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

OMB No 1545-0052 2009

_		evenue Se				be able	to use	a copy or				orting requirements		
_				or tax year b						09, and end	_ <u> </u>		, 20	
G	Che	ck all t	hat apply	Initial re	eturn			_		er public cha	arity		Final return	
				Amend	ed return			< Addre	ss change			Name change		
			Name of fou	undation								A Employer identifi	cation number	
ι		ne IRS	THE TOTAL THE TANK THE								1			
	lab		KENNY FOUNDATION INC.								84-	-0925851		
,	Other pri	,	Number and street (or P O box number if mail is not delivered to street address)  Room/suite							B Telephone number (se	e page 10 of the instructions)			
	or ty									200		, , ,		
S		pecific		WAUKEE SI						300_			)3) 770-7077	
łı	nstru	ctions.	City or town	, state, and ZIP	code							C If exemption application pending check here	ation is	
				GO 0000	•							D 1 Foreign organiza	tions check here . • L	
			<u>_</u>	CO 80206	_							2 Foreign organiza 85% test, check t		
H		• •	e of organiza		ection 501(							computation .		
1				nexempt chari					ivate foun			E If private foundatio	n status was terminated	
ı	_	air market value of all assets at end							ash A	Accrual		under section 507(b	o)(1)(A), check here .	
			m Part II, col			ther (s			 ı cash bası				in a 60-month termination	
		▶ \$		84,738.		COIUITII	1 (0) 1	nust be or	i casn basi	s)	1	under section 507(b	)(1)(B) check here	
	art I	total o may n	f amounts in c ot necessarily	enue and Exp columns (b), (c), equal the amo ge 11 of the inst	, and (d) ounts in		Reven opense bool			nvestment come		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
_	1	Contribut	ion <u>s, gift</u> s grants,	etc , received (attac	h schedule) .									
2010	2	Check	If the fattach	foundation is not Sch B.	required to						<u> </u>			
	3	Interest	on savings and	temporary cash	nvestments			32,820		582,820			ATCH 1	
<del>5</del> 4	4	Divider	ids and intere	est from securiti	es			29,764		29,764	<u> </u>		ATCH 2	
9	5 a	Gross r	ents									<del> </del>		
Ī	b	Net rent	al income or (lo	oss)							<u> </u>			
e ĕ	6a	Net gair	or (loss) from	sale of assets not	on line 10		-10	00,594						
ָוֹ בַּ'	ь	assets of	ales price for all in line 6a	3,0	13,564.				<u> </u>		1			
Revenue	7	Capital	gain net inco	ome (from Part	IV, line 2) .						<u> </u>			
; "	8		•	al gaın							ļ			
;	9			s · · · · · ·		-		<del></del>			ļ			
)	10 a		lles less returns wances • • •								<del> </del>			
	l		st of goods solo								ļ			
	С			(attach schedu	le)						-			
	11	Other	ncome (attacl	h schedule)				11,990.		612,584				
_	12			rough Wil- ()				0.		012,304	<del>\</del>			
		Comper	sat <del>ion of office</del>	rs, directors, trust	ees SC · ·			50,000.		<del></del>	<del> </del> -		60,000	
S	14	Other	moloyee sala MAY	aries and wages	. O.S			17,282			┼	<del></del>	17,282	
use	15		n plans, empl		· 기울[ ]			1,202	-		<del> </del>	<del></del>	17,202	
cpe	16a	Legal f	ees (attach so	hedule)	テᠮ╌╟╌╏				-	<del></del>	<del> </del>			
Ê	b			lach-sctledule)	<u></u>	-	1 (	95,460.		190,910	-		4,550	
tive	С			ees (attach scho	edule)[ 🎝 ]			73,400.		190,910	•	<del>-</del>	4,330	
tra	17		·								1		<u> </u>	
nis	18			(see page 14 of the	•							<del></del>	<u> </u>	
Ē	19	•	,	schedule) and	•						┼		-	
Ad	20										┧			
pu	21			and meetings				<del>-</del>			1	· · · · · · · · · · · · · · · · · · ·		
ga	22			tions				39.			<del>                                     </del>		39	
ţį	23		-	ach schedule)							<del> </del>			
Operating and Administrative Expenses	24			l administrative			2.	72,781		190,910			81,871	
ō O				h 23				14,575.		170,710	1		314,575	
_	25			grants paid	1			37,356.		190,910	├		396,446	
_	26			rsements Add line	es 24 and 25			.,, 556		10,310	+-		390,440	
	27		ct line 26 fron					75,366						
	l			penses and disbur				, 5, 500		421,674	1		<del></del>	
	l			ome (if negative					<del></del>	761,014	-	-0-		
		Adinet	ed net incom:	e (if negative, e	nter -()-)				1			- U <b>-</b>		

