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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

OMB No 1545-0052 2009

Internal Revenue Service For calendar year 2009, or tax year beginning and ending Initial return of a former public charity Final return G Check all that apply: Initial return Address change Amended return 」Name change A Employer identification number Name of foundation Use the IRS label 38-3505951 THE SHERMAN FAMILY FOUNDATION Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number print or type 248-851-9386 25001 RIVER DRIVE See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions FRANKLIN, MI D 1 Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated Fair market value of all assets at end of year | J | Accounting method X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶\$ 4,349 , 886 **Analysis of Revenue and Expenses** (b) Net investment (c) Adjusted net (d) Disbursements Part I (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not for charitable purposes expenses per books income income necessarily equal the amounts in column (a) (cash basis only) Contributions, gifts, grants, etc., received 0 N/A Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3,016 3,016 STATEMENT 96,984 STATEMENT 96,984 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -403,094 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,468,825. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 470 470 STATEMENT 11 Other income 100 470 -302.624 Total Add lines 1 through 11 0. 0 0. Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits Administrative Expenses 16a Legal fees **b** Accounting fees c Other professional fees 0. 0. 17 Interest STMT 5 4.832 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 7,588 7,588 0. STMT 6 23 Other expenses 24 Total operating and administrative 7,588 0. expenses Add lines 13 through 23 12,421 231,183 231 .183. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 7,588 231,183. <u>243</u>,604 Add lines 24 and 25 27 Subtract line 26 from line 12: -546,228 a Excess of revenue over expenses and disbursements 92,882 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative enter -0-) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

923511 02-02-10

Part IV Capital Gains a	and Lo	sses for Tax on In	vestment	Income						
		rd(s) of property sold (e.g. or common stock, 200 shs			(b) F P D	łow ace - Purch - Dona	quired nase tion	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a 12,100 SHS- IS	HARES	RUSSELL 10	00 INDI	EX FUND		I	D	12/21	1/07	09/29/09
ь 7,500 SHS- ISH	ARES	MSCI EMERGI	NG MKT	INDEX		1	D	12/21	1/07	09/29/09
c 34,775 SHS- LO	OMIS	SAYLES FIXE	D INCO	ME FUND		1	D L	01/ <u>1</u> 8	3/08	09/29/09
d TFG HEDGE FUND	II	<u> </u>			<u> </u>	1	D ,	VARIO	OUS	VARIOUS
_e					L.,					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis opense of sale		= +44			in or (loss (f) minus	
a 707,469.				952,95						<u>-245,486.</u>
b 289,643.				<u>384,30</u>						<u>-94,657.</u>
<u>c</u> 449,994.				466,34						-16,351.
<u>d</u> 21,719.				27,05	8.					-5,339.
<u>e</u>										
Complete only for assets showing									ol. (h) gaın ot less tha	
(ı) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			COI.		(from col.	(h))
a										<u>-245,486.</u>
b										<u>-94,657.</u>
C										<u>-16,351.</u>
d										-5,339.
e										
2 Capital gain net income or (net ca	apıtal loss)	$\begin{cases} If gain, also enter \\ If (loss), enter -0- \end{cases}$	n Part I, line	7 7	}	2				-361,833.
3 Net short-term capital gain or (los	ce) ae defii				_					
If gain, also enter in Part I, line 8,			iu (0).)					
If (loss), enter -0- in Part I, line 8	· · · · · · · · · · · · · · · · · · ·				ŗ	3			N/A	
Part V Qualification U	Inder S	ection 4940(e) for	Reduced	Tax on Net	lny	estm	nent Inc	ome		
(For optional use by domestic private If section 4940(d)(2) applies, leave the Was the foundation hable for the sect If "Yes," the foundation does not quart	his part bla	ank. tax on the distributable am	nount of any ye	ear in the base pe		,				Yes X No
1 Enter the appropriate amount in	each colur	nn for each year; see instr	uctions before	making any entri	ies.					
(a) Base period years Calendar year (or tax year beginni	ing in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		use assets		Dıstrı (col. (b) dı	(d) bution ratio vided by col. (c))
2008		19	9,789.		4	,22	3,388			.047305
2007		6	9,870.			48	3,431			.144529
2006		24	8,648.			13	6,852	•		1.816912
2005		21	0,108.			26	9,987	<u>. </u>		.778215
2004		10	6,988.			23	<u>6,796</u>	•		.451815
2 Total of line 1, column (d)								2		3.238776
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	r of ye	ears		3		.647755
4 Enter the net value of noncharital	ble-use as	sets for 2009 from Part X,	line 5					4		4,687,612.
5 Multiply line 4 by line 3								5		3,036,424.
6 Enter 1% of net investment incor	me (1% of	Part I, line 27b)						6		929.
7 Add lines 5 and 6								7		3,037,353.
8 Enter qualifying distributions from	m Part XII,	, line 4						8		231,183.
If line 8 is equal to or greater tha	n line 7, cl	neck the box in Part VI. line	a 1h and com	alete that nart usu	nna.	1% tax	rate.			
See the Part VI instructions		, , , , , , , , , , , , , , , , , , , ,	c ib, and com	ricte that part usi	iiy a	1 70 tax				

