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### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

		nue Service Note. The foundation may be able			te reporting	requirements	
For c	alend	ar year 2009, or tax year beginning $07/01/09$ , a	and ending $06/3$	0/10		<del></del>	<del></del>
G C	heck a	ill that apply: 🔲 Initial return 🔲 Initial re	turn of a former public	charity	[	Final return	
		Amended return Add	ress change	Name	change		
Use	the IR	S Name of foundation			A Emp	loyer identification num	ber
	abel.	THE THROCKMORTON FOUNDATION	NC		61	-6288548	
	erwise	ACCT 7355000010			B Teler	phone number (see page 1	0 of the instructions)
	orint	Number and street (or P O box number if mail is not delivere	d to street address)	Room/suite		0-258-2394	,
	type.	7 EASTON OVAL EA4E86	4 10 50 601 424 605,	· · · · · · · · · · · · · · · · · · ·		emption application is pend	ling check here
	Specif					preign organizations, check	· ·
	uction		43219				_
		оп				oreign organizations meeti	- 1 1
		ype of organization. Section 501(c)(3) exempt private				5% test, check here and at	
			le private foundation		•	rate foundation status was on 507(b)(1)(A), check her	<b>.</b>
		ket value of all assets at end J Accounting method	X Cash Acc	rual			_
		from Part II, col. (c), Other (specify)				foundation is in a 60-mon	
$\overline{}$	e 16) I		be on cash basis)		unde	r section 507(b)(1)(B), che	ck nere
Pa	<u>ırt l</u>	Analysis of Revenue and Expenses (The	(a) Revenue and	(h) Nation		(a) Administrations	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv	_	(c) Adjusted net	for chantable purposes
		the amounts in column (a) (see page 11 of the instructions) )					(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				L RE	CFIVED
	2	Check ▶ 🕱 if the foundation is <b>not</b> required to attach Sch. B					O
	3	Interest on savings and temporary cash investments	86,082		36,082	0003 ON	, 1:0 00:0
	4	Dividends and interest from securities	65,149		55,149	0 10	1 8 5010 14
	5a	Gross rents					38
a)	ь	Net rental income or (loss)	<u>-</u> -			OG	DFN IIT
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	-13,061	l			
	ь	Gross sales price for all assets on line 6a 2, 384, 637		\ <u></u>	<del></del>		
		<del></del>		_	0		
ш	7	Capital gain net income (from Part IV, line 2)				0	
	8	Net short-term capital gain			-		
	9	Income modifications		<u> </u>		<u></u>	<u> </u>
	10a	Gross sales less returns & allowances		<u> </u>			<u> </u>
	b	Less Cost of goods sold				<u> </u>	
	C	Gross profit or (loss) (attach schedule)		<u> </u>			
	11	Other income (attach schedule)		ļ		ļ <u>_</u>	
	12	Total. Add lines 1 through 11	138,170		51,231		
Ś	13	Compensation of officers, directors, trustees, etc	42,005		13,002		29,003
enses	14	Other employee salaries and wages					
en	15	Pension plans, employee benefits					
×	16a	Legal fees (attach schedule)					
SCONNED NOV 2.4. 7010	ь	Accounting fees (attach schedule) STMT 1	1,538		1,154	L	384
Š	С	Other professional fees (attach schedule)					
=₹	17	Interest					
	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 2	2,052		662		
	19	Depreciation (attach schedule) and depletion		i -			
Q d T	20	Occupancy		Ì			'
<b>~</b> ~~	21	Travel, conferences, and meetings		i ·		<del></del>	
	22	Printing and publications		<del></del>	_		
_ W	23	Other expenses (att. sch.)  STMT 3	200	<u> </u>	-		200
₽ĕ	24	·				<del> </del>	
	24	Total operating and administrative expenses.	45,795	· .	14,818		20 507
<b>Z</b>		Add lines 13 through 23			,010	<del> </del>	29,587
≶ত	25	Contributions, gifts, grants paid	236,013		14 010		236,013
<b>₩</b> -	26	Total expenses and disbursements. Add lines 24 and 25	281,808	<u> </u>	14,818		265,600
90	27	Subtract line 26 from line 12.					
	а	Excess of revenue over expenses and disbursements	-143,638			<u> </u>	
	b	Net investment income (if negative, enter -0-)	<u></u>	1.	36,413		
	<u></u>	Adjusted net income (if negative, enter -0-)	<u> </u>	Ĺ		0	