Part	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of year				
	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1	Cash - non-interest-bearing	1,530,257.	451,341.	451,341			
2	Savings and temporary cash investments						
3	Accounts receivable						
1	Less allowance for doubtful accounts ▶						
4	Pledges receivable			<del></del>			
	Less allowance for doubtful accounts ▶						
5	Grants receivable						
6	Receivables due from officers, directors, trustees, and other			<del></del>			
"	disqualified persons (attach schedule) (see page 16 of the instructions)						
7	Other notes and loans receivable (attach schedule)						
'	Less allowance for doubtful accounts						
١.				<del></del>			
8   8	Inventories for sale or use						
Assets 0 0 0	Prepaid expenses and deferred charges						
10   <del>ک</del>	a Investments - U.S. and state government obligations (attach schedule) .	<del></del>		<del></del>			
	b Investments - corporate stock (attach schedule)	12,136,874.	12 126 714	12 504 720			
11		12,136,874.	13,126,714.	13,584,738			
	Less accumulated depreciation (attach schedule)						
12	Investments - mortgage loans						
13 14	Investments - other (attach schedule)  Land, buildings, and equipment basis						
	equipment basis Less accumulated depreciation (attach schedule)						
15	Other assets (describe )						
16							
	instructions Also, see page 1, item l)	13,667,131.	13,578,055.	14,036,079			
17	Accounts payable and accrued expenses						
18	Grants payable						
- 1	Deferred revenue						
			<del></del>				
20	Loans from officers, directors, trustees, and other disqualified persons						
Liabilities 5 2 2 2 2 2 3	Mortgages and other notes payable (attach schedule)						
7 22	Other liabilities (describe	<del></del>					
	Total Patibles (add lines 47 through 22)						
23		<del></del>					
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.						
S 24	Unrestricted						
<u>ह</u> 25	Temporarily restricted						
<u>ස</u>   26	Permanently restricted						
Net Assets or Fund Balance	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.						
් 27	Capital stock, trust principal, or current funds	1.					
<u>နာ</u> 28	Paid-in or capital surplus, or land, bldg , and equipment fund						
29	Retained earnings, accumulated income endowment, or other funds	13,667,130.	13,578,055.				
قا <sub>30</sub>	Total net assets or fund balances (see page 17 of the						
<u></u>	instructions)	13,667,131.	13,578,055.				
31	Total liabilities and net assets/fund balances (see page 17						
	of the instructions)	13,667,131.	13,578,055.				
Date	Analysis of Changes in Net Assets or Fund E		22,0.0,000.				
			agree with				
	tal net assets or fund balances at beginning of year - Part II,			13,667,131			
	d-of-year figure reported on prior year's return)						
2 En	ter amount from Part I, line 27a her increases not included in line 2 (itemize) ▶ATTACHI	MENTE C	2	-75,366			
3 Ot	her increases not included in line 2 (itemize) $ ightharpoonup ATTACHI$	MENT 6	3	12 501 500			
4 Ad	d lines 1, 2, and 3	<u> </u>	<u>4</u>	13,591,766			
5 De	creases not included in line 2 (itemize) ► ATTACHI	MENT 7	5	13,711			
e To	tal net assets or fund halances at end of year (line 4 minus li	ne 5) - Part II, column (h)	line 30	13.578.055			