orm 9	990-PF ₁ (2009) THE SHERMAN FAMILY FOUNDATION 38-350	05951	Page 4
<u>Par</u>	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e instruc	ctions)
1a`E	exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.		
0	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	L,858.
c	of Part I, line 27b		
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2 1	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
3 /	Add lines 1 and 2	1	<u>1,858.</u>
4 5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5 1	Fax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	1	L,858.
6 (Credits/Payments.		
a 2	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 3,320.		
b E	Exempt foreign organizations - tax withheld at source 6b		
c	Tax paid with application for extension of time to file (Form 8868) 6c 5,000.		
d E	Backup withholding erroneously withheld 6d		
7	Total credits and payments Add lines 6a through 6d	8	3,320.
8 E	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		
9 1	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 (Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	(<u>5,462.</u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 6 , 462 . Refunded ▶ 11		0.
Par	t VII-A Statements Regarding Activities		
1a l	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes No
á	any political campaign?	1a	X
ЬΙ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	X
1	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		
(distributed by the foundation in connection with the activities		
c l	Did the foundation file Form 1120-POL for this year?	1c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		İ
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		
	managers ► \$O.		
	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		
	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
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	If "Yes," attach the statement required by General Instruction T		
	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 law		. ·
_	remain in the governing instrument?	6	X
	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		
ва	Enter the states to which the foundation reports or with which it is registered (see instructions)	-	
	MI	-	
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	_	v
	of each state as required by General Instruction G? If "No," attach explanation	8b	<u>X</u>
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		T
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X X
<u> 10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	

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

orm 990-PF (2009) THE SHERMAN FAMILY FOUNDA			<u> 38-35059</u>	<u>51</u>	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire	ectly,	İ		
any voter registration drive?		C Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		☐ Ye	s X No	i	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		į		
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		☐ Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instruc		J	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check he	*				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from		ined			
expenditure responsibility for the grant?		I/A	s No		
If "Yes," attach the statement required by Regulations section 53 4945		.,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	• •				
a personal benefit contract?	٠٠٠ - ١٠٠٠ - ١٠٠٠	☐ Va	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?	10		6b	x
If "Yes" to 6b, file Form 8870			[-		
7a At any time during the tax year, was the foundation a party to a prohibited tax st	helter transaction?	☐ Ye	s X No		
b If yes, did the foundation receive any proceeds or have any net income attributa				7b	
Information About Officers Directors Trusts		nagers. Highly			
Part VIII Paid Employees, and Contractors	,		•		
1 List all officers, directors, trustees, foundation managers and their of	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ex	pense nt, other
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accoun	ances
SEE STATEMENT 9		0.	0.		0.
]	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Ex	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deferred compensation	allow	ances
NONE					
				1	
				L	
Total number of other employees paid over \$50,000					0

923561 02-02-10

Total. Add lines 1 through 3

0.

