

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**

Department of the Treasury

Internal Revenue Service

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.

2009

OMB No 1545-0052

For cal	lendar year 2009, or tax yea	ir beginning	·· } ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	, and ending		
•	eck all that apply:	Initial return		ormer public charity	Final return	1
		Amended return	Address chan	ge 🔲	Name change	
Use th	he IRS Name of foundation				A Employer identification	n number
lab			ABLE FOUNDAT	ION,	62 4055063	•
	wise, INC. C/O I				63-1055063	3
	****	O box number if mail is not d	elivered to street address)	Room/suite	B Telephone number	
-	pecific Cru or town state a				(251)433-3	
Instru	ctione City Ut town, State, a				C If exemption application is p	
	MOBILE, AL				D 1. Foreign organization	s, check here
		X Section 501(c)(3) e.	• •		Foreign organizations me check here and attach co	omputation
	Section 4947(a)(1) nonexem		Other taxable private found		E If private foundation sta	itus was terminated
	market value of all assets at	· · · · · · · · · · · · · · · · · · ·	ing method: X Cash	Accrual	under section 507(b)(1)(A), check here $ ightharpoonup$
	m Part II, col. (c), line 16)		ther (specify)	hana 1	F If the foundation is in a	
<u>▶\$</u>		,,	ımn (d) must be on cash ı		under section 507(b)(1	T
Part	(The total of amounts in colunecessarily equal the amount	inns (b), (c), and (d) may not tts 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, gran	ts, etc., received	34,908.		N/A	
		in is not required to attach Sch. B				
	3 Interest on savings and temporal cash investments	orary				
	4 Dividends and interest fro	om securities	14,848.	14,848.		STATEMENT 1
	5a Gross rents					
	b Net rental income or (loss)					
او	6a Net gain or (loss) from sale of		-1,409.			
Revenue	b Gross sales price for all assets on line 6a	33,499.			ļ	
	7 Capital gain net income (from			0.		
٠ ۲	8 Net short-term capital ga	ın				,
	9 Income modifications Gross sales less returns	l			1	
1	Oa and allowances					
	b Less Cost of goods sold					
	c Gross profit or (loss)					
- 1	1 Other income	E 44	40.245	14 040		
	2 Total. Add lines 1 throug		48,347.	14,848.		
l.	3 Compensation of officers, dire		0.	0 •		0
l.	4 Other employee salaries a	-			<u></u>	+
	5 Pension plans, employee	Delients			RECEIV	FD
and Administrative Expenses	6a Legal fees					
Х	b Accounting feesc Other professional fees					
道 1 1	•					010 S-O-S
.¦ ≨:	8 Taxes					
istr		no.			OGDEN,	UT -
Ę 2		//I			,	
P 2		meetings				
P 2		-				
E 2		STMT 2	2,636.	2,636.	-	0
턡	4 Total operating and adm		2,030.	2,000		<u> </u>
Operating	expenses. Add lines 13 t		2,636.	2,636.		0
ŏ,	5 Contributions, gifts, gran	-	32,373.	2,000		32,373
- 1	6 Total expenses and disb		52,5,5		 	1 32,373
-	Add lines 24 and 25		35,009.	2,636.		32,373
7	7 Subtract line 26 from line	: 12:	33,003.	2,030.		32,373
-	2 Excess of revenue over expen		13,338.			
	b Net investment income (12,212.	 	
	c Adjusted net income (if n				N/A	
923501 02-02-1			Act Notice, see the instruc	tions	·	Form 990-PF (2009

