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## 990-PF

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0052

2009

G Che	ok all	1 1					
	CK all		um of a former public cl		change	Final return	
Use th		Name of foundation	ess change	<u>j i Name</u>	•	eyer identification number 1300847	per
lab		TOUN AND HIDTER PENACY FOR	ATD A M T ON				
Other	•	JOHN AND JUDITH KENAGY FOU			B Teleph	one number (see page 10	of the instructions)
pri or ty		Number and street (or P O box number if mail is not delivered 1051 WOODRUFF ROAD	to street address)	Room/suite			
See Sp	-					nption application is pendi	·
Instruc		ony or town, state, and an edge	07471		<b>D</b> 1. For	eign organizations, check	here
		TWODEDOWG OW	97471			eign organizations meetin	- 17
_	• •	pe of organization X Section 501(c)(3) exempt private				% test, check here and att	. , .
			Cash X Accr			ite foundation status was t n 507(b)(1)(A), check here	
			Cash X Accr	uai			_
	16) <b>▶</b>			'		oundation is in a 60-mont section 507(b)(1)(B), chec	
Par		Analysis of Revenue and Expenses (The			under	3000011 307(0)(1)(0); 01101	
Ган		total of amounts in columns (b), (c), and (d) may not necessantly equal	(a) Revenue and expenses per	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see page 11 of the instructions) )	books	inco		ıncome	purposes
	1 (	Contributions, gifts, grants, etc., received (attach schedule)		1,, ,			(cash basis only)
		Check Fig. 18 if the foundation is <b>not</b> required to attach Sch. B		· · · · · ·	· / · · · ·	• •	
		Interest on savings and temporary cash investments					
		Dividends and interest from securities	2,271		2,271	2,271	•
		Gross rents	2,211		2,211	2,2/1	<u></u>
		Net rental income or (loss)				<del></del>	
<u> </u>		Net gain or (loss) from sale of assets not on line 10	·	1 711	1 ~ 5=		<del></del>
<u>ē</u>	_	Gross sales price for all assets on line 6a	1	11	2		- <del></del>
Revenue		Capital gain net income (from Part IV, line 2)	- 1-		0		
-		Net short-term capital gain	<del>, - , - , - , - , - , - , - , - , - , -</del>			0	, .
		Income modifications	17 1 1 1 1 1 1 1	<u> </u>	· · · · · · · · · · · · · · · · · · ·		1/
		Gross sales less returns & allowances	3 - 1 - +				
ŀ		Less: Cost of goods sold	*		<del>,                                    </del>	**	
		Gross profit or (loss) (attach schedule)	-	<del></del>	, ,		
].		Other income (attach schedule)				<del></del>	2 Nr - 1
		Total. Add lines 1 through 11	2,271		2,271	2,271	
		Compensation of officers, directors, trustees, etc					
benses		Other employee salanes and wages					
Sue		Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
ω	b	Accounting fees (attach schedule) Stmt 1	1,280				
<u>8</u>	C	Other professional fees (attach schedule)					
at	17	Interest				Tay Return	Preparation nformation
ist	18	Taxes (attach schedule) (see page 14 of the right const Stint 2	104			1 ax 1 totalis	mformation
들	19	Taxes (attach schedule) (see page 14 or the national Stant 2  Depreciation (attach schedule) and depletion				Based on	HUITHALION
늉	20	Occupancy CED 0 7 2000				provided b	v Tarcpayor
_ ₹	21	Travel, conferences and meetings 0 7 2010				171011010	
Operating and Administrative Ex	22	Printing and publications					
<u> </u>	23	Other expenses (att. sch.)   OGDEN, UT					
ᄩ	24	Total operating and administrative expenses.		_			
era		Add lines 13 through 23	1,384		0		0
<u>ğ</u>	25	Contributions, gifts, grants paid	12,000		,		12,000
	26	Total expenses and disbursements. Add lines 24 and 25	13,384		0		12,000
ļ	27	Subtract line 26 from line 12				·	
ļ	а	Excess of revenue over expenses and disbursements	-11,113				<del> </del>
İ	b	Net investment income (If negative, enter -0-)			2,271		<del> </del>
	С.	Adjusted net income (if negative, enter -0-)	1	l		2,271	[]