P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	4,314,915.
b		1b	444,082.
C		1c	
d		1d	4,758,997.
	Reduction claimed for blockage or other factors reported on lines 1a and		
Ī	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	Ť 2	0.
3	Subtract line 2 from line 1d	3	4,758,997.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	71,385.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,687,612.
6	Minimum investment return Enter 5% of line 5	6	234,381.
	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	234,381.
2a	a Tax on investment income for 2009 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	1,858.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	232,523.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	232,523.
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	232,523.
P	Part 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	231,183.
b	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		
a	a Suitability test (prior IRS approval required)	3a	
b	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	231,183.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	231,183.
	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	n qualifies fo	r 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				232,523.
2 Undistributed income, if any, as of the end of 2009				202/020
a Enter amount for 2008 only			0.	
b Total for prior years.				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 89,329.				
b From 2005 197,823.				
c From 2006 243, 295.				
d From 2007 48,448.				
e From 2008				
f Total of lines 3a through e	578,895.			
4 Qualifying distributions for 2009 from				
Part XII, line $4 \triangleright \$ 231, 183$.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				231,183.
e Remaining amount distributed out of corpus	0.			1 2 1 2
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	1,340.			1,340.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	577,555.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		***		
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr			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				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		<u> </u>	
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	87,989.			
9 Excess distributions carryover to 2010	400 - 00			
Subtract lines 7 and 8 from line 6a	489,566.			
10 Analysis of line 9				
a Excess from 2005 197,823.				
b Excess from 2006 243, 295.				
c Excess from 2007 48,448.				
d Excess from 2008	J			
e Excess from 2009		<u> </u>	1	5-rm 000 DE (2000)

Part XIV Private Operating Fo		FOUNDATION			3-3505951 Page 10
			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for		=	. ▶ ∟	7 40 40 () (0)	
b Check box to indicate whether the found		ng toundation described I		4942(j)(3) or	4942(j)(5)
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 investment return from Part X for	(4) 2000	(0) 2000	(0) 2001	(4) 2000	(c) rotar
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,			T		
line 4 for each year listed			-		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly	<u> </u>				
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					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)			 		
(3) Largest amount of support from					
an exempt organization			-		
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundat	ion had \$5,000	or more in assets
at any time during t			ii dio iodiida		or more in decets
1 Information Regarding Foundation					
a List any managers of the foundation wh	_	than 2% of the total cor	ntributions received b	y the foundation befor	e the close of any tax
year (but only if they have contributed n				•	•
NONE					
b List any managers of the foundation wh			(or an equally large	portion of the ownersh	nip of a partnership or
other entity) of which the foundation ha	s a 10% or greater intere	est			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of the foundation makes gifts, grants, etc.					
				ns, complete items za,	, u, c, and u
a The name, address, and telephone num	ber of the person to who	om applications should b	e addressed		
b The form in which applications should b	oe submitted and informa	ation and materials they	should include		
c Any submission deadlines					
d Any restrictions or limitations on award	s such as he assersable	eal areas, shorttable field	e lande of rectitutions	or other factors	
d Any restrictions or limitations on award	o, ouch as by geographi	var arcas, Chamadhe nelu	ง, หแบง บา เมอเนนเเปเร	o, or other factors	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation status of Amount Name and address (home or business) recipient a Paid during the year SEE STATEMENT 10 **▶** 3a 231,183. Total **b** Approved for future payment NONE 0. **▶** 3b Total

923611 02-02-10

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
•	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Buširiess code	Amount	sion	Amount	function income
a					
b		- 			
<u> </u>	l i				· · · · · · · · · · · · · · · · · · ·
e					
f		· ············			
g Fees and contracts from government agencies					
2 Membership dues and assessments					-
3 Interest on savings and temporary cash					
investments			14	3.016.	
4 Dividends and interest from securities			14	3,016. 96,984.	
5 Net rental income or (loss) from real estate				50,500	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	470.	
8 Gain or (loss) from sales of assets other					
than inventory			18	-403,094.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d	1 1				
e					
12 Subtotal Add columns (b), (d), and (e)			0.	-302,624.	0.
13 Total Add line 12, columns (b), (d), and (e)	4			13	
(See worksheet in line 13 instructions to verify calculations)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)							
-								