INC. C/O RICHARD MITCHELL

63-1055063

Page 2

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	18,921.	5,419.	5,419.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	'	Less: allowance for doubtful accounts ▶_			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	•	Less: allowance for doubtful accounts			
G	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	_	Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
	i i	Investments - corporate bonds			
	Į.	Investments - land, buildings, and equipment basis			
	''				
	12	Less accumulated depreciation Investments - mortgage loans			
	13	Investments - other STMT 3	674,884.	701,724.	627,922.
	١	Land, buildings, and equipment basis	0/4,004.	701,724.	021,322.
	14	Less accumulated depreciation			
	46				<u></u>
	10	Other assets (describe			
	4.0	Tatal access (to be completed by all filers)	693,805.	707,143.	622 241
		Total assets (to be completed by all filers)	093,003.	/0/,143.	633,341.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue	-		
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Ľ.	21	Mortgages and other notes payable			
	22	Other liabilities (describe)		· · · · · · · · · · · · · · · · · · ·	
		-			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	1	Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31			
nce	1	Unrestricted			
a	25	Temporarily restricted			
Ö.	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31		_ 1	
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ë	29	Retained earnings, accumulated income, endowment, or other funds	693,805.	707,143.	
Ž	30	Total net assets or fund balances	693,805.	707,143.	
	31_	Total liabilities and net assets/fund balances	693,805.	707,143.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
=					
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		1	693,805.
		amount from Part I, line 27a		2	13,338.
		r increases not included in line 2 (itemize)		3	0.
-		lines 1, 2, and 3		4	707,143.
		eases 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, col	lumn (b), line 30	6	707,143.
					Form 990-PF (2009)

_	Part IV Capital Gains a	nd Loss	ses for Tax on In	vestment	Income				<u> </u>	<u> </u>	<u> </u>
			(s) of property sold (e.g. common stock, 200 shs			(b) H	ow acqui Purchas Donation	red (c) Date acquire (mo., day, yr.)		(d) Date sold (mo., day, yr.)
1a	1a CARDINAL HEALTH INC				D	0	8/24/0	9	08/26/09		
b				- 					 _		
										- -	
d								- -			
<u>е</u>		(f) Der	preciation allowed	(a) Cos	t or other basis				(h) Gain or (loss)	
	(e) Gross sales price		or allowable)		xpense of sale	ŀ		((e) plus (f) mi		
a	33,499.				34,90	8.					-1,409.
_b	<u> </u>										·
				<u> </u>							
_ <u>d</u>			· ·			-					
_	Complete only for assets showing	gain in col	lumn (h) and owned by t	he foundation	on 12/31/69			(I) G	ains (Col. (h)	gain m	inus
	(1) F M V (10/04/00	(j)	Adjusted basis	(k) Ex	cess of col. (I)			còl. (k	(), but not less Losses (from (than -	0-) o r
_	(i) F.M.V. as of 12/31/69	as	s of 12/31/69	over	col. (j), if any				.05565 (110111)	. (II)	
_a											-1,409.
b										····	
c						_					
e				<u>.</u>					-		
			∫ If gain, also enter	ın Part I. line	7	٦					
2	Capital gain net income or (net cap	ıtal loss)	If (loss), enter -0-) [2				-1,409.
3	Net short-term capital gain or (loss	•	d in sections 1222(5) an	d (6):		٦	ļ				
	If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8	olumn (c).				 	,		N	/A	
F	Part V Qualification Ur	nder Se	ction 4940(e) for	Reduced	Tax on Net	t Inve	estme	nt Inco		<u>/ A</u>	
(Fo	or optional use by domestic private t	foundations	s subject to the section 4	1940(a) tax on	net investment ir	ncome	.)				
` If <i>i</i>	neation 4040(d)(2) applies leave the	a nart blant		, ,			•				
	section 4940(d)(2) applies, leave thi	•								_	
	as the foundation liable for the section				•	riod?				L	Yes X No
+	Yes," the foundation does not qualif Enter the appropriate amount in ea					es.					
_	(a)		(b)		, , , , , , , , , , , , , , , , , , , ,	(c)				(C	i) ion ratio
	Base periód years Calendar year (or tax year beginning	g in)	Adjusted qualifying dist	tributions	Net value of no		table-use	assets			ed by col. (c))
	2008			6,000.				,809 .			.042918
_	2007			7,000.				351.			.010214
_	2006			6,500.				227.			.058193 .055233
_	2005 2004			0,000. 9,943.				,158. ,992.			.058369
_	2004			<i>J, J</i> 2 J • J			<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·		.030303
2	Total of line 1, column (d)								2		.224927
3	Average distribution ratio for the 5-	-year base	period - divide the total o	on line 2 by 5,	or by the number	r of yea	ars				
	the foundation has been in existen	ce if less th	an 5 years						3		.044985
											FFF 470
4	Enter the net value of noncharitable	e-use asset	is for 2009 from Part X,	line 5					4		555,472.
5	Multiply line 4 by line 3								5		24,988.
Ĭ	maniply o r by into o										21,500
6	Enter 1% of net investment income	e (1% of Pa	art I, line 27b)						6		122.
7	Add lines 5 and 6								7		25,110.
0	Entar qualifying distributions for-	Dart VII I	no 4								32,373.
đ	Enter qualifying distributions from	•		th and some	ilata that next use	na a 10	L tou rata		8		34,313.
	If line 8 is equal to or greater than I See the Part VI instructions.	mie 7, chec	ik die dux ili mart vi, ilne	iu, anu comp	nete mat part usif	iya 17	יס ומגומופ	•			
										F-	000 DE (2000

