAKEWOOD, OH 44107	SECRETARY 1.00	0.	0 .	0.
JOHN KEDZIOR	MEMBER			
6055 ROCKSIDE WOODS BLVD. SUITE 200 CLEVELAND, OH 44131	1.00	0.	0.	0.
HILDEGARD O. NEHRING 3652 PEARL ROAD MEDINA, OH 44256	MEMBER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

Form **8868**

(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

		Fine a separate application for each feture.			
		Conth Extension, complete only Part I and check this box			
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. 					
Pair		Extension of Time. Only submit original (no copies needed).			
	A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete				
Part I only					
to file i	income tax returns.	filers), partnerships, REMICs, and trusts must use Form 7004 to request an			
noted (not at you m	below (6 months for a corporation rtomatic) 3-month extension or (2	can electronically file Form 8868 if you want a 3-month automatic extension required to file Form 990-T). However, you cannot file Form 8868 electronically you file Forms 990-BL, 6069, or 8870, group returns, or a composite or considered page 2 (Part II) of Form 8868. For more details on the electronic file that the second second page 2 (Part II) of Form 8868.	cally if (1) you want the additional nsolidated Form 990-T, Instead.		
Туре			Employer Identification number		
print	C/O FLOYD TROU	MILY FOUNDATION	24 1020140		
File by t	18	 	34-1838148		
due date filing you return. S	" 32125 SOLON RO	suite no. If a P.O. box, see instructions. AD			
Instruction	ons. City, town or post office, st	e, state, and ZIP code. For a foreign address, see instructions. 4 4 1 3 9			
Check		eparate application for each return):			
	Form 990		200		
	Form 990-BL	 ☐ Form 990-T (corporation) ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 52 			
	Form 990-EZ	Form 990-T (trust other than above)	- -		
	Form 990-PF	Form 1041-A Form 88			
s The		HN KEDZIOR - 6055 ROCKSIDE WOODS BLVD EVELAND, OH 44131	. SUITE 200 -		
	ephone No. ► 216-642-3	242			
	·	office or place of business in the United States, check this box	▶□		
• if th	is is for a Group Return, enter the	organization's four digit Group Exemption Number (GEN) If thi	s is for the whole group, check this		
box 🕨	If it is for part of the grou	p, check this box > and attach a list with the names and EINs of all	members the extension will cover.		
1	request an automatic 3-month (6 AUGUST 15, 2010	months for a corporation required to file Form 990-T) extension of time unt , to file the exempt organization return for the organization named a			
i	s for the organization's return for		bove. The extension		
ı	► X calendar year 2009 or				
Ì	tax year beginning	, and ending	·		
2	f this tax year is for less than 12 i	nonths, check reason: Initial return Final return	Change In accounting period		
		BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
-	nonrefundable credits. See instru		3a \$ 250.		
		PF or 990-T, enter any refundable credits and estimated or	зь \$ 0.		
		m line 3a. Include your payment with this form, or, if required,	3b \$ U.		
		sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
	See instructions.		3c \$ 250.		
Cautic	on. If you are going to make an ele	ectronic fund withdrawal with this Form 8868, see Form 8453-EO and Form			
LHA	For Privacy Act and Paperwor	k Reduction Act Notice, see Instructions.	Form 8868 (Rev. 4-2009)		

Form 8	868 (Rev. 4-2009)				P	age 2	
o If ye	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	×			. ▶ 🗓	<u> </u>	
Note.	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form (3868.				
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).						
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies n	eeded).				
Type or	THE NEHRING FAMILY FOUNDATION			Employer identification number			
print	/O FLOYD TROUTEN, SS&G		34-1838148				
File by t extende due data filing the	Number, street, and room or suite no. If a P.O. box, see Instructions.	For IF	RS use or	nly			
return. S Instructi	City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
	c type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720		rm 5227 rm 6069		Form	8870	
STOP	l Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	ly file	d Form 8	1868.			
Tel If to box b	JOHN KEDZIOR — 6055 ROCKSIDE WOODS BLVD be books are in the care of ► CLEVELAND, OH 44131 be books are in the care of ► CLEVELAND, OH 44131 be books are in the care of ► CLEVELAND, OH 44131 be books are in the care of ► CLEVELAND, OH 44131 FAX No. ► The crganization does not have an office or place of business in the United States, check this box Interpretable in the United States, check this box Interpr	s is fo	the who	le grot	▶ [up, chec on is for.	·	
	If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period State in detail why you need the extension						
	ALL INFORMATION TO PREPARE A COMPLETE AND ACCURATE TAX AVAILABLE	RE	TURN	IS	NOT	YET	
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
	nonrefundable credits. See instructions.	8a	\$		2	50.	
ь	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated						
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$		2	50.	
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	l					
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$			0.	
	Signature and Verification						
Under it is tru	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the le, correct and complete, and that I am authorized to prepare this form.			riedge a	nd ballef,		
<u>Signat</u>	ure CPA	<u>Date</u>	<u> </u>	14/	<u>"</u>		
			Fo	rm 88	3B (Rev. 4	1-20091	