	art I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	ait ii	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing .			
	2	Savings and temporary cash investments	260,174	140,532	140,532
- 1	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
ļ	4	Pledges receivable ▶			
- [		Less allowance for doubtful accounts ▶			
	5	Grants receivable			_
- }	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the			
		instructions)			
- 1	7	Other notes and loans receivable (att. schedule)			
- }		Less allowance for doubtful accounts ▶			
ts	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			<u> </u>
AS	10a	Investments—U.S. and state government obligations (attach schedule) STMT 4	2,101,084	2,136,284	2,272,129
1	b	Investments—corporate stock (attach schedule) SEE STMT 5	3,174,599	3,122,731	3,076,489
- [	c	Investments—corporate bonds (attach schedule)		,, ,	
-	11	Investments—land, buildings, and equipment, basis			
J	••	Less accumulated depreciation (attach sch )			
	12	Investments—mortgage loans			<del></del>
- [	13	Investments—other (attach schedule)			
- 1	14	Land, buildings, and equipment, basis			
	17	Less: accumulated depreciation (attach sch )			
ŀ	15	Other assets (describe SEE STATEMENT 6	7,328		···
- 1	16	Total assets (to be completed by all filers—see the	.,,520		<u></u>
	10	Instructions Also, see page 1, item I)	5,543,185	5,399,547	5,489,150
$\uparrow$	17	Accounts payable and accrued expenses	0/010/000	0,000,0	5/105/150
	18	Grants payable		•	
<u>e</u>	19	Deferred revenue		····	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
유	21	Mortgages and other notes payable (attach schedule)			
	22				
-	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)	0		
+		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted	ļ		
<u>a</u>	24 25	Temporarily restricted			
Ba	26	Permanently restricted			
핗	20	Foundations that do not follow SFAS 117, check here ▶   X			[
<u>=</u>		and complete lines 27 through 31.			
뜁	27	Capital stock, trust principal, or current funds	5,543,185	5,399,547	1
Net Assets or Fund Balan		Paid-in or capital surplus, or land, bldg., and equipment fund	3,343,103	3,333,341	
뜅	28	· · · · · · · · · · · · · · · · · · ·			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
2	30	Total net assets or fund balances (see page 17 of the	5,543,185	5,399,547	
뾜		Instructions)	3,343,183	3,399,347	
- {	31	Total liabilities and net assets/fund balances (see page 17	5,543,185	5,399,547	
1	Part II	of the instructions)	3,343,163	3,399,347	
_		II Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with	—————	<del></del>
'			agiee wiiii	1.1	5,543,185
~		f-year figure reported on рпог year's return) amount from Part I, line 27a		1 1	-143,638
		<b>v</b>		. 2	-143,030
		increases not included in line 2 (itemize)	••	. 3	5,399,547
		ines 1, 2, and 3		4	3,399,341
٠ 5		eases not included in line 2 (itemize)	 1) line 30	5	5,399,547
_0	iolal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b	7 <sub>11</sub> mile 30 .		Form 990-PF (2009)

Part IV   Capital Gains a	nd Losses for Tax on Investme	ent Inco	ome		
	e the kind(s) of property sold (e g , real estate, chouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day, )	
1a HUNTINGTON BANK	L/T		P	VARIOU	JS VARIOUS
b HUNTINGTON BANK			P	VARIOU	JS VARIOUS
c LONG TERM CAP G	AIN DIV		P	VARIOU	JS VARIOUS
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or other basis plus expense of sale	,	h) Gain or (loss) plus (f) minus (g)
a 551,117			571,341		-20,224
b 1,832,660			1,826,357		6,303
c 860					860
_d					
<u>e</u>					
Complete only for assets showing	g gain in column (h) and owned by the fo	oundation	on 12/31/69		ns (Col. (h) gain minus
(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		but not less than -0-) or sses (from col (h))
a					-20,224
b					6,303
С					860
d					
е				<del> </del>	
2 Capital gain net income or (net c	apital loss)  If gain, also enter in If (loss), enter -0- in			2	-13,061
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6		_		
	, column (c) (see pages 13 and 17 of the		ons). 📘		
If (loss), enter -0- in Part I, line 8				3	6,303
Part V Qualification Ur	nder Section 4940(e) for Reduc	ed Tax	on Net Investment Inco	m <u>e</u>	
If "Yes," the foundation does not qua	nis part blank.  tion 4942 tax on the distributable amoun lify under section 4940(e) Do not compl  each column for each year, see page 18	ete this p	art	es X No	
(a) Base penod years	(b)	1	(c)		(d) Distribution ratio
Calendar year (or tax year beginning			Net value of nonchantable-use ass	1 (5	ol (b) divided by col (c))
2008		,514	5,325,		0.060563
2007		,128	6,600,		0.048801
2006	338	,054	6,605,		0.051175
2005	317	,203	6,458,		0.049112
2004		, 325	6,363,	506	0.047509
2 Total of line 1, column (d)				2	0.257160
<del>-</del>	5-year base period—divide the total on it has been in existence if less than 5 years		5, or by the	3	0.051432
4 Enter the net value of nonchanta	ble-use assets for 2009 from Part X, line	e 5		4	5,123,080
5 Multiply line 4 by line 3		•		5	263,490
		•			
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)		·	6	1,364
7 Add lines 5 and 6				7	264,854
8 Enter qualifying distributions from	n Part XII, line 4			8	265,600
If line 8 is equal to or greater tha	n line 7, check the box in Part VI, line 1b	, and con	mplete that part using a 1% tax r	ate See the	
Part VI instructions on page 18			<del></del>		
					Form <b>990-PF</b> (2009)

<u>-om</u>	990-PF (2009) THE THROCKMORTON FOUNDATION 61-6288548		P	age 4
_Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	18)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		/	٠,
ь			1.	364
•	here ► X and enter 1% of Part I, line 27b		_=/	-
_				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	4		
_	Part I, line 12, col. (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0 0 0
3	Add lines 1 and 2	_	<u>l,</u>	364
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	_		0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,	364
6	Credits/Payments.	P		
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,560			
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			
			1	560
7	Total credits and payments Add lines 6a through 6d			360
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		_	4 4 4
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> 196</u>
<u> 11 </u>	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 196 Refunded ▶ 11			
<u> Pa</u>	rt VII-A Statements Regarding Activities			,
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No
	participate or intervene in any political campaign?	1a	ļ	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)?	16	ł	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1.3		1
	published or distributed by the foundation in connection with the activities			
_	Did the foundation file Form 1120-POL for this year?	4.0		X
Ç		<u>1c</u>		
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 ▶ \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers  \$		l	
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		l	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	1	1	
-	By language in the governing instrument, or	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	ļ
			X	
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	7	^	<del> </del>
8a			l	
	instructions) ▶ OH	İ		
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
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			
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		x
		Form 99	0-PF	
				(= vos)