Part IV Capital Gains and Losses for Tax on Investment Income

	describe the kind(s) of property sold (	. •	acquired P-Purchase	(c) Date	(d) Date sold (mo , day, yr )		
CEE DADE THE COUR	ick warehouse, or common stock, 200	sns MLC Co)	D-Donation	(mo , day, yr )	(****)		
<u></u>	2011						
<u>b</u>			<del></del>				
d							
<u>e</u>	(f) Depression allowed	(g) Cost or other basis		(h) Com or (le			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini			
<u>a</u>	· · · · · · · · · · · · · · · · · · ·						
b	<del></del>	<u> </u>	-				
<u>c</u>							
d				<u> </u>	<del></del>		
e Complete only for a section		10/04/00		<del></del>			
Complete only for assets sr		ned by the foundation on 12/31/69		Gains (Col (h) g			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co			
а							
b							
С							
d					<u> </u>		
е							
2 Capital gain net income or		gain, also enter in Part I, line 7	} <u> </u>		100 504		
	( II	(loss), enter -0- in Part I, line 7	2		100,594.		
	or (loss) as defined in sections 12						
	line 8, column (c) (see pages 13						
	ne 8		3				
	<del></del>	uced Tax on Net Investment Inc e section 4940(a) tax on net investr					
	the section 4942 tax on the distrib not qualify under section 4940(e)	outable amount of any year in the ba Do not complete this part	ase period	ا ر	Yes X No		
	ount in each column for each year	, see page 18 of the instructions be	fore mak	ing any entries			
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by			
2008	228,381.	12,930,188.			0.017663		
2007	49,671.	12,988,664.		· ·	0.003824		
2006	1,052,608.	12,473,843.			0.084385		
2005	1,277,168.	12,188,555.		***	0.104784		
2004	135,091.	9,531,204.			0.014174		
2 Total of line 1, column (d)			2		0.224830		
3 Average distribution ratio f	or the 5-year base period - divide	e the total on line 2 by 5, or by the					
number of years the found	ation has been in existence if less	s than 5 years	3		0.044966		
4 Enter the net value of none	charitable-use assets for 2009 fro	m Part X, line 5	4	13	,583,122.		
5 Multiply line 4 by line 3	<b>5</b> 610,7						
6 Enter 1% of net investmen	6 4,2		4,217.				
	Add lines 5 and 6						
			8		396,446.		
If line 8 is equal to or gre Part VI instructions on page	ns from Part XII, line 4	n Part VI, line 1b, and complete t		using a 1% tax			

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	structio	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter:(attach copy of ruling letter if necessary - see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,2	217.
	here $\blacktriangleright$ $X$ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%  of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		4,2	217.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		4,2	217.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 16,749.			
þ	Exempt foreign organizations-tax withheld at source			
	tak para with application for extension of time to me (i arm cocc),			
	Backup withholding erroneously withheld		16,7	749
7	Total credits and payments Add lines 6a through 6d		10,	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10		12,5	32
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   12,532 Refunded  11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1 a	-130	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1		
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			v
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		21
c	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 remain in the governing instrument?	6		Х
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		Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) PCO,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			Х
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b_		^
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			Х
4.0	27)? If "Yes," complete Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х

Х

Х

3 b

Х

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

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

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

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

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

Form 990-PF	(2009)	84-0925851	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid Empl	oyees,
3 Five hig	hest-paid independent contractors for professional services (see p	page 23 of the instructions). If non-	e, enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total numb	per of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
List the fou	ndation's four largest direct charitable activities during the tax year. Include relevant stati ions and other beneficiaries served, conferences convened, research papers produced, et	strical information such as the number c	Expenses
1 NOT	APPLICABLE		
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page 23 of	the instructions)	<u> </u>
Describe th	e two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 NONE			
2			
	ogram-related investments. See page 24 of the instructions		
3 NONE		·	
Total, Add	lines 1 through 3		<b>.</b>

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	12,806,089.
b	Average of monthly cash balances	1b	983,883.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
đ	Total (add lines 1a, b, and c)	1 d	13,789,972.
е			
	1c (attach detailed explanation)	[ [	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	13,789,972.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	206,850.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	13,583,122.
6	Minimum investment return. Enter 5% of line 5	6	679,156.
Pa	The price of the instructions (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ and do not complete this private organizations.		
1	Minimum investment return from Part X, line 6	1	679,156.
2 a			
b		] [	
С	Add lines 2a and 2b	2c	4,217.
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	674,939.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	674,939.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	674,939.
		· · · · · · · · · · · · · · · · · · ·	
Pa	Qualifying Distributions (see page 25 of the 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	396,446.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		· · · · · · · · · · · · · · · · · · ·
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
a	- · · · · · · · · · · · · · · · · · · ·	3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	396,446.
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 (see page 26 of the instructions)	5	4,217.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	392,229.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		<del></del>
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				674,939.
2	Undistributed income, if any, as of the end of 2009				
a	Enter amount for 2008 only				
h	Total for prior years 20 07 .20 06 .20 05		-		
3	Excess distributions carryover, if any, to 2009				
-	From 2004				
b	117 206				
c	From 2006 445, 410.				
d				•	1
-	From 2008				
f	Total of lines 3a through e	562,706.			
4	Qualifying distributions for 2009 from Part XII,	· · · · · · · · · · · · · · · · · · ·			
•	line 4 ▶ \$ 396,446.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				396,446.
	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2009	278,493.			278,493.
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	284,213.			
	Prior years' undistributed income Subtract				
•	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable			-	
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be				
7	distributed in 2010			···	ļ
,	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	284,213.			
10	Analysis of line 9				
а	Excess from 2005				
b	204 212				
c	_ , ,,,,,	İ			
đ					
е	Excess from 2009				