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2009)

_	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	уеаг
	arti	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
ļ	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	143,758	132,645	132,645
- 1	3	Accounts receivable ▶		, '	
-		Less allowance for doubtful accounts ▶			
-	4	Pledges receivable ▶		•	
- 1		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			
- 1		instructions)			
- 1	7	Other notes and loans receivable (att. schedule)			· · · · · · · · · · · · · · · · · · ·
- 1	•	Less allowance for doubtful accounts ▶		`	
Ø	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ąŝ	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
ı	C	Investments—corporate bonds (attach schedule)			
ł	11	Investments—land, buildings, and equipment basis	,	, 1° - +	,
l	• •	Less accumulated depreciation (attach sch )	, ,		•
١	12	Investments—mortgage loans		-	
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis	٠,	, , -	
	''	Less accumulated depreciation (attach sch.)	, **	, '-	
	15	Other words (days to be			
	16	Other assets (describe ► )  Total assets (to be completed by all filers—see the			
	'`	instructions Also, see page 1, item I)	143,758	132,645	132,645
+	17	Accounts payable and accrued expenses	143//00	202,010	Carrie a chi co
	18	Grants payable			4 -
Liabilities	19	Deferred revenue			100
≝	20	Loans from officers, directors, trustees, and other disqualified persons			ייע אָרַ אָרָי
ab	21	Mortgages and other notes payable (attach schedule)	<del></del>	<del></del>	Tan in the second of the secon
Ξ	22	Other liabilities (describe ▶ )			Pirate to
	23	Total liabilities (add lines 17 through 22)	0	0	
_	<u></u>	Foundations that follow SFAS 117, check here ▶			J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
es		and complete lines 24 through 26 and lines 30 and 31.			,
		Unrestricted			130
an	25	Temporanily restricted	- "		1 - 1
Ba	26	Permanently restricted	<del></del>		1
Assets or Fund Balanc	<u>.</u>	Foundations that do not follow SFAS 117, check here ▶   X			1 .
יַת	•	and complete lines 27 through 31.			
ř	27	Capital stock, trust principal, or current funds	167,151	171,937	,
y,	28	Paid-in or capital surplus, or land, bldg, and equipment fund			1 .
set	29	Retained earnings, accumulated income, endowment, or other funds	-23,393	-39,292	
Ü	30	Total net assets or fund balances (see page 17 of the			1
+		instructions)	143,758	132,645	
Ą	31	Total liabilities and net assets/fund balances (see page 17		,	1, 1
		of the instructions)	143,758	132,645	,
-	Part				·
_	1 Tota	al net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with		
		-of-year figure reported on prior year's return)	÷	1	143,758
		er amount from Part I, line 27a		2	-11,113
		er increases not included in line 2 (itemize) ▶		3	,
		I lines 1, 2, and 3		4	132,645
		creases not included in line 2 (itemize)		5	,
		al net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b)	line 30	6	132,645
-		The same of the sa			Form 990-PF (2000