350	3601						
om	990-PF (2009) THE THROCKMORTON FOUNDATION 61-628854	3			_	Pa	age <b>5</b>
Pa	art VII-A Statements Regarding Activities (continued)						
<u>-</u> 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 page 20 of the instructions)				11		X
2	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 applica	tion?			13	X	
	Website address NONE						
14	The books are in care of HUNTINGTON NATIONAL BANK  Telepi	none no	▶ :	330-2	58-	239	4
	39 EAST MARKET ST						
	Located at ► AKRON, OH	ZIP+	4 ▶	44308	3		
15	Section 4947(a)(1) nonexempt chantable 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	<b>&gt;</b>	15				
Pa	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
1a	During the year did the foundation (either directly or indirectly):						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Ye	es [	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_		<u></u>		]	
	disqualified person?	Ye	s [	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ye		X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Ye	s	X 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)?		es [	X 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.)	Ye	s [	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulati	ons					
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?			N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			<b>▶</b> ∐			
C	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?			N/A	1c		
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)).						
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and		c	===			
	6e, Part XIII) for tax year(s) beginning before 2009?	∐ Ye	es [	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20						
þ	Are there any years listed in 2a for which the foundation is <b>not</b> 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			/-	<u> </u>		
	all years listed, answer "No" and attach statement—see page 20 of the instructions)			N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				1		
	<b>▶</b> 20 , 20 , 20 , 20						
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	$\Box$		<b>.</b>			
	at any time during the year?	Ye	s	X No			
h	If "Vec." did it have exect business holdings in 2000 as a result of (4) any purchase by the foundation or				ı	1 1	1

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

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

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)

Form 990-PF (2009)

3b

N/A

огп	990-PF (2009) THE THROCKMOR	ION FOUNDATION	61-6	5288548			Page 6
Pa	art VII-B Statements Regarding	<b>Activities for Which Form</b>	4720 May Be F	Required (cont	inued)		
5a	During the year did the foundation pay or inc	cur any amount to					
	(1) Carry on propaganda, or otherwise atten	npt to influence legislation (section	4945(e))?	\ \	′es 🗓 No	1 1	
	(2) Influence the outcome of any specific pu	iblic election (see section 4955); or	to carry on,	_	_		
	directly or indirectly, any voter registration	on drive?			res 🔀 No	)	j
	(3) Provide a grant to an individual for trave	l, study, or other similar purposes?		· 🔀 Y	′es 🔲 No	1	
	(4) Provide a grant to an organization other	than a charitable, etc , organization	n described in				
	section 509(a)(1), (2), or (3), or section 4	1940(d)(2)? (see page 22 of the ins	tructions)	\ <b>_</b> \	′es 🔀 No	1 1	
	(5) Provide for any purpose other than religi	ous, charitable, scientific, literary, o	or educational	_	_		
	purposes, or for the prevention of cruelty	to children or animals?		<u> </u>	′es 🏋 No	1 1	
b	If any answer is "Yes" to 5a(1)-(5), did any o	f the transactions fail to qualify und	ler the exceptions d	escribed in		-	
	Regulations section 53 4945 or in a current in	notice regarding disaster assistanc	e (see page 22 of th	ne instructions)?		5b	X
	Organizations relying on a current notice reg	arding disaster assistance check h	ere		▶ ∐		
C	If the answer is "Yes" to question 5a(4), does	s the foundation claim exemption f	rom the tax	. —	<b></b>	1 1	1 1
	because it maintained expenditure responsit	oility for the grant?		N/A 📙 Y	′es 📙 No	1	
	If "Yes," attach the statement required by Re	egulations section 53 4945-5(d)					
6a	Did the foundation, during the year, receive a	any funds, directly or indirectly, to p	ay premiums			1	1
	on a personal benefit contract?			\ <b>\</b>	′es 🔀 No	-	
b	Did the foundation, during the year, pay prer	niums, directly or indirectly, on a po	ersonal benefit conti	ract?		6b	X
	If "Yes" to 6b, file Form 8870				<b>-</b>	1	
7a	At any time during the tax year, was the four	ndation a party to a prohibited tax s	helter transaction?	<u> </u>	'es 🏻 No	$\vdash$	
b	If yes, did the foundation receive any procee				N/A	7b	
Pa	art VIII Information About Office	ers, Directors, Trustees, Fo	oundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors				<del></del>		
<u>1 l</u>	ist all officers, directors, trustees, foundati	on managers and their compens	ation (see page 22	of the instruction	s)		
	(a) Name and addre	ess	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
					Compensation	+	
	IL A MALY	TALLMADGE	TRUSTEE				•
	3 MAPLE ST	OH 44278	3.50	8,000	<u> </u>	<del>" </del> -	0
	DEN RASNICK	AKRON	TRUSTEE				•
	18 S MAIN ST	OH 44308	3.50	8,000		<u>-</u>	0
	INTINGTON NATIONAL BANK	AKRON	TRUSTEE	26 005			•
35	EAST MARKET ST, SUITE 402	OH 44308	5.50	26,005	<u> </u>	<u>-</u>	0
						Į.	
2	Compensation of five highest-paid employ If none, enter "NONE."	yees (other than those included o	n line 1—see page	23 of the instruc	tions).	<u></u> _	
		<del></del>	(b) Title and mineral	I	(d) Contributions to	T -	
	(a) Name and address of each employee	paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Exp	ense account, allowances
NC	ONE .						
			1				
ota	I number of other employees paid over \$50,00	00		·	<u> </u>	•	$T^-$
							$\overline{}$