	If the foundation has r	eceived a ruling or d	etermination letter tha	t it is a private op	erating	NOT APPLICABL
h	foundation, and the ruling Check box to indicate who					(1)(2) 05 1042(1)(5)
_	ſ	Tax year	private operating found	Prior 3 years	on   4942(	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed					
b b	85% of line 2a		-			
·	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c Complete 3a b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter  (1) Value of all assets  (2) Value of assets qualifying					
b	under section 4942(j)(3)(B)(i) "Endowment" alternative test-				-	
	enter 2/3 of minimum invest- ment return shown in Part X line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest dividends, rents, payments on secunties					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942					
	(j)(3)(B)(III)					
	organization					
Pa	rt XV Supplementa	ry Information (Curing the year - see	omplete this part	only if the foun	dation had \$5,000	or more in assets
1	Information Regarding		_ <u>:.                                    </u>	structions.)		
a	List any managers of t before the close of any	he foundation who h	ave contributed more	e than 2% of the to nore than \$5,000) (	tal contributions receiv See section 507(d)(2))	ved by the foundation
	ROBERT GRYZ	MALA				
b	List any managers of to ownership of a partners	the foundation who on the country of the country of the country of	own 10% or more of which the foundation	the stock of a cor has a 10% or greate	poration (or an equally er interest	large portion of the
	N/A					
2	Information Regarding	Contribution, Grant	, Gift, Loan, Scholarsh	ip, etc., Programs:	-	<del>-</del>
	Check here ► X If the unsolicited requests for organizations under other	or tunds. It the tound	dation makes gifts, g	rants, etc (see pac	ritable organizations a ge 28 of the instruction	and does not accept ons) to individuals or
а	The name, address, an	d telephone number	of the person to whon	applications should	be addressed	
b	The form in which appli	cations should be sub	omitted and information	n and materials the	y should include	
c	Any submission deadlin	es				
d	Any restrictions or lim	nitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or other

Part XV Supplementary Information (c 3 Grants and Contributions Paid Dur	ontinued)	roved for F	Future Payment	
Recipient	If recipient is an individual,	Foundation	1	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipioni		
ATTACHMENT 9				
Total		· · · · · ·	▶ 3a	314,575
<b>b</b> Approved for future payment				
ATTACHMENT 10				
Total			▶ 3b	36,400

iter gross	amounts unless otherwise indicated	Unrelat	ed business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a						
b		<u> </u>	<del> </del>			
С		-				
d		-				· · · · · · · · · · · · · · · · · · ·
e			······································			
f						
_	and contracts from government agencies ship dues and assessments		· · · · · · · · · · · · · · · · · · ·			·
	in savings and temporary cash investments			14	582,820.	
	Is and interest from securities			14	29,764.	
	al income or (loss) from real estate					<del></del>
	t-financed property					
	debt-financed property					
	I income or (loss) from personal property					
	vestment income					
	oss) from sales of assets other than inventory			18	-100,594.	
	me or (loss) from special events					
	ofit or (loss) from sales of inventory					
	venue a					
b						
С						
d						
е				1		
0						
Subtotai	Add columns (b), (d), and (e)				511,990.	
Total. Ad	dd line 12, columns (b), (d), and (e)				<del></del>	511,990
Total. Ad	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities	to verify calcula to the Acc	ations) complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Total. Ad ee worksh art XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28	to verify calcula to the Acc	ations) complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee workshort XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee workshart XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E	xempt Purp	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee workshart XVI-	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee workshart XVI-ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee worksh art XVI- ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee worksh art XVI- ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee worksh art XVI- ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee workshart XVI-ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee worksh art XVI- ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly
Total. Adee worksh art XVI- ine No.	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28  Relationship of Activities  Explain below how each activities accomplishment of the form	to verify calcula to the Acc	ations) complishment of E n income is reporte exempt purposes (	ed in column other than b	oses  (e) of Part XVI-A cont	ributed importantly

F8fm 990-PF (2009)						04-0923031								Page 13			
Pa	rt X\	/II			egarding zations	Transfers	s To	and	Transac	tions	and	Re	lationship	s With	Nonc	harit	able
1	Did	the	organization	directly	or indirectly	engage in	anv	of th	o following	wath	201/	othor	organization	docaribad		V	N.

