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Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

| F | or ca | lendar | year 2009, o | r tax year beginning | | 12/ | ^{/01} , 2009 | , and end | ling | | | 11/30, 2010 |
|---|---|---------------|---|---|-------------------|--------------------|-----------------------|-----------------|----------|----------------------|---------------|--|
| G | Che | rck all t | hat apply | Initial return | Init | ial return | of a former p | ublic cha | rıty | | | Final return |
| _ | | | | Amended return | | Addres | ss change | | ! | Name cha | ange | |
| | | | Name of foun | dation | | | | | | A Employ | yer identifi | cation number |
| - 1 | | he IRS | | | | | _ | | | | 7.0 | 1.40.6000 |
| | | oel. | | UMMINS FAMILY I | | _ | | I = - | | | /3- | -1486208 |
| | | rwise, int | Number and | street (or P O box number i | mail is not deliv | ered to street | t address) | Room/s | uite | B Telephon | e number (se | e page 10 of the instructions) |
| | • | ype. | 1420 17 0 | прошит | | | | | | | , | 000 000 |
| | | pecific | 1420 W C | | | | | l | | 0 " | ption applica | 30) 233-6000 |
| ı | nstru | ctions. | City or town, | state, and ZIP code | | | | | | pending | , check here | attori is |
| | | | ENID, OK | 73703 | | | | | | 1 | | tions, check here |
| _ | Cha | ale Arme | | on X Section 501 | a)(2) avamm | | ioundation | | | | | itions meeting the nere and attach |
| n [| | | | exempt charitable trust | | | ivate founda | tion | | comp | outation . | |
| 1 | | | t value of all a | | unting meth | | | rual | | | | n status was terminated |
| • | | | m Part II, col. | , m | ther (specify | | ۱۳۰۰ <u> </u> | n dai | | | | o)(1)(A), check here |
| | | ▶ \$ | | | | | cash basis) | | | - | | in a 60-month termination (1)(B), check here |
| 1 | art | Analy | sis of Reven | ue and Expenses (The | (a) Davis | | | | | | | (d) Disbursements |
| | | | | lumns (b), (c), and (d) equal the amounts in | (a) Reven | | (b) Net inve | | 1 | c) Adjuste) incom | | for charitable purposes |
| | | | | 11 of the instructions)) | bool | เร | 1110011 | | ļ | | | (cash basis only) |
| | 1 | Contribut | ion <u>s, gift</u> s, grants, ei | tc , received (attach schedule) . | | | | | | | | |
| | 2 | Check } | If the fo attach S | undation is not required to ch B | | | | | | | | |
| | 3 | | - | emporary cash investments | | 16 720 | | 6 720 | | | | 7 - 0 - 1 |
| | 4 | Divider | ids and interes | t from secunties | | 16,739. | 1 | 6,739. | | | | ATCH 1 |
| | I | | | | | | | | | | | |
| | I | | | 5) | | -866. | | | - | | | |
| J. | 6a b | | n or (loss) from sa ales price for all | ale of assets not on line 10 $17,533$. | | - 000. | | | | | | |
| Revenue | , | | n line 6a | ne (from Part IV, line 2) | | | | | | , | | |
| å | 7 8 | • | • | gain | | | | | | ···· | | |
| | 9 | | • | | | | | | | | | |
| | 10 a | Gross sa | les less returns wances | | | | | | | | | |
| | b | | est of goods sold | ł . | | | | | | | | |
| II 07 | C | Gross | profit or (loss) (| attach schedule) | | | | | | | | |
| | 11 | Other I | ncome (attach | schedule) | | 173. | | 6 730 | ļ | | | ATCH 2 |
| ල _ | 12 | | | ough 11 | | 16,046. 12,000. | <u></u> | 6 , 739. | | | | 1 200 |
| 9 | | | | , directors, trustees, etc | - | 12,000 | | | | | | 1,200 |
| £ Σg | 14 | | | es and wages | | | | | <u> </u> | | | |
| ≥su | 15 | | n plans, employ ees (attach sch | yee benefits | | | | | | | <u> </u> | |
| אַ בַּ | 10a | | | ch schedule) ATCH 3 | | 1,725. | | 0. | | | 0. | 173 |
| э Ш | ֡֟֟֟֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | | | es (attach schedule) | | | ~ | | | | | |
| ati | 17 | - | | | | | | RE | ~ | | | |
| リンドライン istrative Expen | 18 | | | see page 14 of the instructions) | | | | | OE. | IVED | 7 | |
| , <u>ië</u> | 19 | | | schedule) and depletion | | | 83 | 1 . | | | _ 1 | |
| ۱d | 20 | Occupa | ancy | | | | 8 | MAR | 14 | 2011 | | |
| þ | 21 | Travel, | conferences, a | nd meetings | | | | | | | | |
| a a | 22 | Printing | g and publication | ons | | C 4 | | OGD | EΛ | 1 117 | اعق لـ | |
| ij | 23 | | | h schedule) ATCH 4. | | 64. | | | | , 01 | | |
| MAK Operating and Administrative Expenses | 24 | | | idministrative expenses. | | 13,789. | | 0. | | | 0. | 1,373 |
| ď | | | - | 23 | | 2,100. | | | | | 0. | 2,100 |
| | 25 | | • • | rants paid | | 15,889. | | 0. | | | 0. | 3,473 |
| _ | 26 27 | | enses and disburse ct line 26 from | ments Add lines 24 and 25 | | , | | • | | | · | 3,11 |
| | l | | | nses and disbursements | | 157. | | | | | | |
| | l . | | | ne (if negative, enter -0-) | | | 1 | 6,739. | | | · · · · | <u> </u> |
| | ı | | | (if negative, enter -0-) | | | | | | | -0- | |