Form 990-PF (20	09) THE THROCKMORTON FOUNDATION	61-6288548	Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid En	
3 Five highe	st-paid independent contractors for professional services (see page	23 of the instructions). If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
_			
•	·		
Total number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct chantable activities during the tax year. Include relevant statist to other beneficiaries served, conferences convened, research papers produced, etc.	ucal information such as the number of	Expenses
1 N/A			
2		•	
3			
4			
Part IX-B	Summary of Program-Related Investments (see page	e 24 of the instructions)	
	largest program-related investments made by the foundation during the tax year on		Amount
1 N/A			
2			
•••			
All other program 3	-related investments See page 24 of the instructions		

Form 990-PF (2009)

▶

Total. Add lines 1 through 3

Form **990-PF** (2009)

265,600

3a

3b

4

5

3

5

Amounts set aside for specific charitable projects that satisfy the

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

På	rt XIII Undistributed Income (see page 26 o	f the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				254,790
2	Undistributed income, if any, as of the end of 2009.				
а	Enter amount for 2008 only			258,253	
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009.				
а	From 2004				•
ь	From 2005				
С	From 2006		:		
_	From 2007				
	From 2008		*		,
f	Total of lines 3a through e			İ	
4	Qualifying distributions for 2009 from Part XII,				
•	line 4 <sup>·</sup> ▶ \$ 265,600				
а	Applied to 2008, but not more than line 2a			258,253	
	Applied to undistributed income of prior years			200,200	
	(Election required—see page 26 of the instructions)				
_	Treated as distributions out of corpus (Election				
·	• • •				
4	required—see page 26 of the instructions) Applied to 2009 distributable amount				7,347
	Remaining amount distributed out of corpus				7,347
	•			<u></u>	<u></u>
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
D	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				
a	Subtract line 6c from line 6b. Taxable				
	amount—see page 27 of the instructions		<u>                                     </u>	,	
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page			1	
_	27 of the instructions				<del>. ,</del>
t	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be			[	047 440
_	distributed in 2010	<u></u>			247,443
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	ļ			<del> </del>
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
_	Instructions)			<del></del>	
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a		<del> </del>		
10	Analysis of line 9.				
а	Excess from 2005				
b	Excess from 2006	4			
С	Excess from 2007	_			
d	Excess from 2008				
е	Excess from 2009	i	1	j i	

Form 990-PF (2009) THE THROCKMORTON FOUNDATION 61-6288548 Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2a Enter the lesser of the adjusted net (e) Total (a) 2009 (b) 2008 (c) 2007 (d) 2006 income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test-enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test-enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed "Support" alternative test-enter (1) Total support other than gross investment income (interest. dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at Part XV any time during the year—see page 28 of the instructions.) Information Regarding Foundation Managers: List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ I If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed MARK A. MOSLEY HUNTINGTON NATIONAL BANK AKRON OH 44308 b The form in which applications should be submitted and information and materials they should include SEE STATEMENT 7 c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors SEE STATEMENT 8

Grants and Contributions Paid During the Recipient	If recipient is an individual, show any relationship to any foundation manager	. Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Name and address (home or business)  Paid during the year SEE STATEMENT 9	or substantial contributor			236,013
Total		1	▶ 3a	236,013
b Approved for future payment N/A				
Total .			<b>▶</b> 3b	990 PE (2000

DAA

Part XVI-A	Analysis of Income-Producing A	ctivities				
	ounts unless otherwise indicated	1	business income	Excluded by	y section 512, 513, or 514	(e)
1 Program se	ervice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a						
				1		
	<del></del>					<u></u>
				1		<del></del>
e f		-		+ +		
· ——	nd contracts from government agencies	-	·	<del> </del>		
-	p dues and assessments		<del></del>			
	savings and temporary cash investments			14	86,082	
	and interest from securities			14	65,149	
5 Net rental in	ncome or (loss) from real estate					
	nanced property					
	ot-financed property			<u> </u>		
	ncome or (loss) from personal property					
7 Other inves				18	-13,061	
	s) from sales of assets other than inventory or (loss) from special events			10	-13,001	
	t or (loss) from sales of inventory				-	
	nue. a		· · · · · · · · · · · · · · · · · · ·			
						•
d		_		<del> </del>		
e		-				
	dd columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·	0	138,170	
	line 12, columns (b), (d), and (e) t in line 13 instructions on page 28 to verify calculate	tions )	•		13	138,170
Part XVI-B			ent of Exempt F	urposes		
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur instructions)	ne is reported in c	olumn (e) of Part XV	I-A contribut		of the
N/A	indudation by					
						···
				• • • • • • • • • • • • • • • • • • • •		
						<u>-</u>
					<del></del>	
				·		
		•				
					, , , , , , , , , , , , , , , , , , , ,	