		<u></u>										
1		he organization directly									Yes	No
а		izations? fers from the reporting fo				•		Ū	,			
_		ash								1a(1)		Х
		ther assets								1a(2)		Х
b		transactions										
	(1) S	ales of assets to a nonch	aritable exempt	organization						1b(1)		Х
		urchases of assets from								1b(2)		Х
		ental of facilities, equipme								1b(3)		X
		eimbursement arrangeme								1b(4)		Х
		oans or loan guarantees										X
		erformance of services o										X
c		ng of facilities, equipmen								1 c		X
		e answer to any of t								the	fair r	narke
	value	of the goods, other	assets, or serv	vices given by the	reporting fo	undation I	f the foun	dation rec	eived less	than	fair r	narke
	value	in any transaction or	sharing arran	igement, show in	column (d) ti	he value o	of the good	s, other	assets, or	service	s rec	ceived
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt o	rganization		iption of transf	ers, transact	ons, and shar	ng arra	ngeme	nts
		N/A		·		N/A						
								<u>-</u>				
			-									
				<u> </u>								
					-							
					<del>-</del> *							
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_												
2 a		foundation directly or								_		7
		n 501(c) of the Code (oth		501(c)(3)) or in section	on 527?			:	L	Ye	s 🔀	Ŋo.
b	If "Yes	s," complete the following		0.7	<u> </u>							
		(a) Name of organization	1	(b) Type o	f organization	_		(c) Description	on of relations	hip		
		· · · · · · · · · · · · · · · · · · ·										
								· · · · · · · · · · · · · · · · · · ·				
							· · ·					
$\neg$	Linder	penalties of perjury. I decla	are that I have ev	ramined this return und	ludina accompa	nuna sabadul	los and states		a the best of			
	belief,	it is true, gorrect, and come	elete Declaration	of preparer (other than	taxpayer or fidu	iciary) is base	es and states d on all infor	mation of w	hich preparer	has an	y knov	ye and wledge
		///	2		ĺ	5/10/1	, a	1000	sure-			
ച	$\frac{1}{8}$	gnature of officer/o trustee				Date	<u> </u>	Title	,,,,,,,			
Here		griatura or orniceign trustee		·	15-1-	Date	T	Title	Preparer's	dontifi		
	,a	. `		<b>7</b> %	Date	,	Check if		number (Sec	e Signá	ture or	
ngio	rer.	Preparer's	( 6		4	30/10	self-employ	ed 🕶 📖	page 30 of the P000025		ictions)	,
"	Paid Preparer's Use Only	Signature Firm's name (or yours if	ARTHU	R S. ORKIN C	P.A. TN	10,70	<u> </u>	CIN > 9	34-15801			
	Pre Us	Firm's name (or yours if self-employed), address,		SOUTH JOLIET		<del></del>		EIN ▶ ₹	, 1 1001			
		and ZIP code	AURORA		COUNT	800	1 4	Phone as	303-67	71 <b>-</b> 8	563	
i			110110117	.,			<u> </u>	Phone no		m 991		(2000)

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F		INS AND LO		cription	ķ	οď	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	D	Gain or	
expenses of sale	allowable	basisl	12/31/69	12/31/69	adı basıs	+	(loss)	
		VARIOUS BON	OS			١		
13,564.		3,014,158.					-594.	
		MEDICAL PRO	VIDER				11/20/2006	12/31/2009
0.		100,000.					-100,000.	
TAL GAIN(L	oss)		• • • • • • • • • • • • • • • • • • • •				-100,594.	
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FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	5,791. 32. 1,625. 72,867. 502,500.	.028,820.
REVENUE AND EXPENSES PER BOOKS	5,791. 32. 1,625. 72,867. 502,500.	302,020
DESCRIPTION	WELLS FARGO VANTAGE INCOME PARTNERS FUNDS I, LLC MED PRO FIN CORP IV FIRST WESTERN TRUST BANK BEAR CREEK ASSET MANAGEMENT MEDALLION MEZZANINE PARTNERS, LLC	10101