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| Part | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End of | 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 | 23,460. | 21,125. | 21,125 | | |
| 3 | Savings and temporary cash investments | | | | | |
| | Less allowance for doubtful accounts ▶ | | 6,652. | 6,652 | | |
| 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) | | | | | |
| 7 | Other notes and loans receivable (attach schedule) | | | | | |
| ' | Less allowance for doubtful accounts | | | | | |
| ١. | | | | | | |
| 8 8 | Inventories for sale or use | | | | | |
| Assets 6 a | Prepaid expenses and deferred charges | | | | | |
| - | a Investments - U.S. and state government obligations (attach schedule) | 627,597. | 665,480. | 665,480 | | |
| | b Investments - corporate stock (attach schedule) $ATCH$ $.5$. | | 003,400. | | | |
| 11 | Investments - corporate bonds (attach schedule) | | | | | |
| 4.2 | (attach schedule) | | | | | |
| 12 | Investments - mortgage loans | | | | | |
| 14 | Investments - other (attach schedule) Land, buildings, and equipment basis Less' accumulated depreciation | | | | | |
| | equipment basis Less accumulated depreciation (attach schedule) | | | | | |
| 15 | Other assets (describe | | | | | |
| 16 | Total assets (to be completed by all filers - see the | 651 057 | 693,257. | 602 257 | | |
| - | instructions Also, see page 1, item I) | 031,037. | 093,237. | 693,257 | | |
| 17 | Accounts payable and accrued expenses | | | | | |
| 18 | Grants payable | | | | | |
| <u>හි</u> 19 | Deferred revenue | | | | | |
| ≝ 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | |
| 19 20 21 21 21 21 21 21 21 21 21 21 21 21 21 | Mortgages and other notes payable (attach schedule) | | | | | |
| 22 | Other habilities (describe | | | | | |
| 1 | | | | | | |
| 23 | Total liabilities (add lines 17 through 22) | | | | | |
| - | Foundations that follow SFAS 117, check here $\blacktriangleright X$ | | | | | |
| | and complete lines 24 through 26 and lines 30 and 31. | | | | | |
| 8 24 | Unrestricted | 651,057. | 693,257. | | | |
| E 25 | Temporarily restricted | | | | | |
| 8 26 | Permanently restricted | | | | | |
| 힏 | Foundations that do not follow SFAS 117, | | | | | |
| 교 | check here and complete lines 27 through 31. ▶ | | · | | | |
| o 27 | Capital stock, trust principal, or current funds | | | | | |
| <u>ي</u> 28 | and complete lines 24 through 26 and lines 30 and 31. Unrestricted | | | | | |
| S 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | |
| ۲ 30 | Total net assets or fund balances (see page 17 of the | | | | | |
| e e | ınstructions) | 651,057. | 693,257. | | | |
| 31 | Total liabilities and net assets/fund balances (see page 17 | | | | | |
| | of the instructions) | 651,057. | 693,257. | | | |
| Part | Analysis of Changes in Net Assets or Fund E | | | | | |
| | al net assets or fund balances at beginning of year - Part II, | | agree with | | | |
| | l-of-year figure reported on prior year's return) | | | 651,057 | | |
| | | | | 157 | | |
| . □III | er amount from Part I, line 27a | МЕМТ 6 | 2 | 42,043 | | |
| | 11 4 0 10 | | | 693,257 | | |
| | I lines 1, 2, and 3 | | | 055,257. | | |
| | creases not included in line 2 (itemize) | | 5 | 693,257 | | |
| o iot | al net assets or fund balances at end of year (line 4 minus li | <u>не э) - нап II, column (b),</u> | line 30 6 | 0,0,601. | | |