1 Did the organization directly or indexetly ergage in any of the following with any other organizations described in section S1 (c) of the Code (other than section S0 (c)(3) organizations) or in section S27, relisting to political organizations or insection S27, relisting to political organization (1) Select of assets to a noncharitable exempt organization (1) Select of assets to a noncharitable exempt organization (1) Select of assets to a noncharitable exempt organization (1) Select of assets or assets from a noncharitable exempt organization (1) Select of assets or assets from a noncharitable exempt organization (1) Select of assets or assets or membership or fundrasing solicitations (1) Select of the goods, coher assets, or services given by the reporting foundation in the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, the masset or assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, the masset or assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, the masset or assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, the masset organization are considered to the second organization of the properties of reliationships or services are considered to the goods, other assets, or services given to the second organization organization organization organization organization oreceived less than fair market value of the goods, other assets, o	P	art XVII	Information Rega Exempt Organiza	_	ansfers To and Transaction	ons and Relations	hips With N	oncharitable	е			
in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organization of (1) Cash (2) Other assets from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets b Dither transactions.  (2) Purchases of assets from a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (15) Rotat of Carliese, equipment, or other assets (15) Cans or Oriona guarantees (15) Extra oriona guarantees (15) E	1	Did the org			ne in any of the following with any	other organization descr	nbed			Yes	No	
organizations?  (1) Cash (2) Other assets (3) Other assets (4) Other transactions. (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursament arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraving scilicitations (6) Performance of services or membership or fundraving scilicitations (7) Purchase of services or membership or fundraving scilicitations (8) Performance of services or membership or fundraving scilicitations (9) Performance of services or membership or fundraving scilicitations (9) Performance of services or membership or fundraving scilicitations (15) I was no floan guarantees (15) Loans or loan guarantees (15) Loans or loan guarantees (15) Performance of services or membership or fundraving scilicitations (15) I was no floan guarantees (15) Performance of services or membership or fundraving scilicitations (15) I was no floan guarantees (15) I was no floan guarantees (15) Loans or loan guarantees (16) Performance of services given by the reporting foundation. If this foundation received less than fair market value or the goods, other assets, or services given by the reporting foundation. If this foundation received less than fair market value or any of the above in "Yes," complete the following science of the goods, other assets, or services received. (1) June no floan guarantees (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (1) Amount movined (2) Description of restationship (3) Amount movined (4) Description of restationship (5) Amount movined (6) Amount movined (7) Amount movined (8) Amount movined (9) Amount movined (9) Amount movined (10) Amount movined (11) Amount movined (11) Amount movined (12) Amount movined (13) Amoun	•	-						ļ.	$\neg \uparrow$			į
a Transfers from the reporting foundation to a nonchantable exempt organization of  (1) Cash (2) Other assets b Check transactions. (2) Purchases of assets to a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental orfacilities, equipment, or other assets (5) Loans or foan guarantees (6) Loans or foan guarantees (7) Foreformance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (1) Siles of sona guarantees (2) Performance of services or membership or fundrasing solicitations (3) Hernary of sona guarantees (4) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greened. (4) Limited in action or alkaning arrangement, show in column (g) the value of the goods, other assets, or services received. (4) Siles on (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (6) Amount microbed (7) Amount microbed (8) Amount microbed (9) Type of organization (9) Pergarants (9				1 111011 000110	31. 33 ((3)(3) 3. gam_a(10113) 37 11. 3	oution of the country to be	,,,,,,	ĺ	*		;	
(3) Other assets    Statistic   State    а	-		ation to a no	onchantable exempt organization	of							
(2) Purchases of assets to a nonchantable exempt organization (1) Sales of assets to a nonchantable exempt organization (2) Purchases of assets from a nonchantable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or emebership or fundrating solicitations (6) Performance of services or emebership or fundrating solicitations (7) Sales of college and services or emebership or fundrating solicitations (8) Loans or loan guarantees (8) Loans or loan guarantees (9) Loans or loan guarantees (1bbs) X (1bbs)	<b>.</b>		rom the reporting round		ononantable exempt organization	<b>-</b> .		];	1a(1)		X	
b Other transactions.  (1) Sales of assets to a nonchamble exempt organization  (2) Purchased of assets from a nonchamble exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (7) Shaning of facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or services given by the reporting of the above is "Fes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting fundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting fundation. If the foundation received less than fair market value in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services given to the code (other than section 501(c)(3) in a section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in section 501(c) of the Code (other than section 501(c)(3) in sec			accetc		•							
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(2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (9) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (9) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or paid employees  (10) Rental of facilities, equipment, mailing lasts, other assets, or services eventues  (10) Rental of facilities, equipment, mailing lasts, other assets, or services eventues  (10) Rental of facilities, equipment, mailing lasts, other assets, or services eventues  (10) Rental of facilities, equipment, and assets, or services eventues, and assets and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and to the best of my isometicine and statements, and	_			able exempt	organization			.	1b(1)		X	