NET INVESTMENT INCOME	29,257.	29,764.
REVENUE AND EXPENSES PER BOOKS	29,257.	29,764.
		TOTAL
DESCRIPTION	BEAR CREEK ASSET MANAGEMENT MERRILL LYNCH	

SEES	
PROFESSIONAL	
- OTHER	
PART I	
990PF,	******
FORM	

CHARITABLE <u>PURPOSES</u>	1,670.	4,550.
NET INVESTMENT INCOME	187,599. 3,311.	190,910.
REVENUE AND EXPENSES PER BOOKS	187,599. 1,670. 3,311. 2,880.	195,460.
DESCRIPTION	MEDALLION ASSET MANAGEMENT LLC PAYROLL PROCESSING BROKER FEES TAX PREPARATION	TOTALS

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION BANK FEE

REVENUE AND EXPENSES PER BOOKS

CHARITABLE PURPOSES

39.

TOTALS

39.

V 09-5

BONDS		
CORPORATE BONDS		
ı		
II		
PART II		
FORM 990PF,		DESCRIPTION
FORM		DESCE

MEDALLION MEZZANINE PARTNERS VANTAGE PARTNERS LP BEAR CREEK ASSET MANAGEMENT MEDICAL PROVIDER FINANCIAL COR

TOTALS

13,584,738.

13,126,714.

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84-0925851

ENDING	FMV	10,443,101.	3,123.	3,138,514.	.0
ENDING	BOOK VALUE	10,000,000.	3,123.	3,123,591.	.0

## FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

TAX EXEMPT INCOME 1.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

NON DEDUCTIBLE EXPENSES FEDERAL TAXES

461. 13,250.

13,711. TOTAL

φ

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	.0	0.
COMPENSATION	.0	.0	0.	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	SECRETARY	TREASURER / ASSIST SECRETARY	GRAND TOTALS
NAME AND ADDRESS	ROBERT GRYZMALA 299 MILWAUKEE STREET 300 DENVER, CO 80206	JEAN GRYZMALA 299 MILWAUKEE STREET 300 DENVER, CO 80206	NICK ZIESER 299 MILWAUKEE STREET 300 DENVER, CO 80206	

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

FURM STUFE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	D DURING THE YEAR		ATTACHMENT 9
	RELATIONSHIF TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BOYS HOPE GIRLS HOPE OF COLORADO 3540 S POPLAR STREET, SUITE 103 DENVER, CO 80237	NONE 501 (C)(3)	OPERATING SUPPORT	20,000
F R I E N D S 555 ALTER STREET, SUITE 19-F BROOMFIELD, CO 80020	NONE 501 (C) (3)	OPERATING SUPPORT	000'6
SEEDS OF HOPE 1300 SOUTH STEELE STREET DENVER, CO 80210	NONE 501 (C) (3)	OPERATING SUPPORT	100,000
MINDS MATTER OF DENVER, INC PO BOX 48162 DENVER, CO 80204	NOTIE 501 (C) (3)	OPERATING SUPPORT	5,575
CROSS INTERNATIONAL 370 W CAMINO GARDENS BLVD BOCA RATON, FL 33432	NONE 501 (C)(3)	OPERATING SUPPORT	5,000
ST CATHERINE'S OF SIENA SCHOOL 4200 FEDERAL BLVD DENVER, CO 80211	501 (C)(3)	OPERATING SUPPORT	5,000
CHALLENGE FOUNDATION 4545 S UNIVERSITY BLVD ENGLEWOOD, CO 80113-6059	NONE 501 (C)(3)	OPERATING SUPPOPT	150,000
HOPE HOUSE OF COLORADO P O BOX 740568 ARVADA, CO 80006	NONE 501 (C)(3)	OPERATING SUPPORT	5,000

ATTACHMENT 9 (CONT'D)

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

	CONTIGUED TO CIDENTAL INC. CONTRETE TO CON		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
COLORADO VINCENTIAN VOLUNTEERS	NONE	OPERATING SUPPORT	15,000
1732 PEARL STREET	501 (C) (3)		
DENVER, CO 80203			