THE CUNNINGHAM CHARITABLE FOUNDATION, 63-1055063 Form 990-PF (2009) INC. C/O RICHARD MITCHELL Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 122. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b c Ali other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: a 2009 estimated tax payments and 2008 overpayment credited to 2009 6b b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d Enter any **penalty** for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 122. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Refunded > Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a any political campaign? X 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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. X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. 0 • (2) On foundation managers. ► \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or X bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b b If "Yes." has it filed a tax return on Form 990-T for this year? Х 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 6 X remain in the governing instrument? X 7 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions)

Form **990-PF** (2009)

X

8b

10

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)

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

		1055063	<u> </u>	Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
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 ▶ RICHARD MITCHELL Telephone no. ▶ 25:	<u>1-433-3</u>	370 <u>9</u>	
	Located at ►P.O. BOX 7338, MOBILE, AL ZIP+4	<u>>36670</u>	<u> </u>	38_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	I/A	
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?	No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	l No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	No		
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	/A 1b		
	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			
	before the first day of the tax year beginning in 2009?	10		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)):			
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?	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			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	İ		
	statement - see instructions.)	/A <u>2b</u>	<u> </u>	
(f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	_		
	during the year?] No		
t	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			
	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,			
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	/A <u>3b</u>		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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		X_
		Earm QQ	DE	0000

THE CUNNINGHAM CHARITABLE FOUNDATION, 63-1055063 INC. C/O RICHARD MITCHELL Form 990-PF (2009) 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: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No (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? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (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 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 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 🗶 No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X 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? 7b b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deterred compensation (b) Title, and average hours per week devoted (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address to position allowances 0. SEE STATEMENT 0 0 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 (e) Expense account, other (b) Title, and average hours per week devoted to position (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances compensation NONE

Form 990-PF (2009)

Total number of other employees paid over \$50,000

TNC.	C/O	RTCHARD	MITCHELL

63	_1	U	5	5	n	6	3	
u J	_	u	_	_	v	v	_	

Page 7

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<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 standard of organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1 N/A		
2		
		_
3		
4		
		<u> </u>
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
·		
All other property colleges and the colleges of the colleges o		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3	•	0.
Total. Add lines 1 through 3		

Form **990-PF** (2009)

Form 990-PF (2009)

	INC: C/O RICHARD MITCHELL	62-1	055065 Fage 6
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<u></u>
а	Average monthly fair market value of securities	1a	544,012.
	Average of monthly cash balances	1b	19,919.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	563,931.
	Reduction claimed for blockage or other factors reported on lines 1a and	1.5	000/3020
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	563,931.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,459.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	555,472.
6	Minimum investment return. Enter 5% of line 5	6	27,774.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
<u></u>	foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6		27 774
		1	27,774.
		+	
D C	Income tax for 2009. (This does not include the tax from Part VI.) Add lines 2a and 2b	- _	122
3	Distributable amount before adjustments. Subtract line 2c from line 1	2c	122.
4	Recoveries of amounts treated as qualifying distributions	3	27,652.
5	Add lines 3 and 4	4	0. 27,652.
6		5	
7	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	27,652.
Р	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	32,373.
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	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	32,373.
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	122.
6	Adjusted qualifying distributions. Subtract loss 5 from loss 4		22 251