Part IV

| * * | (e g , real estate,) shs MLC Co) | (b) How acquired P-Purchase D-Donation | (c) Date acquired (mo, day, yr) | (d) Date sold (mo , day, yr) | | |
|---|---|--|--|--|-------------|--|
| 1a SEE PART IV SCHI | EDULE | | | | | |
| b | | | | | | |
| _c | | | | | | |
| | | | | | | |
| е | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) | | | |
| a | | | | | | |
| _ b | | <u> </u> | | | | |
| _c | | | | | | |
| d | | | | | · | |
| e | | <u> </u> | | | | |
| Complete only for assets s | showing gain in column (h) and ow | ned by the foundation on 12/31/69 | (1) | Gains (Col (h) g | aın mınus | |
| (i) F M V as of 12/31/69 | (k) Excess of col (ı) over col (j), ıf any | col | (k), but not less t Losses (from co | | | |
| _a | | | | | | |
| b | | | | | ** | |
| <u>c</u> | | | | | | |
| <u>d</u> | | | | | | |
| <u>e</u> | | | | | | |
| 2 Capital gain net income of | | f gaın, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7 | 2 | | -866. | |
| | n or (loss) as defined in sections 1 | | | | | |
| | l, line 8, column (c) (see pages 13 | | | | | |
| If (loss), enter -0- in Part I, | line 8 | <u>,</u> , | 3 | | | |
| | | luced Tax on Net Investment Inc ne section 4940(a) tax on net investi | | | | |
| | | butable amount of any year in the b Do not complete this part | ase perio | d? 🗀 | Yes X No | |
| | | r, see page 18 of the instructions be | efore mak | ing any entries | | |
| (a) | (b) | (c) | | (d) | 4 | |
| Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of nonchantable-use assets | | Distribution ra (col (b) divided by | | |
| 2008 | 30,754. | 576,867. | | | 0.053312 | |
| 2007 | 36,316. | 770,915. | | | 0.047108 | |
| 2006 | 47,032. | 855,039. | | | 0.055006 | |
| 2005 | 31,266. | 597,462. | | | 0.052331 | |
| 2004 | 22,864. | 453,063. | | | 0.050465 | |
| 2 Total of line 1, column (d | · · · · · · · · · · · · · · · · · · · | | 2 | | 0.258222 | |
| - | | e the total on line 2 by 5, or by the st than 5 years | 3 | | 0.051644 | |
| 4 Enter the net value of nor | ncharitable-use assets for 2009 fro | om Part X, line 5 | 4 | | 646,509. | |
| 5 Multiply line 4 by line 3 | 5 | 5 33,388. | | | | |
| 6 Enter 1% of net investme | 6 | | 167. | | | |
| 7 Add lines 5 and 6 | | | 7 | 7 33,555. | | |
| 8 Enter qualifying distribution If line 8 is equal to or gr | ons from Part XII, line 4 | in Part VI, line 1b, and complete t | 8 hat part | using a 1% tax | 3,473. | |
| Part VI instructions on pag | ge 18 | | | | | |