923621 02-02-10

Par `	t XVII	Information Re Exempt Organi	egarding Transfers To izations	and Transactions a	nd Relationsh	ips With No	oncharitable	•	
1 1	nd the orna		ectly engage in any of the following	ng with any other organization	n described in sectio	in 501(c) of		Yes	No
	_		(3) organizations) or in section 5			00 1(0) 01		100	
	· ·		ition to a noncharitable exempt of		2010110				
	1) Cash	om mo roporting rounds	The state of the s	· gamzanon or			1a(1)		X
,	2) Other a	ssets					1a(2)		X
	Other transa						1.5(2)		
			ble exempt organization				1b(1)		х
	-		ncharitable exempt organization				1b(2)		X
	•	of facilities, equipment, o	· -				1b(3)		Х
	. ,	rsement arrangements					1b(4)		X
		or loan guarantees					1b(5)		Х
	• •	•	mbership or fundraising solicitati	ons			1b(6)		X
			iling lists, other assets, or paid en				1c		X
	•		"Yes," complete the following sch	• •	vavs show the fair m	arket value of the		sets.	
			oundation. If the foundation receiv					,,,,	
			other assets, or services received		,		,		
l) Lin) Amount involved	(c) Name of noncharitab		(d) Description	of transfers, transac	tions, and sharing ar	rangeme	ents
<u> </u>			N/A			<u> </u>			
		· · · · · · ·					•		
-						·			
				<u> </u>			·	•	
					<u> </u>				-
				 					
				······································					
									
					—				
									
		•	,			•			
				······					
 2 a	ls the found	fation directly or indirect	tly affiliated with, or related to, on	ie or more tax-exempt organi	zations described			•	·····
		•	r than section 501(c)(3)) or in se	, , ,			Yes	X	□No
		nplete the following sch						<u> </u>	
		(a) Name of org		(b) Type of organization	(c) Description of	relationship		
-	·	N/A							
									
		· · · · · · · · · · · · · · · · · · ·						_	
		-···········	4						
			examined this return, including acc			my knowledge and	belief, it is true corre	ect,	
a	nd complete	Seclaration of preparer (over	er than taxpayer or fiduciary) is based o	on all information of which preparer	has any knowledge				
1	XX	JULITY C)WWW.	X1/26/10	▶ PRESID	ENT			
ָ ב	bigņatu	e of officer or trustee		Date	Title	, , ,			
a lau usi s	Trep	parer's			Date Ch	eck if	Preparer s identi	fying nu	mber
<u> </u>	ا د س	ature JOHN	W WEIPERT	lo	9/21/10 sel	iployed 🕨 🗔]		
Paid	E O Firm's	name (or yours TAMA				EIN ▶			
٦	Preparer Use Only Sign		3 MIDDLEBELT R						_
	addres		INGTON HILLS,		!	Phone no.	(248) 62	26 – 3	800
									(2000)

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
COMERICA BANK-CHECKING A/C K-1 TFG HEDGE FUND II K-1 TFG INTERNATIONAL EQUITY FUND K-1 TFG INTERNATIONAL EQUITY FUND K-1 TFG MORTGAGE FUND TFG FOUNDATIONS CASH POOL			7. 21. 74. 15. 4. 2,895.
TOTAL TO FORM 990-PF, PART I, LIN	E 3, COLUMN A		3,016.
FORM 990-PF DIVIDENDS AN	D INTEREST FROM	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
BNY MELLON, NA	83,515.	0.	83,515.
K-1 TFG INTERNATIONAL EQUITY FUND I K-1 TFG MORTGAGE FUND	7,779. 5,690.		7,779. 5,690.
TOTAL TO FM 990-PF, PART I, LN 4	96,984.	0.	96,984.