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
-	Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI,				
line 7				27,652.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			7,963.	
b Total for prior years:				
				-
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008	0			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 32,373.			7 062	
a Applied to 2008, but not more than line 2a			7,963.	
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.			24 410
d Applied to 2009 distributable amount				24,410.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				3,242.
7 Amounts treated as distributions out of				
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	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9;				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				5 000 DE (0000)

Form **990-PF** (2009)

Form 990-PF (2009)

INC. C/O RICHARD MITCHELL

63-1055063 Page 11

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year or Approved for Future P	ayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 6				20 252
Total b Approved for future payment			▶ 3a	32,373
a Approved for future payment				
NONE				
Total _			▶ 3b	0
923811 02-02-10	·- · · · · · · · · · · · · · · · · · ·			rm 990-PF (2000)

INC. C/O RICHARD MITCHELL

Part XVI-A Analysis of Income-Producing Activities

	Unrelated	huginase income	I = 1		
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Turicuon income
a					······
b					
C					
d					· · · · ·
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					-
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	14,848.	
5 Net rental income or (loss) from real estate:				,	
a Debt-financed property					
b Not debt-financed property			 - -		
6 Net rental income or (loss) from personal			 		
· • • • • • • • • • • • • • • • • • • •					
property 7. Other investment income			+ +		
7 Other investment income			+ +		
8 Gain or (loss) from sales of assets other			14	1 400	
than inventory			1 14	-1,409.	
9 Net income or (loss) from special events			+ +		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_				
b	_		\perp		
C	_ _				
d	_		\perp		
e	_				
12 Subtotal. Add columns (b), (d), and (e)		0.		13,439.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	13,439.
(See worksheet in line 13 instructions to verify calculations	i.)				
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of E	xempt P	urposes	
Line No. Evalue helev how such activity for which	noomo jo ranortad ja	nalumn (a) of Dort XVII (1 contributo	d importantly to the ecom	nlichment of
Explain below how each activity for which in the foundation's exempt purposes (other the			A COMMIDULE	u importantity to the accom	pusiment of
the foundation's exempt purposes (other ti	nan by providing fund	3 for such purposes).			
				····	
					
					
					
					
		_			
					
923621 02-02-10					Form 990-PF (2009)

INC. C/O RICHARD MITCHELL 63-1055063 Page 13 Form 990-PF (2009) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII

	- Exempt Organizations				
1	•	f the following with any other organization described in section 501(c) of	<u> </u>	Yes	No
	the Code (other than section 501(c)(3) organizations) or				
a	Transfers from the reporting foundation to a noncharitab	le exempt organization of:			
	(1) Cash		1a(1)		<u>X</u>
	(2) Other assets		1a(2)		X
b	Other transactions:		ļ		
	(1) Sales of assets to a noncharitable exempt organization	on	1b(1)		<u> </u>
	(2) Purchases of assets from a noncharitable exempt or	ganization	1b(2)		<u> </u>
	(3) Rental of facilities, equipment, or other assets		1b(3)		<u> </u>
	(4) Reimbursement arrangements		1b(4)		<u> </u>
	(5) Loans or loan guarantees		1b(5)		<u> X</u>
	(6) Performance of services or membership or fundraising	ing solicitations	1b(6)		X X X X X
C	Sharing of facilities, equipment, mailing lists, other assets	s, or paid employees	1c_		<u>X</u>
d		ollowing schedule. Column (b) should always show the fair market value of the		sets,	
		dation received less than fair market value in any transaction or sharing arrang	ement, show in		
	column (d) the value of the goods, other assets, or service				
a)ı	Line no (b) Amount involved (c) Name of i	noncharitable exempt organization (d) Description of transfers, transact	ions, and sharing ar	rangeme	nts
		N/A			
	-				
2a	Is the foundation directly or indirectly affiliated with, or re	the state of the s			-
	in section 501(c) of the Code (other than section 501(c)((3)) or in section 527?	Yes	(X] No
b	If "Yes," complete the following schedule.	(1) To a factor of the factor o			
	(a) Name of organization	(b) Type of organization (c) Description of	relationship		
	N/A				
_	Under a feature of a survey I dealers that I have a surveyed thus return	uncluding accompanying achodules and statements, and to the best of my knowledge and	poliof it is true com		
		, including accompanying schedules and statements, and to the best of my knowledge and l ry) is based on all information of which preparer has any knowledge	beller, it is true, com	sci,	
1	Valaria III dala II	16/28/10 I Thatver			
اه	Supplies of officer or trimbo		 		
gn Here	Signature of officer or trastee	Date Title	Preparer's identif	ייות חווים	nher
5	Preparer's	C C	.		.54
	Signature Price Signature Pric	BON DIMITED & HONGMON IIID 500 € 63	P00474		
ļ	Signature Signature RUSSELL THOMP: if self-employed), P.O. BOX 7010		<u>-0965059</u>		——
	if self-employed), address, and ZIP code MORTLE AT. 366		/ 251 \ 472		EΛ
	address, and ZIP code MOBILE, AL 36	670 Phone no.	(251)473		
			Form 990	,-rr (ZUU9)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

	E CUNNINGHAM CHARITABLE FOUNDATION, IC. C/O RICHARD MITCHELL	63-1055063	
Organization type (check o		30 2000	
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
General Rule	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in ma		
contributor Comp		oney or property) from any one	
Special Rules			
509(a)(1) and 170(l	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the ij Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.		
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III			
contributions for u If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it e, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000 <i>ly</i> religious, chantable, etc ,	
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•	

for Form 990, 990-EZ, or 990-PF.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

THE CUNNINGHAM CHARITABLE FOUNDATION,

INC. C/O RICHARD MITCHELL

Employer identification number

63-1055063

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ROBERT T CUNNINGHAM JR PO BOX 66705 MOBILE, AL 36633	ss	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
:			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE CUNNINGHAM CHARITABLE FOUNDATION,

INC. C/O RICHARD MITCHELL

63-1055063

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	985 SHARES OF COMMON STOCK CARDINAL HEALTH INC	-	
		\$ 34,908.	08/24/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		- \$	

TOTAL TO FORM 990-PF, PART II, LINE 13

FORM 990-PF . DIVIDEND	S AND	INTER	EST 	FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMO	UNT		TAL GAINS	COLUMN (A	7)
CHARLES SCHWAB	•		14,	848.		0.	14,8	48.
TOTAL TO FM 990-PF, PART I, L	N 4		14,	848.		0.	14,8	48.
FORM 990-PF	0	THER E	XPEN	ISES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	NET MEN	(B) INVI IT INC		(C) ADJUSTED NET INCOM		
FEES ACCOUNTING TAXES		1,363. 865. 408.	••	1	,363. 865. 408.			0.
TO FORM 990-PF, PG 1, LN 23		2,636.		2	,636.			0.
FORM 990-PF	ОТН	ER INV	ESTN	MENTS			STATEMENT	3
DESCRIPTION			LUAT ETH(TION DD	вос	OK VALUE	FAIR MARKE VALUE	ET
TAXABLE BOND MUTUAL FUNDS EQUITY MUTUAL FUNDS			COST			189,114. 512,610.	197,5 430,4	

701,724. 627,922.