Capital Gains and Losses for Tax on Investment Income

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of ti | ie ins | tructio | ons) | | | |
|-----|--|--------|---------|---------------|--|--|--|
| 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 ruling letter if necessary - see instructions) | | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 3 | 35. | | | |
| | 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 Part I, line 12, col (b) | | | | | | |
| 2 | | | | | | | |
| 3 | Add lines 1 and 2 | | | 35. | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 | | | 0. | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | | 35. | | | |
| 6 | Credits/Payments | | | | | | |
| а | 2009 estimated tax payments and 2008 overpayment credited to 2009 6a | | | | | | |
| b | Exempt foreign organizations-tax withheld at source 6b 0. | | | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c 6c | | | | | | |
| d | Backup withholding erroneously withheld | | | _ | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0. | | | |
| 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 | | 3 | 35. | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | | | | |
| 11 | Enter the amount of line 10 to be. Credited to 2010 estimated tax ▶ 0 - Refunded ▶ 11 | | | | | | |
| Par | t 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 | | Yes | No | | | |
| | participate or intervene in any political campaign? | 1 a | | 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 | | <u>X</u> | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | | |
| | published or distributed by the foundation in connection with the activities | | | | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1 c | | <u> X</u> | | | |
| d | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | | | | |
| | (1) On the foundation \$\bigs\\$ (2) On foundation managers \$\bigs\\$ | | | | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | | | | |
| | on foundation managers. > \$ | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X | | | |
| | If "Yes," attach a detailed description of the activities | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | 3.7 | | | |
| | 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 | | Х | | | |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b_ | | X | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | | | | |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | | | |
| | By language in the governing instrument, or | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | Х | | | | |
| | conflict with the state law remain in the governing instrument? | 6 | 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 | Α | | | | |
| | Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \triangleright OK, | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | ., | | | | |
| | (or designate) of each state as required by General Instruction G^2 If "No," attach explanation | 8b | Х | | | | |
| 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 | | | 1,7 | | | |
| | 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 | | | v | | | |
| | names and addresses | 10 | | X | | | |

Χ

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?

(b) Title, and average

hours per week devoted to position (c) Compensation

| | | | | <u> </u> | | | |
|---|----|---|---|----------|----|-------|---|
| F | on | m | 9 | 90- | PF | (2009 |) |

(e) Expense account,

other allowances

If none, enter "NONE."

NONE

(a) Name and address of each employee paid more than \$50,000

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

(d) Contributions to

employee benefit plans and deferred

compensation

| Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE | enter "NONE." (c) Compensation |
|--|-----------------------------------|
| | (c) Compensation |
| NONE | |
| NONE | |
| | |
| | |
| | |
| | |
| | |
| otal number of others receiving over \$50,000 for professional services | ▶ NONE |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| 1 NONE | |
| | |
| | |
| 2 | |
| | |
| 2 | |
| ³ | |
| | |
| 4 | |
| | |
| | |
| Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 _NONE | |
| | |
| 2 | |
| * | |
| | |
| All other program-related investments See page 24 of the instructions | |
| 3 NONE | |
| | |
| Table Add to a distance of the control of the contr | |
| otal. Add lines 1 through 3 | Form 990-PF (200 |