(a) Rental of facilities, equipment, or other assets  (b) Performance of services or membership or fundraising solicitations  (c) Performance of services or membership or fundraising solicitations  (d) Performance of services or membership or fundraising solicitations  (e) Performance of services or membership or fundraising solicitations  (e) Performance of services or membership or fundraising solicitations  (e) Performance of services or membership or fundraising solicitations  (f) Sharing of Scallese, equipment, milling lists, other assets, or paid employees  (f) It is answer to any of the above is "vs." complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received.  (a) Amount involved  (b) Amount involved  (c) Name of received with or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes				•	<u> </u>		•	·				
(4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value in any transaction or sharing arrangements. Show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction of the goods, other assets, or services received.  (9) Amount involved (9) Amount involved (10) Amoun		• •			• =	•						•
(5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations  c Shaning of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchandable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  [Yes, "complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (c) Description of relationship  (c) Description of relationship  (d) Description of transfers, transactions, and sharing arrangements  (e) No bit "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (e) No bit ("Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (c) Description of relationship  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (e) No bit ("Yes," complete the following accompanying schedules and statements, and to the best of my knowledge and belief, if yellowing accompanying schedules and statements, and to the best of my knowledge and belief, yellowing accompanying schedules and statements, and to th		• •							-			
(6) Performance of services or membership or fundraising solicitations (C Shanng of facilities, equipment, miling lists, other assets, or paid employees of If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received learn arket value in any transaction or shaning arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received learn sates, are set as the fair market value in any transaction or shaning arrangements. If the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  If yes IN to if "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (f) Description of relationship  (e) Description of relationship  (f) Description of relationship  (g) Descript		• •				•	•					
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing airrangements of the value of the goods, other assets, or services received.  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (a) Name of organization (b) Type of organization (c) Description of relationship N/A  Under posentifie of penyls, I decidere that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and best of the code (other than taxpeyer or fiduciarly) is based on all information of which preparer has any knowledge  Under posentifie of officer or trustee  Oate  Preparer's signature  Oate  Preparer's dentitying specified in fide or trustee  Oate  Preparer's dentitying specified or which preparer has any knowledge  Title  Thus 34-1082617  APPLE GROWTH PARTINERS  Self-employed, address part of the preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or produce or preparer (alternative) or pr		• •	-	embership or	r fundraising solicitations	•		Г	$\neg$			
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Signature of officer or trustee  Date  Title  Preparer's identifying number (see Signature on page 30 of the instructions)  Firm's name (or yours if self-employed), address, and ZIP code  ARRON, OH 44313  Date  Oheck if self-employed  Check if self-employed  Firm's name (or yours if self-employed), address, and ZIP code  ARRON, OH 44313  Date  Oheck if self-employed  Check if self-employed  Preparer's identifying number (see Signature on page 30 of the instructions)  Date  Oheck if self-employed  APPLE GROWTH PARTNERS  EIN  34-1082617  Phone no 330-867-7350		belief, yt is to	ties of perjury, I declare that ue, correct/and complete ()	i nave examir Declaration of p	ned this return, including accompanying preparer (other than taxpayer or fiducia	; schedules and statements, ry) is based on all informatio	and to the best on n of which prepar	זנ my knowledge a rer has any knowle	na edge			
Signature of officer or trustee  Date  Title  Preparer's identifying number (see Signature on page 30 of the instructions)  Firm's name (or yours if self-employed), address, and ZIP code  ARRON, OH 44313  Date  Oheck if self-employed  Check if self-employed  Firm's name (or yours if self-employed), address, and ZIP code  ARRON, OH 44313  Date  Oheck if self-employed  Check if self-employed  Preparer's identifying number (see Signature on page 30 of the instructions)  Date  Oheck if self-employed  APPLE GROWTH PARTNERS  EIN  34-1082617  Phone no 330-867-7350	ļ	<b>k</b> (	1. MG 1		111-	15-12	יים וופחים	<b>c</b>				
Preparer's identifying number (see Signature on page 30 of the instructions)  Firm's name (or yours if self-employed), address, and ZIP code  Preparer's identifying number (see Signature on page 30 of the instructions)  APPLE GROWTH PARTNERS  EIN   34-1082617  Phone no 330-867-7350		Signatu	re of officer or trustee					<u> </u>				
Firm's name (or yours if self-employed), address, and ZIP code  APPLE GROWTH PARTNERS  1540 W MARKET ST  AKRON, OH 44313  EIN > 34-1082617  Phone no 330-867-7350	<u>-</u>	, Oignatu	——————————————————————————————————————				T	Preparer	's identif	vino		,
Firm's name (or yours if self-employed), address, and ZIP code  APPLE GROWTH PARTNERS  1540 W MARKET ST  AKRON, OH 44313  EIN > 34-1082617  Phone no 330-867-7350	Ξ∣	l . ],			O	1 - 1 /		number (	see Sig	nature o	'n	
Firm's name (or yours if self-employed), address, and ZIP code  APPLE GROWTH PARTNERS  1540 W MARKET ST  AKRON, OH 44313  EIN > 34-1082617  Phone no 330-867-7350	5	_ 유 글		12 Y	Kinganhand	~ 14/16/10	self-employed	page 30 (	II ine ins	inctions () ). C	<i>}</i>	
and ZIP code AKRON, OH 44313 Phone no 330-867-7350	Ś	Parid Parid	<del>-</del>	ADDIE	CDUMIN DYDWINDS	-\   1	<del></del>	11-000		U WX		
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## Federal Statements