FORM 990-PF . PART VIII - LIST OF OFFICERS, DIRECTORS

STATEMENT

	EES AND FOUNDATION MANA			SMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
ROBERT T. CUNNINGHAM, JR. P.O. BOX 66705 MOBILE, AL 36660	PRES. 0.00	0.	0.	0.
ROBERT T. CUNNINGHAM. III P. O. BOX 66705 MOBILE, AL 36660	DIRECTOR 0.00	0.	0.	0.
JOANNA M. CUNNINGHAM P. O. BOX 66705 MOBILE, AL 36660	V.PRES. 0.00	0.	0.	0.
RICHARD MITCHELL P. O. BOX 7338 MOBILE, AL 36670	SEC./TREAS. 0.00	0.	0.	0.
C BRADY CUNNINGHAM P. O. BOX 66705 MOBILE, AL 36660	DIRECTOR 0.00	0.	0.	0.
JACOB L CUNNINGHAM P. O. BOX 66705 MOBILE, AL 36660	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

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

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MR. RICHARD MITCHELL, THE CUNNINGHAM CHARITABLE FOUNDATION, P.O. BOX 1307, P. O. BOX 7338 MOBILE, AL 36670

TELEPHONE NUMBER

251-471-2302

FORM AND CONTENT OF APPLICATIONS

THE CUNNINGHAM CHARITABLE FOUNDATION, INC. IS GOVERNED BY A SEVEN PERSON BOARD OF DIRECTORS. THREE OF THESE INDIVIDUALS ARE ACTIVELY INVOLVED IN ASSISTING DISADVANTAGED, UNDERPRIVILEGED AND NEEDY CHILDREN IN THE MOBILE AND BALDWIN COUNTY AREAS, OR HAVE PREVIOUS EXPERIENCE IN ACTIVELY PROVIDING SUCH ASSISTANCE. THESE THREE INDIVIDUALS SERVE AT THE PLEASURE OF THE BISHOP OF THE EPISCOPAL DIOCESE OF THE CENTRAL GULF COAST, THE ARCHBISHOP OF THE CATHOLIC DIOCESE OF MOBILE, AND THE MOBILE DISTRICT SUPERINTENDENT OF THE UNITED METHODIST CHURCH, RESPECTIVELY. THESE THREE BOARD MEMBERS, THROUGH THEIR CAREER INVOLVEMENT, ARE ABLE TO IDENTIFY DISADVANTAGED OR UNDERPRIVELEGED CHILDREN WHO WOULD BE WORTHY OF ASSISTANCE BY THE FOUNDATION.

ANY SUBMISSION DEADLINES

THERE ARE NO APPLICATION DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE PURPOSE OF THE FOUNDATION IS TO DISTRIBUTE INCOME FOR THE BENEFIT OF DISADVANTAGED, UNDERPRIVILEGED AND NEEDY CHILDREN IN THE MOBILE AND BALDWIN COUNTY AREAS AND TO MAKE DISTRIBUTIONS ON INCOME TO SECTION 501(C)(3) ORG. WHO WILL USE SUCH DISTRIBUTIONS FOR THE BENEFIT OF DISADVANTAGED, UNDER-PRIVELEGED AND NEEDY CHILDREN IN THE MOBILE AND BALDWIN COUNTY AREAS. BEYOND THESE, THERE ARE NO LIMITATIONS OR RESTRICTIONS ON AWARDS.

•	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 6
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
WILMER HALL CHILDREN HOME 3811 OLD SHELL ROAD MOBILE, AL 36608	NONE NO RESTRICTIONS	PUBLIC	2,373.
THE EXCHANGE CLUB FAMILY CENTER OF MOBILE 601 BEL AIR BOULEVARD MOBILE, AL 36606	NONE NO RESTRICTIONS	PUBLIC	8,000.
FAMILY PROMISE OF COASTAL AL 1260 DAUPHIN STREET MOBILE, AL 36604	NONE NO RESTRICTIONS	PUBLIC	5,000.
SANTA CLAUS ASSURANCE 913 SOUTH BROAD STREET MOBILE, AL 36603	NONE NO RESTRICTIONS	PUBLIC	2,000.
UNITED METHODIST INNER CITY MISSION 913 SOUTH BROAD STREET MOBILE, AL 36603	NONE NO RESTRICTIONS	PUBLIC	5,000.
YOUNG LEADERS OF AMERICA FWO OFFICE PARK, SUITE 2-300 273 AZALEA ROAD MOBILE, AL 36609	NONE NO RESTRICTIONS	PUBLIC	5,000.
SNOOK YOUTH CLUB OF FOLEY 1391 S CEDAR ST FOLEY, AL 36535	NONE NO RESTRICTIONS	PUBLIC	5,000.
FOTAL TO FORM 990-PF, PART XV, L	INE 3A		32,373.