Part IV Capital Gains ar	nd Losses for Tax on Investme	ent Income			
(a) List and describ	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acqui (mo , day, yr	
1a N/A					
b		·			
<u>c</u>					
d					
е	<del></del>	<del></del>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	expense of sale	1	n) Gain or (loss) plus (f) minus (g)
<u>a</u>			<u> </u>		
b				<u> </u>	
С					
<u>d</u>					
e	(h) and a sold high for		100		
Complete only for assets snowing	g gain in column (h) and owned by the fou				ns (Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		Excess of col (i) er col (j), if any	1 '''	but not less than -0-) or sees (from col. (h))
a				<b> </b>	
b		<u> </u>		<u> </u>	
с					
<u>d</u>					
€				ļ	
2 Capital gain net income or (net c	apıtai loss)  If gaın, also enter ın If (loss), enter -0- ın		}	2	
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6)	_	_		
If gain, also enter in Part I, line 8	, column (c) (see pages 13 and 17 of the	instructions)	1	1 1	
If (loss), enter -0- in Part I, line 8			<u> </u>	3	
Part V Qualification U	Inder Section 4940(e) for Redu	ced Tax on N	let Investment Inco	me	
If "Yes," the foundation does not qua	tion 4942 tax on the distributable amount	te this part		es X No	
	each column for each year; see page 18	of the instructions	before making any entri	es	
(a) Base penod years Calendar year (or tax year beginnin	g in) Adjusted qualifying distributi	ons Net	(c) value of nonchantable-use as	ssets (d	(d) Distribution ratio col (b) divided by col (c))
2008	1:	2,770	147	635	0.08649
2007	1	4,400	161	344	0.08925
2006	2	0,000	186	, 303	0.10735
2005		1,200	<u>.                                 </u>		
	1	0,562	219	,129	0.04820
2 Total of line 1, column (d)				2	0.33129
3 Average distribution ratio for the	5-year base period—divide the total on li	ne 2 by 5, or by th	ne		
number of years the foundation	has been in existence if less than 5 years	•		3	0.08282
4 Enter the net value of nonchanta	able-use assets for 2009 from Part X, line	: 5		4	158,44
5 Multiply line 4 by line 3	••		21	5	13,12
6 Enter 1% of net investment inco	nme (1% of Part I, line 27h)			6	
	THE TIME CLU				
7 Add lines 5 and 6				7	13,14
8 Enter qualifying distributions fro	m Part XII, line 4 an line 7, check the box in Part VI, line 1b	and complete th	at part using a 1% tay rat	e See the	12,00
Part VI instructions on page 18		, and complete th	ar part doing a 170 tax fat		
to the second on page 10	<del></del>		<del></del>		

	cooperation and the the residence for the contract of 1200047		_	
	990-PF (2009) JOHN AND JUDITH KENAGY FOUNDATION 93-1300847  It VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)		Pa	age <b>4</b>
_		•	*,	
ıa	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			45
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
٠	Part I, line 12, col (b)			
,	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			45
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<del></del> 0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			45
6	Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009			
ь	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868)  6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			45
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
1	Enter the amount of line 10 to be: Credited to 2010 estimated tax			
P	art 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	1	Yes	No
	participate or intervene in any political campaign?	1a		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)?	1b	1	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			T
	published or distributed by the foundation in connection with the activities			İ
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	100		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	# 31 %	٠,	, ,-
	on foundation managers 🕨 \$	1.723	. 1	-
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.	1. 5.2	1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	, *.		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	↓	X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4 <u>b</u>	<u> </u>	<del> </del>
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	1.		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	.		
	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	<del> </del> -
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	X	+
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) None			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9	<b>_</b>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	j		

names and addresses

Form	990-PF (2009) JOHN AND JUDITH KENAGY FOUNDATION 93-13008	47			Pa	age <b>5</b>
_Pa	art VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	-				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		_X_
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	on?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ Te	lephone no	o <b>&gt;</b>			
	Located at	ZIP+	4 ▶			
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		15			
_Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	i		1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a				_		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	U Y₀	es 🗴 No	} _		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	-	es X No	-		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		es X No es X No es X No	· .	: -	-
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<b>Y</b> ₁	es X No	` *	- ′.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		<del></del>			l
	the benefit or use of a disqualified person)?	¥,	es X No		ĺ .	
	(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		<del>[]</del>			
L	termination of government service, if terminating within 90 days.)		es X No	1	1.	
b	, , , , , , , , , , , , , , , , , , , ,	ons	N/A	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b	<del>                                     </del>	<del>                                     </del>
С	Organizations relying on a current notice regarding disaster assistance check here  Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			'·	ļ.	,
·	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		11/21	10	<del> </del>	
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			-	1	ļ ·
а					ļ · .	1
-	6e, Part XIII) for tax year(s) beginning before 2009?	Пу	es X No	1	1;	<u> </u>
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	. ·		1 ' -		:
b				1.		1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			,','	.] ~ `	,
	all years listed, answer "No" and attach 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					
	<b>▶</b> 20 , 20 , 20 , 20			ł		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1	·	
	at any time during the year?	Y	'es 🏻 No		İ	1
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	_				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				1 .	:
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					.
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		_		1	
	foundation had excess business holdings in 2009)		N/A	3b	↓	
<b>4</b> a				4a	↓	X
b	<ul> <li>Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its</li> </ul>				1	1

