

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



'Form 990-PF

Return of Private Foundation

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

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note . The foundation may	reated as a Priva be able to use a copy of thi		orting requirements.	2009
For calendar year 2009, or tax year beginning		, and ending		
G Check all that apply: Initial return Amended return	Initial return of a	former public charity	· · · · · · · · · · · · · · · · · · ·	
Use the IRS Name of foundation THE LOUIS CUNNINGHAM Otherwise, FOUNDATION	SCHOLARSHIP		A Employer identification	
or type. 21411 CIVIC CENTER DE	•	Room/suite 206	· · · · · · · · · · · · · · · · · · ·	80
See Specific City or town, state, and ZIP code SOUTHFIELD, MI 48076 H Check type of organization: X Section 501(c)(3) e	5 xempt private foundation		C If exemption application is p D 1. Foreign organizations	ending, check here
· 1 —	Other taxable private found ing method: X Cash	ation Accrual		
▶\$ 115,415. (Part I, colu	ther (specify) umn (d) must be on cash	basis)		
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 Contributions, gifts, grants, etc., received	20.	" " " " " " " " " " " " " " " " " " "		A STATE OF THE STATE OF
2 Check X of the foundation is not required to attach Sch B		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	· · · · · · · · · · · · · · · · ·	
3 Interest on savings and temporary cash investments	1.			3 36 , 3 men a a 3 day - made 1
4 Dividends and interest from securities 5a Gross rents	2,443.	2,443.	•	STATEMENT 2
b Net rental income or (loss)	经验证的证券		1	
62 Not some or floor) from sole of country and an line 10	93.	13 1 1/2 4 4 12 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1		والمراكب المستراكب المستراكب المستراكب
b chose sales pace/ED 93. 7 - Capital-gam-net-income (from Part V, line 2) 8 Net-short-term capital gain?	1. 15 M. 10 T. 17 18 M.	(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		W. C. C. S. S. C. W.
7 — Capital-gain-net-income (from Part V, line 2)	A STATE OF THE STATE OF	93.	Final return	
8 Net-short-term capital gall	可是人口的教育	Non 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		新发展的大学的
9 Income modifications	" as i'm there " " gitted	Start of the state of the		grant of the second of the
Gross sales less returns 10a-and allowances	, 心, (海), 心, 作機	- 注 ,多像也不	C. E. S. J. J. J. J. J.	大学 はらい 学を
b@@@mbdssdd	Company of the second	いいき 強いない	经专项 物质管外系	学数 流、学然经验
c Gross profit or (loss)		in the southing	,	SERVE CONTRACTOR
11 Other income		<u> </u>	ļ	<u> </u>
12 Total. Add lines 1 through 11	2,557.	2,537.	0.	A CALLERY AND THE
13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
3 16a Legal fees	0.405	0.405		
b Accounting fees STMT 3	2,405.	2,405.	0.	
c Other professional fees				
17 Interest 18 Taxes STMT 4	63.	63.	 	
b Accounting fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications	03.	05.	0.	
E 20 Occupancy		<u></u>		
21 Travel, conferences, and meetings	,,,,,,,			
22 Printing and publications	-			
23 Other expenses STMT 5	1,019.	1,019.	0.	0.
23 Other expenses STMT 5 24 Total operating and administrative expenses Add lines 13 through 23		-		
expenses Add lines 13 through 23	3,487.	3,487.		0.
25 Contributions, girts, grants paid	4,436.	P. 12 2	20 2 to 12 1 4	4,436.
26 Total expenses and disbursements.	_			
Add lines 24 and 25	7,923.	3,487.	0.	4,436.
27 Subtract line 26 from line 12:				
2 Excess of revenue over expenses and disbursements	-5,366.			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
b Net investment income (if negative, enter -0-)	1 3 4 4 5 2 4 5 T	0.		
C Adjusted net income (if negative, enter -0-)		* * , 5 * , , ,	U.	5 000 DE (000)