FORM 99	0-PF C	AIN OR	(LOSS)	FROM	SALE	OF	ASSETS	STA	rement 3
DESCRIP	(A) TION OF PROPERTY	r.					MANNER ACQUIRED	DATE ACQUIRED	DATE SOLI
	SHS- ISHARES RUS	 SSELL					DONATED	12/21/07	09/29/09
	(B) GROSS		JE AT	EX	(D) PENSE	OF	(E)		(F)
	707,469.		F ACQ. 952,955	•	SALE	0.	DEPREC.	GAIN 0.	OR LOSS -245,486
DESCRIE	(A) PTION OF PROPERTY	Y					MANNER ACQUIRED	DATE ACQUIRED	DATE SOLI
	SHS- ISHARES MSC:	<u> </u>					DONATED	12/21/07	09/29/09
	(B) GROSS SALES PRICE	VALU	C) JE AT OF ACQ.	EX	(D) PENSE SALE		(E) DEPREC	. GAIN	(F) OR LOSS
	289,643.		384,300	•		0.	,	0.	-94,657
DESCRI	(A) PTION OF PROPERT	Y					MANNER ACQUIRED	DATE ACQUIRED	DATE SOL
	SHS- LOOMIS SAY	LES					DONATED	01/18/08	09/29/0
	(B) GROSS	VAL	C) JE AT OF ACQ.		(D) PENSE		(E) DEPREC	CATN	(F)
	SALES PRICE 449,994.		466,345		SALE	0 .		0.	-16,351

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
TFG HEDGE FUND II			DONATED	VARIOUS	VARIOUS
(B) GROSS	(C) VALUE AT	(D) EXPENSE OF	(E)	CATN	(F) OR LOSS
SALES PRICE	TIME OF ACQ.	SALE	DEPREC	GAIN	
21,719.	27,058.	0.	· · · · · · · · · · · · · · · · · · ·	0.	-5,339.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
K-1 TFG INTERNATIONAL EQ	Onita -		PURCHASED		
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
0.	0.	0 .	•	0.	-12,228.
(A) DESCRIPTION OF PROPERTY	_			DATE ACQUIRED	DATE SOLD
K-1 TFG INTERNATIONAL E	QUITY		PURCHASED		
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
0.	0.	0	•	0.	-26,365.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED		DATE SOLD
K-1 TFG MORTGAGE FUND	_		PURCHASED		
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	. GAIN	OR LOSS
0.	0.	0	•	0.	4,720.

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DA'I ACQUI	'E RED DATE SOLD
K-1 TFG HEDGE FUND II	-		PURCHASED		
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC		AIN OR LOSS
0.	0.	0	•	0.	2,081.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DAT ACQUI	TE TRED DATE SOLD
K-1 TFG HEDGE FUND II	_		PURCHASED)	
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC	· ·	AIN OR LOSS
0.	0.	0	•	0.	-9,469.
NET GAIN OR LOSS FROM SA	ALE OF ASSETS				-403,094.
CAPITAL GAINS DIVIDENDS	FROM PART IV				0.
TOTAL TO FORM 990-PF, PA	ART I, LINE 6A			-	-403,094.
FORM 990-PF	OTHER	INCOME			STATEMENT 4
FORM 990-PF	OTHER	(A)	(E NET IN		(C)
FORM 990-PF DESCRIPTION	OTHER		NET IN	WEST-	(C) ADJUSTED
		(A) REVENUE PER BOOKS	NET IN	WEST-	(C) ADJUSTED NET INCOME

FORM 990-PF	TAX	ES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) - ADJUSTED E NET INCOM		
FEDERAL TAXES FOREIGN TAXES ANNUAL REPORT	3,911. 901. 20.	().).	0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	4,832.).	0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
AGENCY FEES TFG K-1'S PORTFOLIO DEDUCTIONS TFG K-1'S NON-DEDUCT. EXPENSES	1,151. 6,430. 7.	6,430		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	7,588.	7,588	3.	0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7	
DESCRIPTION		1	BOOK VALUE	FAIR MARKET VALUE	
9520 SHS- RUSSELL INDEX FUND 36190.727 SHS- PIMCO PAC INV' 7500 SHS- MSCI EMERGING MARK	T MGMT ETS		799,130. 452,140. 0.	583,671. 415,831. 0.	
	72 SHS- LOOMIS SAYLES FIXED INC FUND 539,827. O FORM 990-PF, PART II, LINE 10B 1,791,097.				