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.) | gn foundatio | ns, |
|-----|---|----------------|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purpose's: | | |
| а | Average monthly fair market value of securities | 1a | 644,023. |
| b | Average of monthly cash balances | 1b | 12,331. |
| С | Fair market value of all other assets (see page 24 of the instructions) | 1c | 0. |
| d | | 1d | 656,354. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 656,354. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 | | |
| | of the instructions) | 4 | 9,845. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 646,509. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 32,325. |
| Pa | Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this private the private of the instructions of the instructions (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ and do not complete this private of the instructions (Section 4942(j)(3)) and (j)(5) privations (Section 4942(j)(3)) and (j)(5) and (Section 4942(j)(3)) and (j)(5) and (j)(5) and (j)(5) and (j)(5) and (j)(5) and | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 32,325. |
| 2 a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009 (This does not include the tax from Part VI) 2b | | |
| C | Add lines 2a and 2b | 2c | 335. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 31,990. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | | 5 | 31,990. |
| 6 | Deduction from distributable amount (see page 25 of the instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 31,990. |
| Pa | Qualifying Distributions (see page 25 of the instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 3,473. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | 0. |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | 0. |
| b | Cash distribution test (attach the required schedule) | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 3,473. |
| 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 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 3,473. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years. | hether the fou | ındatıon |

Form 990-PF (2009)

| 9 ب | rt XIII Undistributed Income (see page | 26 of the instruction | 15) | | |
|-----|--|-----------------------|----------------------------|-------------|---------------------|
| 1 | Distributable amount for 2009 from Part XI, | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
| | line 7 | <u> </u> | | | 31,990. |
| 2 | Undistributed income, if any, as of the end of 2009 | | | | |
| | Enter amount for 2008 only | | | | |
| b | - 07 06 06 1 | -,, | | | |
| 3 | Excess distributions carryover, if any, to 2009 | | | | |
| - | From 2004 520. | • | į | | |
| h | From 2005 1,939. | | | | |
| | From 2006 6,846. | | | | |
| 4 | From 2007 | | 1 | | |
| | From 2008 3,732. | | | | |
| f | | 13,037. | | | |
| 4 | Total of lines 3a through e | | | | |
| 7 | line 4. ► \$3, 473. | | Ì | | |
| а | Applied to 2008, but not more than line 2a | | | | |
| | | | | | |
| D | Applied to undistributed income of prior years (Election required - see page 26 of the instructions) | | | | |
| _ | | | | | |
| C | Treated as distributions out of corpus (Election required - see page 26 of the instructions) | | | | |
| d | Applied to 2009 distributable amount | | | | 3,473. |
| | Remaining amount distributed out of corpus | 0. | | | |
| 5 | Excess distributions carryover applied to 2009 | 13,037. | | | 13,037. |
| | (If an amount appears in column (d), the same | | | | |
| 6 | amount must be shown in column (a)) | | } | | |
| U | Enter the net total of each column as indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | - | | | |
| C | Enter the amount of prior years' undistributed | | | 1 | |
| | income for which a notice of deficiency has been | | İ | | |
| | issued, or on which the section 4942(a) tax has been previously assessed | i | | | |
| ď | Subtract line 6c from line 6b Taxable | | | | |
| ч | amount - see page 27 of the instructions | | | | |
| e | Undistributed income for 2008 Subtract line | | | | |
| | 4a from line 2a Taxable amount - see page 27 of the instructions | | | | |
| | | | | | |
| f | Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2010 | | | | 15,480. |
| 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 | |] | | J |
| | instructions) | | | | |
| 8 | Excess distributions carryover from 2004 not | | | | |
| | applied on line 5 or line 7 (see page 27 of the instructions) | | | | |
| 9 | Excess distributions carryover to 2010. | | | | |
| | Subtract lines 7 and 8 from line 6a | | | | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2005 | | | | |
| | Excess from 2006 | | | | } |
| | Excess from 2007 | | | | |
| þ | Excess from 2008 | | | | |
| e | Excess from 2009 | | | | 5- 000 BE (0000) |