THE LOUIS CUNNINGHAM SCHOLARSHIP

_		an-br (500a) F.OONDA.L.TON		38-	-3197360 Page
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-oil-year amounts only	Beginning of year		of year
_	7		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	5,209.		876
	3	Accounts receivable ► 13,126.	11. 12. 11. 12. 12. 12. 12. 12. 12. 12.	ى ئىد ئىمونىيە بىچ ^ا	
		Less: allowance for doubtful accounts	13,124.	13,126.	13,126
	4	Pledges receivable ►	J		4 9 Tee, 1
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	, , , , , , , , , , , , , , , , , , ,		- 315 3
	`	Less: allowance for doubtful accounts	marker ammonanthanish romananthanishan maki	manufichioni	
, 0		Inventories for sale or use			
Assets	l °	•			
Ass	1 3	Prepaid expenses and deferred charges			
-	1	Investments - U.S. and state government obligations	100 400	00 000	404
		o Investments - corporate stock STMT 6	100,408.	99,373.	101,413.
	1	: Investments - corporate bonds		 	
	11	Investments - land, buildings, and equipment, basis	\$	mx Billing & I. C.	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis 🕨	\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	ľ				
	16	Total assets (to be completed by all filers)	118,741.	113,375.	115,415.
	ĭ	Accounts payable and accrued expenses			LANDELL STORY
	18	Grants payable			
co.	19	Deferred revenue			
Liabilities	i .	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
<u>:</u>	l	Other habilities (describe)			
	22	Other habilities (describe			LANGE TO SAME TO
	00	Total Habiliates (add lines 17 through 20)	0	0	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	CARROLL SECTION
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.	110 711	440 005	
ပို	24	Unrestricted	118,741.	113,375.	
ala	25	Temporarily restricted		·	
Ö.	26	Permanently restricted			Carly of the work of the talk
Ĕ		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		and complete lines 27 through 31.			
2	27	Capital stock, trust principal, or current funds			。 操作等的条件操作
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund			Carlotte at the second
Ä	29	Retained earnings, accumulated income, endowment, or other funds			Sand Sand
Net	30	Total net assets or fund balances	118,741.	113,375.	经基础的 人名德特
	31	Total liabilities and net assets/fund balances	118,741.	113,375.	
_		 -			
P	art´	III Analysis of Changes in Net Assets of Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		at agree with end-of-year figure reported on prior year's return)			118,741.
		amount from Part I, line 27a		2	-5,366.
		r increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·	4	113,375.
		eases not included in line 2 (itemize)	•••	5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	113,375.
		The state of the s		<u> </u>	Form 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on	Investmer	nt Income				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, o o o
	ribe the kind(s) of property sold (irehouse; or common stock, 200			I, b-	ow acquired Purchase Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a FIDELITY STOCK	INVESTMENTS					VARI	OUS	10/20/09
b CAPITAL GAINS	DIVIDENDS							
С				Ľ.				
<u>d</u>				<u> </u>				
<u>e</u>				L.,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale				Gain or (loss is (f) minus	
<u>a</u> 18.								18.
b 75.								75.
С								
<u>d</u>								
e Consolate a plufer accepts about	- com in column (h) and award h	hu sha faundasia	10/01/00					
Complete only for assets showing					r	(I) Gains ((ol /k) but	Col. (h) gain not less thai	minus 3 -0-1 or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any	-	·	Losses	(from col. (h))
								10
<u>a</u>								18. 75.
<u>b</u>								/5.
<u>c</u>								
<u>d</u>			 ·			··· <u>-</u>		
<u>e</u>	<i>C.</i> ,	. 5		$\overline{}$		· · · · · ·		
2 Capital gain net income or (net cap		iter in Part I, line -0- in Part I, line		<u>}</u>	2			93.
3 Net short-term capital gain or (loss		and (6):						
If gain, also enter in Part I, line 8, or If (loss), enter -0- in Part I, line 8	column (c).			 	3		N/A	
Part V Qualification U	nder Section 4940(e) fo	or Reduced	Tax on Net	Inves	stment in	come	N/A	
If section 4940(d)(2) applies, leave th Was the foundation liable for the secti If "Yes," the foundation does not qualit	on 4942 tax on the distributable a fy under section 4940(e). Do not	complete this pa	art.					Yes X No
1 Enter the appropriate amount in ea	ach column for each year; see ins	structions before	making any entrie	s				
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifying d	distributions	Net value of non	(c) icharita	ble-use asset	s		(d) ution ratio ded by col. (c))
2008		6,000.			125,03	1.		.047988
2007		6,000.			144,06	9.		.041647
2006		<u>8,593.</u>			L32,49			.064858
2005		11,000.			<u>140,42</u>			.078336
2004		11,500.			<u>146,67</u>	1.		.078407
2 Total of line 1, column (d)						2		.311236
3 Average distribution ratio for the 5- the foundation has been in existence		al on line 2 by 5,	or by the number o	of years	i .	3		.062247
		 	•	•				
4 Enter the net value of noncharitable	e-use assets for 2009 from Part)	x, line 5		-		4		109,723.
5 Multiply line 4 by line 3		· · · · ·				5		6,830.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					. 6		0.
7 Add lines 5 and 6						7		6,830.
8 Enter qualifying distributions from	Part XII, line 4					8		4,436.
If line 8 is equal to or greater than l See the Part VI instructions.	line 7, check the box in Part VI, lir	ne 1b, and comp	lete that part using	a 1% t	ax rate.			
923521 02-02-10	·			-			Fo	rm 990-PF (2009)