FORM 990-PF OTH	ER INVESTMENTS		STATE	MENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET LUE
3946.39 UTS- TFG HEDGE FUND II 5309.18 UTS- TFG INTL EQUITY FUND 3955.621 UTS- TFG OPPORTUNISTIC	COST I COST COST	1,664,11 421,61		689,963 504,761
INCOME FD	COST	410,39	6.	409,335
TOTAL TO FORM 990-PF, PART II, LIN	E 13	2,496,12	6. 2,	604,059
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, D		STATE	EMENT
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
D. LARRY SHERMAN 25001 RIVER DRIVE FRANKLIN, MI 48025	PRESIDENT 0.00	0.	0.	0
JANE SHERMAN 25001 RIVER DRIVE FRANKLIN, MI 48025	SECRETARY/TREA	SURER 0.	0.	0
DAVID F. SHERMAN	DIRECTOR 0.00	0.	0.	0
	DIRECTOR 0.00	0.	0.	0
30974 WESTWOOD DRIVE		0.	0.	0

FORM 990-PF

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

STATEMENT 10

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ANTI DEFAMATION LEAGUE P.O. BOX 96226 WASHINGTON, DC 20090	NONE	PUBLIC CHARITY	350.
ASPEN FILM FESTIVAL 110 EAST HALLAM, SUITE 102 ASPEN, CO 81611	NONE	PUBLIC CHARITY	250.
ASPEN JEWISH CONGREGATION 77 MEADOWOOD DRIVE ASPEN, CO 81611	NONE	PUBLIC CHARITY	200.
AISH HA TORAH 555 S OLD WOODWARD AVE BIRMINGHAM, MI 48009	NONE	PUBLIC CHARITY	7,400.
ALZHEIMERS ASSOCIATION 20300 CIVIC CENTER DR., SUITE 100 SOUTHFIELD, MI 48076	NONE	PUBLIC CHARITY	2,500.
AMERICAN CANCER SOCIETY 18505 W TWELVE MILE ROAD SOUTHFIELD, MI 48076	NONE	PUBLIC CHARITY	300.
AMERICAN FRIENDS OF ORR SHALOM 111 EIGHTH AVE, SUITE 11E NEW YORK, NY 10011	NONE	PUBLIC CHARITY	8,000.
AMERICAN ORT 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	NONE	PUBLIC CHARITY	7,500.

THE SHERMAN FAMILY FOUNDATION			38-3505951
ASPEN MUSIC FESTIVAL 2 MUSIC SCHOOL ROAD ASPEN, CO 81611	NONE	PUBLIC CHARITY	30,000.
ASPEN UNITED JEWISH APPEAL P.O. BOX 8590 ASPEN, CO 81612	NONE	PUBLIC CHARITY	5,000.
BREAST CANCER 3-DAY 205 N MICHIGAN AVE, SUITE 2640 CHICAGO, IL 60601	NONE	PUBLIC CHARITY	500.
CCFA - CROHN'S & COLOTIS FOUNDATION OF AMERICA 386 PARK AVENUE S, 17TH FLOOR NEW YORK, NY 10016	NONE	PUBLIC CHARITY	500.
COMMUNITY HOUSE OF BIRMINGHAM 380 S BATES ST BIRMINGHAM, MI 48009	NONE	PUBLIC CHARITY	1,200.
CRANBROOK SCHOOLS 520 LONE PINE ROAD BLOOMFIELD HILLS, MI 48303	NONE	PUBLIC CHARITY	200.
DETROIT PARENT NETWORK 7375 WOODWARD AVE #1100 DETROIT, MI 48202	NONE	PUBLIC CHARITY	13,000.
DENON PROJECT PO BOX 543 WOODBURY, CT 06798	NONE	PUBLIC CHARITY	600.
DETROIT INSTITUTE OF ARTS 5200 WOODWARD AVE DETROIT, MI 48202	NONE	PUBLIC CHARITY	1,000.
DETROIT SYMPHONY ORCHESTRA 3663 WOODWARD AVE DETROIT, MI 48201	NONE	PUBLIC CHARITY	35,000.