Form **990-PF** (2009)

| Forn | n 990-PF (2009) | | | 73-1 | 486208 | | | Page 10 |
|------|--|----------------------------|-----------------------------|---|-----------------------------------|------------------------|-------------|---------------|
| Pa | rt XIV Private Oper | ating Foundations (| see page 27 of the | instructions and Pa | rt VII-A, que | stion 9) | NOT A | APPLICABLE |
| 1 a | If the foundation has | received a ruling or d | etermination letter tha | t it is a private oper | ating | | | |
| | foundation, and the ruling | g is effective for 2009, e | nter the date of the ruling | | . ▶ | | | |
| b | Check box to indicate wh | ether the foundation is a | private operating found | lation described in section | <u> </u> | 4942(j |)(3) or | 4942(j)(5) |
| 2 a | Enter the lesser of the ad- | Tax year | | Prior 3 years | | |] , | e) Total |
| 24 | justed net income from Part | (a) 2009 | (b) 2008 | (c) 2007 | (d) 20 | 06 | ,, | |
| | or the minimum 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 | | | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon | | | | | | | |
| а | "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying | | | | | | | · |
| b | under section 4942(j)(3)(B)(i) "Endowment" alternative test- | | | | <u> </u> | | | |
| | enter 2/3 of minimum invest- ment return shown in Part X, line 6 for each year listed | | | | | | | |
| С | "Support" alternative test - enter | | | | | | | |
| | (1) Total support other than gross investment income (interest, dividends, rents, | | | | | | | |
| | payments on 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)(m) (3) Largest amount of support from an exempt | | <u> </u> | | , | | | |
| | organization | | | | | | | |
| Do | (4) Gross investment income . Int XV Supplement | ary Information (C | omplete this part | only if the found | lation had | 15 000 | or mor | a in assats |
| Га | | during the year - se | 00 (4) | 4 - 4 . | ation nau | ,5,000 | 01 11101 | t III assets |
| 1 | Information Regarding | g Foundation Manage | rs: | · · · · · · · · · · · · · · · · · · · | | | | |
| a | List any managers of before the close of any | the foundation who h | ave contributed mor | e than 2% of the tota more than \$5,000). (S | al contribution See section 50 | ns receiv 17(d)(2)) | ed by the | e foundation |
| | NONE | | | | | | | |
| b | List any managers of ownership of a partner | | | | | n equally | large po | ortion of the |
| | NONE | | | | | | | |
| 2 | Information Regarding | g Contribution, Grant | , Gift, Loan, Scholarsl | nip, etc., Programs: | | | | |
| | Check here ▶ if ti unsolicited requests forganizations under oti | | dation makes gifts, g | grants, etc. (see page | | | | |
| а | The name, address, a | · . | of the person to whor | n applications should b | oe addressed. | | | |
| b | The form in which app | lications should be sul | bmitted and informati | on and materials they | should includ | le. | | |
| | ATTACHME | ENT 9 | | | | | | |
| С | Any submission deadli | | | | | | | |
| | | NO DEADLINES FO | | | | | | |
| d | Any restrictions or lift factors | | | | | inds of i | institutior | s, or other |
| | THERE ARE 1 | NO RESTRICTIONS | ON GRANTS, SO | CHOLARSHIPS, E | rc. | | | |

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contribution | Purpose of grant cont Purpose of grant or contribution Amount a Paid during the year ATTACHMENT 10 2,100. **b** Approved for future payment ▶ 3b