THE LOUIS CUNNINGHAM SCHOLARSHIP

Form 990-PF (2009) FOUNDATION		3197360 Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		A 783 18 2 2 2 3
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	٠	Allendary with the state of the
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1%	1	0.
of Part I, line 27b	٠.	· 100 · 100
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3 Add lines 1 and 2	3	0.
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	0.
6 Credits/Payments:	, . •	1 1 1 1 1 1 1
a 2009 estimated tax payments and 2008 overpayment credited to 2009	e 1	The state of the s
b Exempt foreign organizations - tax withheld at source 6b	1.	
c Tax paid with application for extension of time to file (Form 8868)	: ;	
d Backup withholding erroneously withheld 6d		
	` ;	rational and the control of the
7 Total credits and payments. Add lines 6a through 6d	7	0.
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	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	11	
Part VII-A Statements Regarding Activities		QE 2 2 2
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	n	Yes No
any political campaign?		1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b X
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.		22 32 32
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:		
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
managers ► \$O.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 X
If "Yes," attach a detailed description of the activities.		8 \$ 50 8 \$ 1 \$ 6.01
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5 X
If "Yes," attach the statement required by General Instruction T.		A44 1.4 1.4 A
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or		
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	aw	
remain in the governing instrument?		6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year?		7 X
If "Yes," complete Part II, col. (c), and Part XV.		144 - 5 3 to 3 - 5 3
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		
MI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		2 2 2
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 calend	191	
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		9 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10 X

923531 02-02-10

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b If "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 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form **990-PF** (2009)

3b

Yes X No

N/A

during the year?

THE LOUIS CUNNINGHAM SCHOLARSHIP Form 990-PF (2009) 38-3197360 FOUNDATION Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here 3,70 c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances KENNETH A. MCKANDERS PRESIDENT 21411 CIVIC CENTER DRIVE, SUITE 206 SOUTHFIELD, MI 48076 0.00 0 0 0. WALTER WATKINS VICE-PRESIDENT 21411 CIVIC CENTER DRIVE, SUITE SOUTHFIELD, MI 48076 0 0 0.00 LOUIS E. CUNNINGHAM TREASURER 21411 CIVIC CENTER DRIVE, SUITE 206 0.00 0 0 0. SOUTHFIELD, MI 48076 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other (b) Title, and average (c) Compensation (a) Name and address of each employee paid more than \$50,000 ' hours per week devoted to position allowances NONE

Total number of other employees paid over \$50,000		•	
		1	
	<u> </u>	Ĺ	
		1	
•			
		1	
			1
	 †		
	1		

Form **990-PF** (2009)

Form **990-PF** (2009)

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions.