• THE SHERMAN FAMILY FOUNDATION			38-3505951
EVANS SCHOLARSHIP 1 BRIAR ROAD GOLF, IL 60029	NONE	PUBLIC CHARITY	450.
FOUNDATION FOR JEWISH LIFE 6 E 39TH ST, 10TH FLOOR NEW YORK, NY 10016	NONE	PUBLIC CHARITY	5,000.
HEBREW FREE LOAN ASSOCIATION 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	NONE	PUBLIC CHARITY	10,200.
HILLEL DAY SCHOOL OF METRO DETROIT 32200 MIDDLEBELT ROAD FARMINGTON HILLS, MI 48334	NONE	PUBLIC CHARITY	3,200.
HENRY FORD HEALTH SYSTEM 2799 W GRAND BLVD DETROIT, MI 48202	NONE	PUBLIC CHARITY	1,000.
JARC 30301 NORTHWESTERN HWY, #100 FARMINGTON HILLS, MI 48334	NONE	PUBLIC CHARITY	5,000.
JEWISH FEDERATION OF METRO DETROIT 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48303	NONE ANNUAL CAMPAIGN, CHALLENGE	PUBLIC CHARITY	16,983.
JAFINA 633 THIRD AVE, 21ST FLOOR NEW YORK, NY 10017	NONE	PUBLIC CHARITY	26,200.
JEWISH COMMUNITY CENTER 6710 W MAPLE ROAD WEST BLOOMFIELD, MI 48322	NONE	PUBLIC CHARITY	1,000.
JEWISH FAMILY SERVICE 6555 W MAPLE ROAD WEST	NONE	PUBLIC CHARITY	10,000.

BLOOMFIELD, MI 48322

THE SHERMAN FAMILY FOUNDATION			38-3505951
JEWISH WOMEN'S FOUNDATION 6735 TELEGRAPH ROAD WEST BLOOMFIELD, MI 48322	NONE	PUBLIC CHARITY	250.
KOMEN BREAST CANCER 205 N MICHIGAN AVE, SUITE 2630 CHICAGO, IL 60601	NONE	PUBLIC CHARITY	2,500.
MIAMI COALITION OF CHRISTIANS AND JEWS 150 SE 2ND AVE MIAMI , FL 33131	NONE	PUBLIC CHARITY	1,000.
TAMARACK CAMPS 6735 TELEGRAPH ROAD WEST BLOOMFIELD, MI 48322	NONE	PUBLIC CHARITY	500.
TEMPLE ISRAEL 5725 WALNUT LAKE ROAD WEST BLOOMFIELD, MI 48323	NONE	PUBLIC CHARITY	1,000.
UNIVERSITY OF MICHIGAN S STATE ST ANN ARBOR, MI 48104	NONE	PUBLIC CHARITY	8,500.
UNIVERSITY OF MICHIGAN HILLEL 1429 HILL ST ANN ARBOR, MI 48104	NONE	PUBLIC CHARITY	14,000.
VARIETY - THE CHILDREN'S CHARITY 505 EIGHTH AVE., SUITE 1800 NEW YORK, NY 10018	NONE	PUBLIC CHARITY	200.
WRJC 1 CLOVER COURT WIXOM, MI 48393	NONE	PUBLIC CHARITY	1,200.
YAD EZRA 2850 W 11 MILE ROAD BERKLEY, MI	NONE	PUBLIC CHARITY	1,250.

48072

THE SHERMAN FAMILY FOUNDATION	38-3505951
WOMEN'S AMERICAN ORT NONE 250 PÀRK AVE. SOUTH, #600 NEW YORK, NY 10003	PUBLIC 2,500. CHARITY
WOMEN'S CARING PROGRAM NONE 2955 MORROW LANE MILFORD, MI 48381	PUBLIC 250. CHARITY
DESERT COMMUNITY FOUNDATION NONE 75105 MERLE DRIVE #300 PALM DESERT , CA 92211	PUBLIC 500. CHARITY
ELIE WIESEL FOUNDATION NONE 555 MADISON AVE, 20TH FLOOR NEW YORK, NY 10022	PUBLIC 5,000. CHARITY
TOTAL TO FORM 990-PF, PART XV, LINE 3A	231,183.