| Part XV | Analysis of Income-Produ | icing Activ | vities | | | 4. |
|-------------|---|---------------|--------------------------|--|-----------------------------------|---|
| Enter gross | s amounts unless otherwise indicated | Unrela (a) | ated business income (b) | Excluded by | y section 512, 513, or 514 (d) | (e) Related or exempt function income |
| 1 Program | m service revenue | Business code | Amount | Exclusion code | | (See page 28 of the instructions) |
| a | | | | | | |
| b | | | | <u> </u> | | |
| c | | | | <u> </u> | | |
| d | | | | | | |
| e | | | | | | |
| f _ | | | | <u> </u> | | |
| _ | es and contracts from government agencies | | | | | |
| | ership dues and assessments | | | | | |
| | ids and interest from securities | | | 14 | 16,739. | |
| | ntal income or (loss) from real estate | | | | | |
| | bt-financed property | | | | | |
| | t debt-financed property | | | | | |
| | al income or (loss) from personal property | | | | | |
| | nvestment income | | | | | |
| | (loss) from sales of assets other than inventory | | | 14 | -866. | |
| 9 Net inc | ome or (loss) from special events | | | | | |
| 10 Gross p | profit or (loss) from sales of inventory | | · | | | |
| 11 Other re | | | | | | |
| ь <u>ТА</u> | X REFUND | | | | 173. | <u> </u> |
| c | | | | | | |
| d | | | | | | |
| e | | | · · · - | | 16,046. | |
| | al Add columns (b), (d), and (e) | | | | | 16,046. |
| | Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to | | | | 13 | 10,040. |
| Part XVI | | | | vemnt Purn | OSAS | |
| Line No. ▼ | Explain below how each activithe accomplishment of the forpage 29 of the instructions) NOT APPLICABLE | | | | | |
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| Form 990-PF | | | | | 73-1486208 | | | ge 13 |
|------------------|---|--------------------|---|-------------|---|----------|--------|-------|
| Part XVI | Information Exempt Orga | | Fransfers To and Transa | ctions | s and Relationships With I | Nonc | narıt | able |
| | | | | | any other organization described section 527, relating to political | | Yes | No |
| organ a Trans | izations? ifers from the reporting f | oundation to a n | oncharitable exempt organization of | | | | | |
| | | | | | | 1a(1) | | Х |
| | | | | | | 1a(2) | | Х |
| | transactions | | | | | | | |
| (1) S | ales of assets to a nonch | nantable exempt | organization | | | 1b(1) | | Х |
| (2) P | urchases of assets from | a nonchantable | exempt organization | | | 1b(2) | | X |
| (3) R | ental of facilities, equipm | ent, or other asse | ets | . . | | 1b(3) | | X |
| (4) R | eimbursement arrangeme | ents | | | | 1b(4) | | X |
| | | | | | | | | X |
| | | | | | | , , | _ | X |
| | | | | | | | | X |
| | | | | | Column (b) should always show | | | |
| | • • | = | | | n If the foundation received less | | | |
| value | in any transaction or | sharing arran | gement, show in column (d) th | ne value | e of the goods, other assets, or | service | es rec | eived |
| (a) Line no | (b) Amount involved | (c) Name of | noncharitable exempt organization | | escription of transfers, transactions, and sha | nng arra | ngeme | nts |
| | N/A | | | N/A | | | | |
| | | | | _ | | | | |
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| | | | | | | | | |
| sectio | • | ner than section (| ated with, or related to, one or m 501(c)(3)) or in section 527? | nore tax | e-exempt organizations described in | Y6 | es 🗀 | √ No |
| | (a) Name of organization | | (b) Type of organization | | (c) Description of relation | ship | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| e | belief, | penalties of perjury, declare that I have examined this return, increase is true, correct, and complete Declaration of preparer (other than | cluding accompanying schedunt taxpayer or fiduciary) is based as Date | ed on all information of | to the best of my knowledge as which preparer has any knowledge |
|-----------|-----------------------|---|---|--------------------------|--|
| Sign Here | id arer's Only | Preparer's signature Any C. Jew | Date 2-22-11 | Check if self-employed ▶ | Preparer's identifying number (See Signature on page 30 of the instructions) P00365539 |
| | Pai Prepa Use C | Firm's name (or yours if BKD, LLP | | EIN ▶ | 44-0160260 |
| | a - | | 200 737 | 01-4026 Phone n | o 580-237-3300 |

Form **990-PF** (2009)

ROBERT CUMMINS FAMILY FOUNDATION, INC. FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Date sold Kind of Property Description acquired Gross sale Depreciation Cost or FMV Adj basis Excess of Gain price less allowed/ other as of FMV over as of or expenses of sale aliowable 12/31/69 12/31/69 adı başıs (loss) basis 11/10/2010 EDWARD JONES - LT VARIOUS 17,533. -866. 18,399. -866. TOTAL GAIN(LOSS)

| FROM SECURITIES |
|-----------------|
| INTEREST |
| SAND |
| DIVIDENDS |
| I |
| PART |
| 990PF, |
| FORM |

| NET INVESTMENT INCOME | 16,739. | 16,739. |
|---|--------------|---------|
| REVENUE AND EXPENSES PER BOOKS | 16,739. | 16,739. |
| | | TOTAL |
| DESCRIPTION | EDWARD JONES | |

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION FEDERAL INCOME TAX REFUND

173.