FOUNDATION

Page 8

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1a	95,227
b Average of monthly cash balances	1b	3,042
c Fair market value of all other assets	1c	13,125
d Total (add lines 1a, b, and c)	1d	111,394
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
Acquisition indebtedness applicable to line 1 assets	2	0
Subtract line 2 from line 1d	3	111,394
Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4_	1,671
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	109,723
Minimum investment return Enter 5% of line 5	6	5,486
Part:XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for foreign organizations check here and do not complete this part.)	oundations and certain	
Minimum investment return from Part X, line 6	1	5,486
Tax on investment income for 2009 from Part VI, line 5		
Income tax for 2009. (This does not include the tax from Part VI.)		
Add lines 2a and 2b	2c	0
Distributable amount before adjustments. Subtract line 2c from line 1	3	5,486
Recoveries of amounts treated as qualifying distributions	4	0
Add lines 3 and 4	5	5,486
Deduction from distributable amount (see instructions)	6	0
Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,486
Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,436
Program-related investments - total from Part IX-B	1b	0
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Amounts set aside for specific charitable projects that satisfy the:		
Suitability test (prior IRS approval required)	3a	
Cash distribution test (attach the required schedule)	3b	
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,436
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
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	<u>0</u> 4,436

Form **990-PF** (2009)

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,				F 406
line 7	*	, , , , , , , , , , , , , , , , , , , ,	, 2, .	5,486.
2 Undistributed income, if any, as of the end of 2009	,			, , , , , , , , , , , , , , , , , , , ,
a Enter amount for 2008 only		,	0.	
b Total for prior years:	•		6	
,,,,	,	0.	, A, .	,
3 Excess distributions carryover, if any, to 2009:	, , , , ,	,	, ,	, ,
a From 2004 2,791.	· · · ·	, , ,		
b From 2005 3,984.	· _ ^ * _ ,	i he con		34
c From 2006 2,450.	مريد يو	, , ,	1. 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
d From 2007		· · · · · · · · · · · · · · · · · · ·		" + . !!" + . " . " . " . " . " . " . " . " . "
e From 2008	9,225.		A 30	"城 · 1 /4 /2 /5 /2
f Total of lines 3a through e	9,243.		********	W #1/2/2 7 7 1
4 Qualifying distributions for 2009 from	1 may 1 may 1 may 1		or has on a same	, , , , , , , , , , , , , , , , , , ,
Part XII, line 4: ►\$ 4,436.	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	·	0.	الم المراجعة
a Applied to 2008, but not more than line 2a	* * * * * * * * * * * * * * * * * * * *	`	3	37 37 37 37
b Applied to undistributed income of prior	E Commence Red Significance	0.	The same of the same	
years (Election required - see instructions)	<u> </u>	12 C 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
c Treated as distributions out of corpus (Election required - see instructions)	0.		A SHE CO ST WE ST	小秦 生一年 10 1 图 56
d Applied to 2009 distributable amount			5 (8) (5) kit 15 (15)	4.436.
e Remaining amount distributed out of corpus	0.	100 V	12 15 to 12 to 12 to 12 to 12 to 1	1. 15. 15. 15. 15. 15. 15. 15. 15. 15. 1
5 Excess distributions carryover applied to 2009	1,050.	1		1,050.
(If an amount appears in column (d), the same amount	Property of the second	\$ 13. (A) 1 3 1 1 1	10 Trans. 3. 14 3. 18	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
must be shown in column (a).) 6 Enter the net total of each column as		Berg & Great Mar J.		Carlot Control of the
indicated below:		第1、18、18、18、18、18、18、18、18、18、18、18、18、18	多为一种	
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,175.	如南京如此知识	八、 至礼、 海 水污污	Company of the Section of the Sectio
b Prior years' undistributed income. Subtract	S. J. L. BASS		The same of the same	中東大的 像看到
line 4b from line 2b		0.	· · · · · · · · · · · · · · · · · · ·	三重型。 医多类
c Enter the amount of prior years'	8.80			
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously	The state of the s		A STATE OF THE STA	
assessed	J. W. M. M. M. J. V.	0.	A STATE OF THE STA	The second second
d Subtract line 6c from line 6b. Taxable	3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	_	· 操作的 學 等	
amount - see instructions	5 A	0.		
e Undistributed income for 2008. Subtract line	The state of the s			中的 电影小学器
4a from line 2a. Taxable amount - see instr.			0.	1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f Undistributed income for 2009. Subtract				:
lines 4d and 5 from line 1. This amount must				0
be distributed in 2010	** " 28 3		-, -, -, -, -, -, -, -, -, -, -, -, -, -	3
7 Amounts treated as distributions out of		* ' ' '	* * * * *	
corpus to satisfy requirements imposed by	0.		* * * * * * * * * * * * * * * * * * * *	
section 170(b)(1)(F) or 4942(g)(3)		J . 7,		2
8 Excess distributions carryover from 2004	1,741.	, ,		
not applied on line 5 or line 7 9 Excess distributions carryover to 2010	1,/41.		1 1 1 1 1 1 1 1 1 1	» - 3 , sig
9 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a	6,434.		ا الموج المراجع وا	
10 Analysis of line 9:	0,232.			Y . (10) 1 313 354
a Excess from 2005 3,984.	, , , , , , , , , , , , , , , , , , , ,			2 1 2 1 2 1 2 1 2 2
b Excess from 2006 2, 450.	おいない (おます)	9 3		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
c Excess from 2007	33 4			The state of the s
d Excess from 2008	10000000000000000000000000000000000000	6	9 .5	大学 医基本隐藏
e Excess from 2009			Profession State	\$
<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>		Form 990-PF (2009)