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

Form 990-PF (2009)

.*. mn	990-PF (2009) JOHN AND JUDITH KENAGY FOUNDATIO	N 93-1	300847			Pa	age 6
_	rt VII-B Statements Regarding Activities for Which Form 47			ued)	_		ige <b>o</b>
	During the year did the foundation pay or incur any amount to	zo may be ite	quirou (contin	T	-		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945)	5(e))2	☐ Y	es X No	ŀ		
	(2) Influence the outcome of any specific public election (see section 4955), or to ca		·		ļ		
	directly or indirectly, any voter registration drive?	arry orr,	□ •	es X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			es X No	l		
	(4) Provide a grant to an individual for traver, study, or other similar purposes?	cahed in	۰۰ لــا	110		l	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instruct		Пу	es X No	1	1	
	(5) Provide for any purpose other than religious, chantable, scientific, literary, or ed	•	Ш "	es [140			
	purposes, or for the prevention of cruelty to children or animals?	ucational	$\sqcap_{\mathbf{v}}$	es X No	l		
h	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the	e excentions descr		es <u>-1</u> 110	1	}	
	Regulations section 53 4945 or in a current notice regarding disaster assistance (se			N/A	5b	1	٠
	Organizations relying on a current notice regarding disaster assistance (see	c page 22 of the in	sudctions).	<b>▶</b> □ ' ' '		$\neg$	
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the	ha tav			- 1	. [	
٠	because it maintained expenditure responsibility for the grant?	ine tax	N/A ∏ Y	es No	, i	1	
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)		/ 🗀 '	65 [ 10		,	
Sa S	Did the foundation, during the year, receive any funds, directly or indirectly, to pay p	remume					
Ja	on a personal benefit contract?	i emilimis	$\Box$	es X No	,		
h	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	al banafit contract		63 21 110	6b		x
D	If "Yes" to 6b, file Form 8870	iai beneni contracti		Ī	- 00		-
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelte	er transaction?	П	es X No	, .		}
b			L' '	N/A	7b		-
	art VIII Information About Officers, Directors, Trustees, Fou		gers Highly P				ш
	and Contractors	maaton mana	golo, inginy i	aid Employed	,,		
1 1		on (see page 22 of	f the instructions	<u> </u>		—·—	
1 l	List all officers, directors, trustees, foundation managers and their compensati						
1 l		on (see page 22 or (b) Title, and average hours per week	f the instructions (c) Compensation (lf not paid, enter	(d) Contributions to employee benefit		opense a	
1 L	List all officers, directors, trustees, foundation managers and their compensati	(b) Title, and average	(c) Compensation	(d) Contributions to		opense a	
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
1 L	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred			
	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A	(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			
N/	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address	(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			
N/	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A   Compensation of five highest-paid employees (other than those included on	(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  ons).	oth	er allowa	inces
N/	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A   Compensation of five highest-paid employees (other than those included on	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).	(e) E	er allowa	account,
N/	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A   Compensation of five highest-paid employees (other than those included on If none, enter "NONE."	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A   Compensation of five highest-paid employees (other than those included on If none, enter "NONE."	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,
2	List all officers, directors, trustees, foundation managers and their compensati  (a) Name and address  /A  Compensation of five highest-paid employees (other than those included on If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  line 1—see page 2  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation  ons).  (d) Contributions to employee benefit plans and deferred	(e) E	er allowa	account,