703503601 The Throckmorton Foundation 61-6288548 FYE: 6/30/2010

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Charitable Purpose	\$ 384		Charitable Purpose	<b>%</b>	o		Charitable Purpose	٧٠	\$ 200
Adjusted Net	0		Adjusted Net		0	es	Adjusted Net		0
Net Investment	1,154 \$ - 1,154 \$ = -	rt I, Line 18 - Taxes	Net Investment	\$ 662	9 8	orm 990-PF, Part I, Line 23 - Other Expenses	Net Investment	\$	\w''
Total	1,538 \$ 1,538 \$	ment 2 - Form 990-PF, Part I, Line 18 - Taxes	Total	1,390 \$ 662	2,052 \$	t 3 - Form 990-PF, Part I, L	Total	<i>ۍ</i>	200
Description	ACCOUNTING FEES TOTAL	Statemen	Description	EXCISE ESTIMATES \$ FOREIGN TAXES	TOTAL \$	Statement 3 - F	Description	SHSNAG.	STATE FILING FEE TOTAL

703503601 The Throckmorton Foundation

61-6288548

**Federal Statements** 

FYE: 6/30/2010

### Statement 4 - Form 990-PF, Part II, Line 10a - US and State Government Investments

Description					
	_	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
SEE ATTACHED STATEMENT		0 101 004 4	0 100 004	~~~	<b>^</b>
	\$_	2,101,084 \$	2,136,284	COST	\$ 2,272,129
TOTAL	\$ <u></u>	2,101,084 \$	2,136,284		\$ 2,272,129
Statement 5 - Form 99	0-PF,	Part II, Line 10b - C	Corporate Sto	ck Investme	<u></u>
Description					
		Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
SEE ATTACHED STATEMENT	•	2 174 500 6	2 100 721	CO C.T.	A 2 076 400
	\$_	3,174,599 \$_	3,122,731	•	\$ 3,076,489
TOTAL	\$_	3,174,599 \$	3,122,731		\$ 3,076,489
Statement 6 -	Form	990-PF, Part II, Lir	ne 15 - Other A	\ssets	<del></del>
Description		Beginnir of Year		End of Year	Fair Market Value
RECIEVABLE FOR ATTORNEY FEE R	EIMB	\$ 7,	328 \$		\$
TOTAL		s 7.	328 \$	0	s 0

703503601 The Throckmorton Foundation

61-6288548

### **Federal Statements**

FYE: 6/30/2010

### Statement 7 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

### Description

STUDENTS MUST FIRST BE ENROLLED IN GROVE CITY COLLEGE OR OTHER COLLEGES OR UNIVERSITIES IN EASTERN OHIO OR WESTERN PENNSYLVANIA. THE COLLEGE, UNIVERSITY, OR INSTITUTION OF HIGHER EDUCATION THROUGH IT'S ORDINARY AND USUAL PROCEDURES WILL DETERMINE ECONOMIC NEED. THE COLLEGE, UNIVERSITY OR INSTITUTION OF HIGHER EDUCATION WILL PRESENT TO THE TRUSTEE AND ADVISOR A LIST OF CANDIDATES THAT MEET THE CRITERIA.

### Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

### Description

SCHOLARSHIPS ARE TO BE AWARDED TO INDIVIDUALS OF NATIVE AMERICAN OR AFRICAN AMERICAN DESCENT WHO DEMONSTRATE AN ECONOMIC NEED AND A WILLINGNESS TO COMPLETE A HIGHER EDUCATION DEGREE THAT WILL LEAD TO A GAINFUL CAREER OR A VOCATION.

ALL PAYMENTS WILL BE MADE DIRECTLY TO THE COLLEGE, UNIVERSITY, OR INSTITUTION OF HIGHER EDUCATION TO BE APPLIED AGAINST TUITION AND OTHER QUALIFIED EXPENSES. SCHOLARSHIPS ARE AWARDED ANNUALLY AND CAN BE RENEWED CONTINGENT UPON MAINTAINING THE STATUS OF A FULL TIME STUDENT IN GOOD ACADEMIC STANDING UNTIL GRADUATION. FAILURE TO MEET THE ONGOING ACADEMIC REQUIREMENTS WILL RESULT IN THE FORFIETURE OF ANY REMAINING UNDISTRIBUTED PORTION OF THE SCHOLARSHIP. THE EDUCATIONAL INSTITUTION WILL MONITOR THE ENROLLMENT AND ACADEMIC STANDING OF THE RECIPIENTS.

IF AN INSUFFICIENT NUMBER OF CANDIDATES ARE AVAILABLE AWARDS WILL BE MDE TO THE GENERAL SCHOLARSHIP FUNDS OF GROVE CITY COLLEGE OR OTHER COLLEGES LOCATED IN EASTERN OHIO OR WESTERN PENNSYLVANIA.