THE LOUIS CUNNINGHAM SCHOLARSHIP

Form 990-PF (2009) FOUNDAT					97360 Page
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling of			j		
foundation, and the ruling is effective fo		-	. ▶ ∟	Transport Day	
b Check box to indicate whether the found		ng foundation described T		4942(j)(3) or 49	942(j)(5) I
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(4) 2003	(0) 2000	(6) 2007	(0) 2000	(e) Iolai
investment return from Part X for					,
each year listed				ļ- ·- ·	
b 85% of line 2a	, , , , , , , , , , , , , , , , , , ,				
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not			<u> </u>	 	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			-		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					<u> </u>
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	į				
investment income (interest, dividends, rents, payments on				·	
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	rmation (Cample)	to this new early	if the foundation	had \$5,000 as ma	no in occase
Part XV Supplementary Information at any time during the			ii the loundation	nad \$5,000 or mo	ore in assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(a)(2).)			
NONE					
 List any managers of the foundation who other entity) of which the foundation has 			or an equally large portio	n of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribution					
Check here \(\bigcup \] if the foundation or the foundation makes gifts, grants, etc. (ot accept unsolicited reque mplete items 2a, b, c, and	
a The name, address, and telephone numb				· · · · · · · ·	
SEE STATEMENT 7					
b The form in which applications should be	submitted and informati	on and materials they sh	ould include:		
c Any submission deadlines:					
	ough as by cooperation	orono shortable fall	lundo of institutions		
d Any restrictions or limitations on awards,	, such as by geographical	areas, charitable fields,	KINOS OF INSTITUTIONS, OF O	uier tactors:	
923601 02-02-10					form 990-PF (2009)

Form 990-PF (2009)

FOUNDATION

38-3197360

Page 11

Part XV. Supplementary Information	n (continued)			
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	•••••	
a Paid during the year MAYA BYRD C/O HOWARD UNIVERSITY	or śubstantial contributor NONE	recipient	SCHOLARSHIP	4,436
total b Approved for future payment	<u></u>		▶ 3a	4,436.
NONE				
Total	<u> </u>		► 3b Fore	0 . m 990-PF (2009)

Form 990-PF (2009) THE LOUIS CUNN FOUNDATION	IINGHAM S	CHOLARSHIP		38-	3 197360 Page 1
Part:XVI=A Analysis of Income-Produ	ıcing Activiti	es	•		, 440
Enter gross amounts unless otherwise indicated.	Unrelated (a) Business	business income (b)	(C) Exclu-	by section 512, 513, or 514	(e) Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a	-				
b	-				
d	·				<u> </u>
e	1				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1	1	
investments 4 Dividends and interest from securities			14	2,443.	
5 Net rental income or (loss) from real estate:	THE STATE OF	CONTRACTOR OF THE PARTY OF	14	Champion and the second	
a Debt-financed property	2 (4 \$241 8	to a sec. addition another to.	3.72.38	3	
b Not debt-financed property		•			
6 Net rental income or (loss) from personal					
property					
7 Other investment income			 		· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other than inventory			18	93.	
9 Net income or (loss) from special events			1-1	33.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		· · · · · · · · · · · · · · · · · · ·			
a					
b					-
C	i I				
0					
12 Subtotal. Add columns (b), (d), and (e)	Visit 32°	0.	NAK.	2,537.	0.
3 Total. Add line 12, columns (b), (d), and (e)			·	13	2,537.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI:B Relationship of Activities	to the Accon	plishment of E	xempt P	urposes	
Line No. Explain below how each activity for which inco	me is reported in a	olumn (a) of Part VVI-	\ contributed	Limportantly to the accomp	lichment of
the foundation's exempt purposes (other than			A CONTRIDUCE	importantly to the accomp	isiment of
N/A				,	
			 		