Form **990-PF** (2009)

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

om 990-PF (2009) JOHN AND JUDITH KENAGY FOUNDATION	93-1300847	Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundation	Managers, Highly Paid Empl	oyees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see page 23 of the	<del></del>	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<del></del>
	1	
Fatal number of other measures over CEO 000 for professional continue		
Total number of others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information organizations and other beneficianes served, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 N/A		<del></del>
·	•	
	<u> </u>	
2		1
3		
	-	
•		
4		
Part IX-B Summary of Program-Related Investments (see page 24 o		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 1 N/A	2	Amount
1 41/44		
	·	
2		<del> </del>
All other program-related investments See page 24 of the instructions		
	-	

Total. Add lines 1 through 3

а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	12,000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	12,000
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,000

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2009)

ra	π XIII Undistributed Income (s	see page 26 of th	ne instructions)	· · · · · · · · · · · · · · · · · · ·		<del></del>
1	Distributable amount for 2009 from Part XI,		(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
	line 7			- 1	, .	7,877
2	Undistributed income, if any, as of the end of	f 2009.			, .	
а	Enter amount for 2008 only	L		<u> </u>		
b	Total for pnor years 20, 20	, 20				
3	Excess distributions carryover, if any, to 2009	9				<del>,</del>
а	From 2004					
b	From 2005	1,771				
C	From 2006	10,685				
d	From 2007	6,333				
e	From 2008	5,448		. *		
f	Total of lines 3a through e		24,237			
4	Qualifying distributions for 2009 from Part XI	II,				
	line 4: ▶ \$12,000			- `	1	•
	Applied to 2008, but not more than line 2a	Ļ				-
b	Applied to undistributed income of prior year	s			· ,	, ,
	(Election required—see page 26 of the instru				1	,
C	Treated as distributions out of corpus (Election	ion		• •	4 4 1 1 1	,
	required—see page 26 of the instructions)	1			e e e e e e e e e e e e e e e e e e e	
d	Applied to 2009 distributable amount		<u> </u>		7/2	7,877
е	Remaining amount distributed out of corpus	<u> </u>	4,123	31927	* 1 *** *** * * * * * * * * * * * * * *	
5	Excess distributions carryover applied to 200	09 [		<u>,                                    </u>		
	(If an amount appears in column (d), the san	me	- ,	,		,
	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 lin	ne 5	28,360		1	h-
þ	Prior years' undistributed income. Subtract			1	777	, ,
	line 4b from line 2b					
С	Enter the amount of prior years' undistribute	d			market in the	
	income for which a notice of deficiency has			1	1 1	·
	been issued, or on which the section 4942(a	3)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable	į	,			•
	amount—see page 27 of the instructions				1 1	
e	Undistributed income for 2008 Subtract line					. '
	4a from line 2a Taxable amount—see page	•	•			
	27 of the instructions				<u> </u>	
f	Undistributed income for 2009 Subtract line	es				
	4d and 5 from line 1 This amount must be			~		
	distributed in 2010		· · · · · · · · · · · · · · · · · · ·			0
7	Amounts treated as distributions out of corp	ous			, ,	
	to satisfy requirements imposed by section				<b>'</b> - '	1
	170(b)(1)(F) or 4942(g)(3) (see page 27 of t instructions)	the				
8	Excess distributions carryover from 2004 no			1	,	
•	applied on line 5 or line 7 (see page 27 of th					
		ie				İ
Δ	instructions)			<del>                                     </del>	<del>                                     </del>	<del> </del>
9	Excess distributions carryover to 2010.  Subtract lines 7 and 8 from line 6a		20.25			1
10			28,36	<u> </u>		<del></del>
10	Analysis of line 9:	4 774				
a	Excess from 2005 Excess from 2006	1,771			1	
b	Excess from 2006  Excess from 2007	10,685				
c d	Excess from 2008	6,333	1			
e e	Excess from 2009	5,448 4,123				
	EXOCOS 110111 2003	4,123	I	1	1	ı