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

Form 8868 (Rev. 4-2009)

mema	P / 110 d doparate dp product / 10 d d d d	
•	bu are filing for an Automatic 3-Month Extension, complete only Part I and check this box	. X
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this t I t complete Part II unless you have already been granted an automatic 3-month extension on a previously file	
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)	
	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and comp	plete
Part I		
to file	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an income tax returns.	
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file and click on e-file for Chanties & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T Instead,
Туре		Employer identification number
print	THE CUNNINGHAM CHARITABLE FOUNDATION,	· ·
	INC. C/O RICHARD MITCHELL	63-1055063
File by 1 due dat filing yo	Number, street, and room or suite no. If a P.O. box, see instructions P. O. BOX 7338	
return (Instruct	566	
	MOBILE, AL 30070-0038	
Chec	k type of return to be filed (file a separate application for each return)	
	Form 990 Form 990-T (corporation) Form 47	20
一	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52	27
一	Form 990-EZ Form 990-T (trust other than above) Form 60	069
	Form 990-PF	70
	RICHARD MITCHELL	
• Th	e books are in the care of ▶ P.O. BOX 7338 - MOBILE, AL 36670-0038	
Te	lephone No ▶ <u>251-433-3709</u> FAX No ▶	
	he organization does not have an office or place of business in the United States, check this box	▶ ∟
	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
box]	▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all	members the extension will cover
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until	
	AUGUST 15, 2010 , to file the exempt organization return for the organization named a	bove The extension
	is for the organization's return for	
	► X calendar year 2009 or	
	tax year beginning, and ending	
2	If this tax year is for less than 12 months, check reason.	Change in accounting period
3a	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.	3a \$ 0.
L.	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	38 \$
b	tax payments made Include any prior year overpayment allowed as a credit.	зь \$ 1,570.
_	Balance Due, Subtract line 3b from line 3a Include your payment with this form, or, if required,	2,370.
С	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	
	See instructions	3c \$ 0.
Caut	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-EO for payment instructions

923831

LHA

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

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 an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoonup X
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of 	•	
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	ly filed Fo	rm 8868
Part I Automatic 3-Month 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		▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reques to file income tax returns.	st an exter	nsion of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extended below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 elect (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite o you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electron www.rs.gov/efile and click on e-file for Chanties & Nonprofits.	ronically if	f (1) you want the additional ated Form 990-T Instead,
Type or Name of Exempt Organization	Emp	loyer identification number
print THE CUNNINGHAM CHARITABLE FOUNDATION,		
INC. C/O RICHARD MITCHELL	6	3-1055063
Number, street, and room or suite no. If a P O. box, see instructions		
return See P. O. BOX 7338		·····
City, town or post office, state, and ZIP code. For a foreign address, see instructions. MOBILE, AL 36670-0038		
MODINE, AD 300/0-0030		
Check type of return to be filed (file a separate application for each return)		
Form 990 Form 990-T (corporation) Form	n 4720	
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form	n 5227	
	n 6069	
	n 8870	
RICHARD MITCHELL The books are in the care of ▶ P.O. BOX 7338 - MOBILE, AL 36670-0038 Telephone No ▶ 251-433-3709 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) DOOK ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs o	If this is fo	
1 request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2010, to file the exempt organization return for the organization name is for the organization's return for ▼ X calendar year 2009 or ▼ tax year beginning, and ending		The extension
2 If this tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period
3a 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	3a_	\$ 0.
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	3b	\$ 1,570.
c Balance Due. Subtract line 3b from line 3a 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	3c	\$ 0.
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Fo	orm 8879-	EO for payment instructions
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.	- 	Form 8868 (Rev. 4-2009)
		1 01111 0000 (1107. 7 2003)