		_			
					
				·	

923621 02-02-10

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

	1 010	the organization directly or indirectly engage in any of the follow	/ing with any other organizat	ion described in section 501(c) of	HEREE Y	es	NO
	the (Code (other than section 501(c)(3) organizations) or in section 5	527, relating to political orga	inizations?	建		Alfre
	a Tran	sfers from the reporting foundation to a noncharitable exempt of	organization of:				184
		Cash			1a(1)	EX.	X
		Otherenests					X
	• •		•		1a(2)	b .	
	-	r transactions:					,
		Sales of assets to a noncharitable exempt organization			1b(1)	_	<u> </u>
	(2)	Purchases of assets from a noncharitable exempt organization			1b(2)		X
	(3)	Rental of facilities, equipment, or other assets			1b(3)	-	X
	(4)	Reimbursement arrangements			1b(4)		X
		Loans or loan guarantees	•		1b(5)	一	X
		Performance of services or membership or fundraising solicitati	ione	• • • • •			X
				• • • • •	1b(6)	_	
		ing of facilities, equipment, mailing lists, other assets, or paid er			1c	L	<u>X</u>
		answer to any of the above is "Yes," complete the following sch				,	
		rvices given by the reporting foundation. If the foundation recei		ue in any transaction or sharing arrangement, sl	now in		
	colu	nn (d) the value of the goods, other assets, or services received	<u>. </u>				
(a	Line no	(b) Amount involved (c) Name of noncharitab	le exempt organization	(d) Description of transfers, transactions, and s	haring arrang	jemen	 ts
		N/A					
_		**/**					
					-		
_							
			•				
_							
			.				
		- -	•				
			 				
			•		-		
_							
_	. 1. 45.	facing debiase disease to a second se					
2		foundation directly or indirectly affiliated with, or related to, one		izations described			
		ction 501(c) of the Code (other than section 501(c)(3)) or in sec	tion 527?		_l Yes ∟	X	No
	b If "Ye	s," complete the following schedule.					
		(a) Name of organization	(b) Type of organization	(c) Description of relationship	p		
		N/A					
			 				
		··· ·· ·· · · · · · · · · · · · · · ·	 				
			 				
_							
		enalties of perjury, I declare that I have examined this return, including accomplete. Declaration of preparer (other than taxpayer or fiduciary) is based on			ue, correct,		
	u 55.	7-		nas ary knowledge			
		James C. M. Kander	10(6)10	1 resident			
Sign Here	Si	gnature of officer or trustee	Date	Title			
Ĭ	l	Preparer's \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ما		s identifying n	numbe	
튭	,σ <u>></u>	signature Sagnature	97.	self-	,	_ •	
ñ	Paid Preparer's Use Only		(TDDD =	employed L			
	Paid sparer		SERRA & CO	/ EIN ►			
	క్రిప్		- STE. 100	1			
		address, and ZIP code TROY, MI 48084		Phone no. 248-8	<u> 22-9</u> 0	<u>1</u> 0	
					990-PF		.091
						,-0	/

923622 02-02-10

•								
FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	IPORARY C	ASH I	NVESTMENTS	STA	TEMENT	1
SOURCE							AMOUNT	
FIDELITY - 635430 MONEY FUND								1.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A					1.
FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECU	RITIES	STA	TEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS		LUMN (A AMOUNT)
THROUGH FIDELITY - 635430	•		2,518.		75.		2,4	43.
TOTAL TO FM 990-PF, PART I,	LN 4		2,518.		75.		2,4	43.
FORM 990-PF	AC	COUNTI	NG FEES			STA	TEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS			(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
PROFESSIONAL FEES		2,405.	2,	405.	· · · · · · · · · · · · · · · · · · ·	0.		0.
TO FORM 990-PF, PG 1, LN 16B		2,405.	2,	405.		0.		0.
FORM 990-PF	TAXES			STATEMENT 4		4		
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
FOREIGN TAXES PAID	,	63.		63.		0.		0.
TO FORM 990-PF, PG 1, LN 18	-	63.		63.	(0.		0.
								