314,575 TOTAL CONTRIBUTIONS PAID

		TA TT	ATTACHMENT 10
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR COUTRIBUTION	AMOUNT
BAL SWAN CHILDREN'S CENTER	HONE	OPERATING SUPPORT	20,000
1145 EAST 13TH AVE	501 (C)(3)		
BROOMFIELD, CO 80020			
77 77 77 78 78 78 78 78 78 78 78 78 78 7	NONE	OPERATING SUPPORT	6,400
555 ALTER STREET, SUITE 19-F	501 (C)(3)		
BROOMFIELD, CO 80020			
NATIVITY OF OUR LORD CATHOLIC CHURCH	NONE	OPERATING SUPPORT	10,000
900 w MIDWAY BLVD	501 (C) (3)		
BROOMFIELD, CO 80020			

36,400
APPROVED
CONTRIBUTIONS
TOTAL

### SCHEDULE D (Form 1041)

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

# **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2009

84-0925851 KENNY FOUNDATION INC. Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (mo , day, yr ) (mo , day, yr ) Subtract (e) from (d) instructions) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b -594. 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, -594. column (3) on the back. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) instructions) 6a -100,000. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet ...... 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -100,000.12 For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

Sche	dule D (Form 1041) 2009		·		Page 2
Pa	rt III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this	part	(see page 5)	or trust's	
13	Net short-term gain or (loss)	13		<del> </del>	-594.
14	Net long-term gain or (loss):				100 000
	Total for year	14a			-100,000.
	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b		_ <del></del> .	<del></del>
	28% rate gain	14c			-100,594.
15 Not	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For	15	T Part I line (1a) If line	25 142 25d 15 20lum	<del></del>
	art V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete P				
Pa	rt IV Capital Loss Limitation		•		<del></del>
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I II	ne 4c if a trust) the sr	naller of	
а	• • • • • • • • • • • • • • • • • • • •		. ,,		3,000)
Note	The loss on line 15, column (3) or b \$3,000 e: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page	ė i, im	ne 22 (or Form 990-T, I	ne 34), is a loss, coi	mplete the Capital Loss
	vover Worksheet on page 7 of the instructions to figure your capital loss carryove				
_	Tax Computation Using Maximum Capital Gains Rate		))		- Dark Lan Dark II and
	n 1041 filers. Complete this part only if both lines 14a and 15 in colue is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor			nount is entered in	1 Part I or Part II and
	tion: Skip this part and complete the worksheet on page 8 of the instruc				
• E	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Forr	n 990-T trusts. Complete this part only if both lines 14a and 15 are	e gair	ns, or qualified divide	ends are included	in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this paier line 14b, col. (2) or line 14c, col. (2) is more than zero.	rt and	complete the work	sheet on page 8	of the instructions if
				····	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4) .	17		
18	Enter the smaller of line 14a or 15 in column (2)				
19	but not less than zero. 18				
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19 20				
21	If the estate or trust is filing Form 4952, enter the		<del> </del>		
	amount from line 4g, otherwise, enter -0-				
22	Subtract line 21 from line 20 If zero or less, enter -0-	-	22		
23	Subtract line 22 from line 17 If zero or less, enter -0-	•	23		
24	Enter the <b>smaller</b> of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box				
No. Enter the amount from line 23			25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?			1 1	
	Yes. Skip lines 27 thru 30, go to line 31	ne 22	27		
				-	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27				
30	Multiply line 29 by 15% ( 15)			30	
31 Figure the tax on the amount on line 23 Use the 2009 Tax Rate Schedule for Estates and Trus					
	(see the Schedule Ginstructions in the instructions for Form 1041).			31	<del></del>
32	Add lines 30 and 31				
33	Add lines 30 and 31			32	
55	(see the Schedule Ginstructions in the instructions for Form 1041)				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h				
	G, line 1a (or Form 990-T, line 36)		na on roini roari, s	34	

## SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

# Continuation Sheet for Schedule D (Form 1041) ► See instructions for Schedule D (Form 1041).

► See instructions for Schedule D (Form 1041).

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

OMB No 1545-0092

2009

Name of estate or trust

Employer identification number 84-0925851

KENNI FOUNDATION INC.				04-0923631		
Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less						
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)	
1a VARIOUS BONDS			3,013,564.	3,014,158.	-594.	
		·				
	<u> </u>					
	<del> </del>					
		<u></u>				

-594.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . .

Page 2

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

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
MEDICAL PROVIDER	11/20/2006	12/31/2009	0.	100,000.	-100,000
		-			
					<u> </u>
6b Total. Combine the amounts in colu	mn (f) Enter here a	nd on Schedule D,	line 6b	<u></u>	-100,000