Form **8868** (Rev. April 2009)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

(V)

		filling for an Automatic 3-Month Extension, complete only Part I and check this box		
		filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
Do n	ot com	plete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed Fo	rm 8868.
Par	1	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A cor	poratio	n required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	olete	
Part I	•	Troquired to the Form 500 Faile requisiting an actornation of months extended the control of the	picto	▶ □
	•	parations (including 1120 C filam), partnerships PEMICs and trusts must use Form 7004 to require		
		porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an e tax returns	exter	ision of time
noted (not a you n	d below automat nust sul <u>irs.gov/</u>	iling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic ic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or corporate the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file efile and click on e-file for Chanties & Nonprofits.	ally i	(1) you want the additional ated Form 990-T. Instead,
Туре	or 1	Name of Exempt Organization	Emp	loyer identification number
print		THE CHERNAN TANILY FOUNDATION	_	0.0505051
File by		THE SHERMAN FAMILY FOUNDATION	3	8-3505951
due da filing yo return	te for our	Number, street, and room or suite no. If a P.O box, see instructions		
instruc	tions (City, town or post office, state, and ZIP code. For a foreign address, see instructions. FRANKLIN, MI 48025		
Chec	k type	of return to be filed (file a separate application for each return):		
X	Form 9 Form 9 Form 9	90-EZ Form 990-T (trust other than above) Form 60	69	
Te If t	lephone he orga his is fo	JANE SHERMAN s are in the care of ▶ 25001 RIVER DRIVE - FRANKLIN, MI 48025 No. ▶ 248-851-9386 FAX No. ▶ nization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this l. If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all r		
1		st an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti JGUST 15, 2010 , to file the exempt organization return for the organization named at		The extension
		e organization's return for:		
	► X	calendar year 2009 or		
		tax year beginning, and ending		*
2	If this t	ax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
3a	If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	nonrefu	ındable credits. See instructions.	3a	\$ 8,320.
ь	If this a	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	tax pay	ments made. Include any prior year overpayment allowed as a credit.	3ь	\$ 3,320.
С		e Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
		with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		
	See ins	tructions.	3с	\$ 5,000.
Cauti	on. If yo	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	879-	EO for payment instructions

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

Form 8868 (Rev 4-2009)

Form	8868 (Rev 4-2009)			Page 2
Note	You'are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868.	► X
	rou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Pal	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	7		
Туре	or Name of Exempt Organization	Emp	loyer laeni	ification number
print	THE SHERMAN FAMILY FOUNDATION	3	<u>8-350</u> !	5951
extend due da	ed Number, street, and room or suite no. If a PO box, see instructions te for 25001 RIVER DRIVE	For II	RS use only	/
filing the return instruc	See City, town or post office, state, and ZIP code For a foreign address, see instructions.			
Chec	Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	= '	orm 5227 orm 6069	Form 8870
STO	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 88	68.
• Th	JANE SHERMAN ne books are in the care of ▶ 25001 RIVER DRIVE - FRANKLIN, MI 48025			
	elephone No. ► 248-851-9386 FAX No ►			
	the organization does not have an office or place of business in the United States, check this box			>
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi	s is fo	r the whole	group, check this
box				
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010			
5	For calendar year 2009, or other tax year beginning, and ending			
6	If this tax year is for less than 12 months, check reason Initial return Final return		Change in	accounting period
7	State in detail why you need the extension	TYP	T.V. DEI	DIIDAI
	SUFFICIENT DATA REQUIRED TO COMPLETE AN ACCURATE AND TIS NOT AVAILABLE AT THIS TIME.	TME	LY RE	TURN
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		Γ	
8a	••	8a	s	8,320.
ь	nonrefundable credits. See instructions. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	- Oa	3	0,320.
D	tax payments made Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868.	8ь	\$	8,320.
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$	0.
	Signature and Verification			
Under	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the ue, correct, and complete, and that I am aut borized to prepare this form	best o	of my knowle	dge and belief,
	ture > // / Title > C/A	Date		113/10
			Forn	n 8868 (Rev 4-2009)