FORM 990-PF	OTHER EXPENSES			STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTE NET INCO		(D) CHARITA PURPOS	
MI CORPORATE INFORMATION UPDATE ACCOUNT MGMT FEES	20. 999.		20. 999.		0.		0.
TO FORM 990-PF, PG 1, LN 23	1,019.	1,019.		0		. 0.	
FORM 990-PF	CORPORAT	E STOCK			ST	ATEMENT	6
DESCRIPTION			вос	K VALUE	FA	IR MARKE	r
PORTFOLIO @ FIDELITY #635430		_		99,373.		101,4	13.
TOTAL TO FORM 990-PF, PART II, LINE 10B				99,373.	101,413.		

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 7 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LOUIS E. CUNNINGHAM 21411 CIVIC CENTER DRIVE, SUITE 206 SOUTHFIELD, MI 48076

TELEPHONE NUMBER

248-263-7630

FORM AND CONTENT OF APPLICATIONS

CUNNINGHAM SCHOLARSHIP FOUNDATION APPLICATION FORM AND GRADE TRANSCRIPT.

ANY SUBMISSION DEADLINES

ANNUALLY IN THE SPRING - DATES ARE LISTED EACH YEAR ON APPLICATION INFORMATION.

RESTRICTIONS AND LIMITATIONS ON AWARDS

AWARDS ARE RESTRICTED TO EXPENSES FOR TUITION, BOOKS, ROOM & BOARD AT INSTITUTIONS OF HIGHER EDUCATION. GRADE POINT REQUIREMENTS MUST BE MAINTAINED.

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

 If you are filing for 	r an Automatic 3-Month Extension, complete only Part I and check this bor r an Additional (Not Automatic) 3-Month Extension, complete only Part II rt II unless you have already been granted an automatic 3-month extension on a	(on page 2	of this for	m).		
	atic 3-Month Extension of Time. Only submit original (no copies nee		<u>-</u>			
A corporation requirement I only	red to file Form 990-T and requesting an automatic 6-month extension—chec	k this box a	and compl	ete . ► □		
All other corporation time to file income	ns (including 1120-C filers), partnerships, REMICs, and trusts must use Form tax returns.	7004 to red	quest an e	xtension of		
one of the returns electronically if (1) y returns, or a composi-	file). Generally, you can electronically file Form 8868 if you want a 3-month an noted below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Form the or consolidated Form 990-T. Instead, you must submit the fully completed an all son the electronic filing of this form, visit www irs.gov/efile and click on e-file	ever, you ca is 990-BL, 6 nd signed pa	annot file I 6069, or 88 age 2 (Part	Form 8868 870, group : II) of Form		
Type or Name	Name of Exempt Organization Em			ployer identification number		
	LOUIS CUNNINGHAM SCHOLARSHIP FOUNDATION	38	38 3197360			
due date for filing your 2141	er, street, and room or suite no. If a P.O box, see instructions 1 CIVIC CENTER DRIVE, sUITE 206					
instructions ,	own or post office, state, and ZIP code For a foreign address, see instructions. IHFIELD, MI 48076					
Check type of retu	rn to be filed (file a separate application for each return):					
☑ Form 990	Form 990-T (corporation)		Form 472	20		
Form 990-BL		Form 522	27			
Form 990-EZ	Form 990-T (trust other than above)		Form 606	39		
☐ Form 990-PF ☐ Form 1041-A				70		
Telephone No. ► If the organization If this is for a Gro for the whole group	the care of METZLER LOCRICCHIO SERRA & CO 248) 822-9010 FAX No. Material (Composition) does not have an office or place of business in the United States, check this up Return, enter the organization's four digit Group Exemption Number (GEN) check this box		If ti			
until AUGL for the organiz ► ☑ calenda	automatic 3-month (6 months for a corporation required to file Fo IST 15 , 20_10, to file the exempt organization return for the organization ation's return for: r year 2009or r beginning, 20, and ending	named abo	ove. The ex	xtension is		
2 If this tax year	is for less than 12 months, check reason: Initial return Final return	☐ Change	ın accouni	ting period		
	on is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta fundable credits. See instructions.	x, 3a	\$	0.00		
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax						
payments made. Include any prior year overpayment allowed as a credit.				0.00		
c Balance Due. deposit with F System). See ii	d, nt 3c	\$	0.00			
Caution. If you are g	joing to make an electronic fund withdrawal with this Form 8868, see Form 84 ions.					
For Privacy Act and F	Paperwork Reduction Act Notice, see Instructions. Cat No 27916D	Fo	m 8868 m	(Rev 4-2009)		