	t XIV Private Operating Fou				VII-A, question 9)				
	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•	ıy ▶					
	Check box to indicate whether the foundat	•	ŭ	ed in section	1942(J)(3) or 4942	2(J)(5)			
	Enter the lesser of the adjusted net	Tax year	The real description description	Prior 3 years	1042(1)(0) 01 1 1 40 12				
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total			
	investment return from Part X for								
	each year listed								
b	85% of line 2a								
С	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			ļ	<u> </u>				
е	Qualifying distributions made directly				1	1			
	for active conduct of exempt activities	İ							
	Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the	1							
	afternative test relied upon					1			
а	"Assets" alternative test—enter			1					
	(1) Value of all assets								
	(2) Value of assets qualifying under								
ь	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3	<del></del>	<del> </del>	<del> </del>	<del></del>				
U	of minimum investment return shown in								
	Part X, line 6 for each year listed								
С	"Support" alternative test—enter			<del></del>	<del>- </del>	<u> </u>			
	(1) Total support other than gross								
	investment income (interest,								
	dividends, rents, payments on								
	secunties loans (section					ì			
	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	1 (0 1 (			105000	1			
Pa	art XV Supplementary Infor	•	•		ad \$5,000 or more	in assets at			
_	any time during the		of the instructi	ons.)		<del></del>			
1	Information Regarding Foundation Ma List any managers of the foundation who	•	e than 2% of the total	contributions recovered b	ov the foundation				
а	before the close of any tax year (but only				=				
	N/A	in they have continue	ed more than \$5,000;	(366 Section 307(d)(2)	,				
b	List any managers of the foundation who	own 10% or more of	the stock of a corporate	on (or an equally large	portion of the				
-	ownership of a partnership or other entity				<b>PO</b> . 11011 01 1110				
	N/A	•	<b>3</b>						
2	Information Regarding Contribution,	Grant, Gift, Loan, Sci	holarship, etc., Progr	ams:					
	Check here ▶ ☐ If the foundation on	ly makes contributions	to preselected charita	ble organizations and d	loes not accept				
	unsolicited requests for funds. If the four	unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or							
	organizations under other conditions, co	mplete items 2a, b, c,	and d						
а	The name, address, and telephone num	ber of the person to w	hom applications shou	ld be addressed					
	N/A								
_			<del></del>	· · · · · · · · · · · · · · · · · · ·					
	The form in which applications should be N/A	e submitted and inform	nation and materials the	ey should include		==			
С	Any submission deadlines N/A								
d	Any restrictions or limitations on awards	, such as by geograph	ical areas, charitable fi	ields, kınds of ınstitutior	ns, or other factors				
_	N/A								
						Form 990-PF (2)			

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of recipient Amount any foundation manager contribution Name and address (home or business) or substantial contributor a Paid during the year SAMARITIANS PURSE 1,000 CAMPUS CRUSADE FOR CHRIST 2,500 REDEEMERS FELLOWSHIP 5,300 BRIDGE BUILDERS 500 YOUNG LIFE 1,200 ROSEBURG RESCUE MISSION 1,500 Total ▶ 3a 12,000 b Approved for future payment N/A Total ▶ 3b

Part XVI-À **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) Related or exempt (c) (a) (b) (d) function income Exclusion code Business code Amount Amount (See page 28 of the instructions) 1 Program service revenue g Fees and contracts from government agencies 2 Membership dues and assessments Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a \_\_\_\_\_ 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28 to verify calculations ) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the instructions) N/A