703503601 The Throckmorton Foundation 61-6288548 FYE: 6/30/2010

### Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Amount	3,800	L C C C C C C C C C C C C C C C C C C C	026 / T	3,000	3.500		200	4.000		000'9	000.8		2,000		000'9	000		000'9	000'9	000'6	3,000	3,000 3,000 2,500	3,000 3,000 2,500 87,264	3,000 3,000 2,500 87,264	5,000 3,000 2,500 87,264 4,000	6,000 3,000 2,500 87,264 4,000	6,000 3,000 2,500 87,264 4,000	6,000 3,000 2,500 87,264 4,000 1,265
Purpose	SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP	GTHSQX IOHSS		SCHOLARSHIP		SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP	SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP GENERAL SCHOLARSHIPS	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP GENERAL SCHOLARSHIPS SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP GENERAL SCHOLARSHIPS SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP GENERAL SCHOLARSHIPS SCHOLARSHIP SCHOLARSHIP	SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP GENERAL SCHOLARSHIPS SCHOLARSHIP SCHOLARSHIP SCHOLARSHIP
Relationship Status	UNIVERSTIY OF AKRON N/A	CLEVELAND STATE UNIV.	NONE NONE N/A	NONE N/A	UNIVERSITY OF AKRON	UNIVERSITY OF AKRON	NONE N/A	JOHN CARROLL UNIVERSITY NONE	UNIVERSITY OF AKRON	NONE N/A	KENT STATE UNIVERSITY	NOTRE DAME COLLEGE	NONE N/A	Y OF AKRON	NONE N/A	MALONE COLLEGE	NONE N/A		NONE N/A UNIVERSITY OF AKRON NONE N/A UNIVERSITY OF AKRON	NONE N/A UNIVERSITY OF AKRON N/A UNIVERSITY OF AKRON N/A	NONE N/A UNIVERSITY OF AKRON NONE N/A UNIVERSITY OF AKRON N/A KENT STATE UNIVERSITY	NONE ERSITY NONE ERSITY NONE STATE	NONE N/A UNIVERSITY OF AKRON NONE N/A NONE N/A KENT STATE UNIVERSITY NONE N/A NONE N/A	NONE ERSITY NONE ERSITY NONE STATE NONE CAMPUS	NONE ERSITY NONE ERSITY NONE STATE NONE CAMPUS NONE ERSITY	NONE ERSITY NONE ERSITY NONE STATE NONE CAMPUS NONE ERSITY NONE	NONE ERSITY NONE ERSITY NONE STATE NONE ERSITY NONE STATE STATE	NONE ERSITY NONE ERSITY NONE STATE NONE ERSITY NONE STATE NONE
Address	ALECIA SWOOPE	ARIANA JOHNSON	CLEVELAND OH	SLIPPERY ROCK PA	BARBARA CHAMBERS	AKKON OH BART LEGRAIR	AKRON OH	BRITTAINY TRIPP	CARDALE BRADFIELD	AKRON OH	CHRISTOPHER JONE	NENT ON CHETCHOPHER TRIDE	CLEVELAND OH	DARRYL WOODS	AKRON OH	DAVID LEWIS	CANTON OH	CANTON OH DORIAN MAHULAWD	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY COLLEGE	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY COLLEGE GROVE CITY PA	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY COLLEGE GROVE CITY PA JACKSON STURKEY AKRON OH	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY COLLEGE GROVE CITY PA JACKSON STURKEY AKRON OH JARETTE HOWELL	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY COLLEGE GROVE CITY PA JACKSON STURKEY AKRON OH JARETTE HOWELL KENT OH	CANTON OH DORIAN MAHULAWD AKRON OH EILEEN BOYD AKRON OH ERIN MICKEY-MONROE KENT OH GROVE CITY PA JACKSON STURKEY AKRON OH JARETTE HOWELL KENT OH JARON LEGRAIR

### **Federal Statements** 703503601 The Throckmorton Foundation

FYE: 6/30/2010 61-6288548

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	3,000	9,000	1.465		526	8,000	200	4,000	. 9	000 0	000'9	0	000'9	4,100	000		9' 100	000'9	6	8,500	7,000	U	000.0	1,500
	Purpose	SCHOLARSHIP	SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP	BOOKS	SCHOLARSHIP	athoat 10Hoo		SCHOLARSHIP	Z + 10000	SCHOLARSHIP	SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP		SCHOLARSHIP	SCHOLARSHIP	מדווסמגדטווסמ	SCHOLARSHIE	SCHOLARSHIP
Address	Relationship Status		UNIVERSITY OF AKRON NONE N/A	UNIVERSITY OF AKRON N/A NONE NONE	딘	NONE UNIVERSITY OF PITTSBURGH	NONE N/A		UNIVERSITY OF AKRON NONE N/A	UNIVERSITY OF AKRON NAME NOME	IY OF AKRON	1	Ϋ́	NONE KENT STATE UNIVERSITY	ONE	KENT STATE UNIVERSITY NONF	ľŸ	ET (	COLLEGE OF WOOSTER N/A	ľŸ	NONE KENT STATE UNIVERSITY	NONE N/A	UNIVERSITY OF AKRON	LY OF AKRON	
Name	Address	JAVAN SHAW AKRON OH	JAZZMON BRITTON AKRON OH	JERUSHA JOHNSON AKRON OH	JUSTIN HOWELL	KENT OH KAYLA COMRIE	AKRON OH KENNITRA ARNOLD		KISHA DAVIDSON AKRON OH	KRISTA HILL AKBON OH	MARCEL NWIZU	AKRON OH	MARCUS PHELPS	AKRON OH OLADELE OLABISI	KENT OH	QUINITA MCCULLARS	SHANICE WEBB	AKRON OH	SHELBI FIKAKE WOOSTER OH	SHERISE HALL	AKKON OH THOMAS WINDOM	KENT OH	TIMOTHY CARROLL	TYRONE MATHERSON	AKRON OH

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# 703503601 The Throckmorton Foundation

61-6288548 FYE: 6/30/2010

Federal Statements

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	5,000
	Purpose	SCHOLARSHIP
	Status	N/A
Address	Relationship	LAKE ERIE COLLEGE NONE
Name	Address	ROBERT HENRY CLEVELAND OH TOTAL