Page 2
ox . ► 🗸 n 8868.
eded). fication number 3197360
n 6069 n 8870 ed Form 8868.
, 20 counting period CURATE

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

• If	you are	filing for an Additional (Not Automatic) 3-Month Extension, complete complete Part II if you have already been granted an automatic 3-month exter	only Part II a	and check the	nis box .	▶ 	
		filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		viously filed	FOIII 6000.		
2000	rt II	Additional (Not Automatic) 3-Month Extension of Time. Only file		(no copie	needed)		
		Name of Exempt Organization	Sano origina		dentification	number	
1, pc 0.		THE LOIS CUNNINGHAM SCHOLARSHIP FOUNDATION		38	319736		
-		Number, street, and room or suite no. If a P.O. box, see instructions	1 12 4 15 15 E	For IRS use		<u> </u>	
File by the extended due date for	nded	21411 CIVIC CENTER DRIVE, SUITE 206		7 0. 7.10 000	····,		
filing the return See		City, town or post office, state, and ZIP code. For a foreign address, see instructions		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	35 2 7 7 3 3	
ınstr	uctions	SOUTHFIELD, MI 48076-3950	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	- 12 m	<u> </u>	State State of	
_		of return to be filed (File a separate application for each return)					
☑ Form 990 ☐ Form 990-PF ☐ Form 1041-A					☐ Form 6069		
☐ Form 990-BL ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 4720				☐ Form 8870			
	Form 99		orm 5227				
		t complete Part II if you were not already granted an automatic 3-month	extension o	n a previou:	sly filed For	m 8868.	
• Th	ie books	are in the care of ▶ METZLER LOCRICCHIO SERRA & CO		******			
Te	lephone	No. ► (248) 822-9010 FAX No ► ()					
		nization does not have an office or place of business in the United States	s, check this	box		▶ □	
	_	a Group Return, enter the organization's four digit Group Exemption Nu			If this	IS	
		group, check this box			and attach	ıa	
		names and EINs of all members the extension is for					
4	I reque	st an additional 3-month extension of time until NOVEMBER 1	5,	20 10			
5	For cale	ndar year, or other tax year beginning, 20	and ending			20	
6	If this ta	ex year is for less than 12 months, check reason Initial return I	Final return 🗓	Change II	accounting	a penod	
7	State in	detail why you need the extension ADDITIONAL TIME IS NEEDED TO TURN.	FILE A COMI	PLETE ĂNI	ACCURAT	ÍÉ.	
8a		pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the nonrefundable credits. See instructions.	tentative tax	8a	\$		
b	If this a	oplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	e credits and	2.6			
	estimated tax payments made. Include any prior year overpayment allowed as a credit and any						
	amount	paid previously with Form 8868.	•	8b	\$		
С		Due. Subtract line 8b from line 8a Include your payment with this form, or, if recoupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). S		8c	\$	N/A	
		Signature and Verification					
Under	penalties oue, correct	of perjury, I declare that I have examined this form, including accompanying schedules and st and complete, and that I am authorized to prepare this form	atements, and to	the best of my	knowledge an	id belief,	
	,	11 L / / / / / / / / / / / / / / / / / /		-	9/11/1	1/2	
Signat	ure ►	Title > Title >		Date 🎜		V	

Form 8868 (Rev 4-2009)