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	<u> </u>	=xempt Organizat	ions							<del></del>		
1	Did the organ	nization directly or indire	ctly engage ıı	n any of the follow	ing with any othe	r organ	ızatıon desc	nbed			Yes	No
	in section 50	1(c) of the Code (other t	than section 5	501(c)(3) organiza	tions) or in section	on 527,	relating to p	olitical				
	organizations	,7									İ	
а	-	m the reporting foundati	on to a nonc	hantable exempt o	organization of						j	
	(1) Cash									1a(1)		X
	(2) Other as	sets								1a(2)		X
ь	Other transa										~	
_		assets to a nonchantab	le exempt or	ganization						1b(1)		X
	. ,	es of assets from a non-	•	•						1b(2)		X
		f facilities, equipment, o						•		1b(3)		X
	` '	sement arrangements		•						1b(4)		X
	` '	r loan guarantees								1b(5)		X
		ance of services or men	nhorehin or fi	indraising solicitat	ione					1b(6)		X
_		calities, equipment, mail	•	-						1c		X
		r to any of the above is '	_			(h) sho	wild alwaye (	show the fair marke		_10_		
u		goods, other assets, or										
		transaction or shanng a	-									
_	a) Line no	(b) Amount involved		of nonchantable exem				n of transfers, transact		shanno arrange	ments	
1/	<del></del>	(3)/	(0)				(0) 0000					
.,	·•							. – -				
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						<del>                                     </del>		<del></del>				
						├						
_	1 11- 1- 1					<u> </u>						
28		ation directly or indirect				•	organizations	5			ਵਿ	<b>7</b>
		n section 501(c) of the C	•	ian section 501(c)	(3)) or in section	5277				Ш 4	es 🛚	r] NO
		nplete the following sch	equie	(h) Turn of		<del></del>		(a) December 2	f colotions			
	N/A	Name of organization	<i></i>	(b) Type of	organization	<del> </del>		(c) Description of	relations	пір		
	N/A		-			<del> </del>						
						┪						
				<del></del>		+		<del> </del>				
				<del></del>		<del> </del>		<del></del>				
	<del> t</del>	<i>A</i>				<del></del>		<del></del>		<del></del>		
	Under penalti belief, it is the	ies of pegury, I declare that ie, correct, and complete D	: I have examine Declaration of pr	ed this return, including eparer (other than ta	ng accompanying s xpaver or fiduciary)	chedules is based	and statemer	nts, and to the best of r	ny knowled ∙has anv k	dge and nowledge		
		THATMEN	14		VQ.	22/15	<b>)</b>					
_	<b>X</b>	of officer or to obse	<del>"X</del> -)	<del></del>	10/4	<u>۲۷/۲۵</u>	<u>)</u>	PRESID	ENT			
ere	y signatur	re of officer or trustee		<b></b>	Date			Title		Preparer's ident		
Ĭ		, (C)	۸ ۸			ا ي	Date	Check if	_	number (see Si		e on
Sign Here	ا چے آ	Preparer's signature	MMI					self-employed	d ▶ 🔲	page 30 of the I		
Ś	Paid Preparer's Use Only	nignature 🔻 🔾	1000	<del></del>			<u> </u>	L				
	g 5 8   t	Firm's name (or yours if		Service							<b></b> -	
		self-employed), address,		30x 419					EIN ▶	84-138		
		and ZIP code	Glend	live, MT	59330				Phone no			
										Form 9	90-PI	F (2009)

1-2

Page 1	Charitable	S		Charitable Purpose	vs	O
	ing Fees	Net	68	Adjusted Net	<b></b>	8
rion Federal Statements	orm 990-PF, Part I, Line 16b - Accounting Fees	Investment	PF, Part I, Line 18 - Tax	Net Investment	٠,	s 0
	Statement 1 - Form 990-PF, Pa	Total \$ 1,280 \$ \$ 1,280	Statement 2 - Form 990-PF, Part I, Line 18 - Taxes	Total	\$ 24 50 30	\$ 104
931300847 JOHN AND JUDITH KENAGY FOUNDA 93-1300847 FYE: 6/30/2010	State	Description Indirect Accounting Fees Total		Description	OREGON DEPT OF JUSTICE OREGON SECRETARY OF STATE OTHER	Total