TOTALS

173.

| FEES | |
|------------|---|
| ACCOUNTING | |
| ı | |
| Н | l |
| PART | |
| 990PF, | |
| FORM | |

| CHARITABLE PURPOSES | | 0 |
|---|--------|--------|
| ADJUSTED NET INCOME | | 0. |
| NET INVESTMENT INCOME | | 0 |
| REVENUE AND EXPENSES PER BOOKS | 1,725. | 1,725. |
| | | TOTALS |
| DESCRIPTION | ВКО | |

PAGE 17

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND

DESCRIPTION BANK FEES ADVERTISING

EXPENSES PER BOOKS

33.

31.

TOTALS

64.

| FORM 990PF, PART II - CORPORAT | CORPORATE STOCK | | ATTACHMENT 5 | INT 5 |
|--------------------------------|-------------------------|----------------------|--------------|----------------|
| DESCRIPTION | BEGINNING BOOK VALUE | ENDING BOOK VALUE | ING | ENDING FMV_ |
| EDWARD JONES | . 763, 597, | | 665,480. | 665,480. |
| | TOTALS 627,597. | | 665,480. | 665,480. |

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

DESCRIPTION

AMOUNT

UNREALIZED APPRECIATION OF INVESTMENTS

42,043.

TOTAL

42,043.

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|---|--|--------------|
| EXPENSE ACCT AND OTHER ALLOWANCES | .0 | 0 |
| CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | .0 | 0 |
| COMPENSATION | 12,000. | 12,000. |
| TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | PRESIDENT | GRAND TOTALS |
| NAME AND ADDRESS | CONI BLANKENSHIP 2025 QUAILWOOD ENID, OK 73703 | |

PAGE 21

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

RAY FEIGHTNER, JR. 1420 W CHESTNUT ENID, OK 73703 580-233-6000

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

THE PRIVATE FOUNDATION DOES NOT REQUIRE A SET FORMAT FOR APPLICATIONS FOR GRANTS, SCHOLARSHIPS, ETC.

| ATTACHMENT 10 | | AMOUNT | 1,000 | 100 | 1,000 |
|---------------|---|------------------------------------|--|--|--|
| | | PURPOSE OF GRANT OR CONTRIBUTION | CONTRIBUTION TO MUSEUM FUND | | |
| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | AND FOUNDATION STATUS OF RECIPIENT | мозеом | PUBLIC CHARITY | PUBLIC CHARITY |
| | | RECIPIENT NAME AND ADDRESS | WOODRING MUSEUM FUND 1026 S 66TH ST ENID, OK 73701 | ENID ARTS COUNCIL PO BOX 3834 ENID, OK 73702 | KIWANIS TRUST FUND PO BOX 769 ENID, OK 73702 |

TOTAL CONTRIBUTIONS PAID 2,100

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

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

OMB No 1545-0092

2009

Name of estate or trust **Employer identification number** ROBERT CUMMINS FAMILY FOUNDATION, INC. 73-1486208 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (mo, day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1 b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (c) Date sold (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (mo, day, yr) (mo, day, yr) 6a -866. 6b **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b...... Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -866. column (3) on the back

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

| Summary of Parts and II Caution: Read the instructions before completing this part (1) Beneficianes (2) Estate's or trust's (3) Total 13 Net short-term gain or (loss): | Sche | dute D (Fo | orm 1041) 2009 | | | | | | Page 2 |
|--|-----------------------------|---|---|-----------------------------|--|----------------|--------------|---------------------------------------|---|
| Caution: Read the instructions before completing this part. (see page 5) or trusts (3) folal 13 Net short-term gain or (loss): 14 Net long-term gain or (loss): 15 Unrecaptured section 1250 gain (see line 18 of the wrksht). 16 Unrecaptured section 1250 gain (see line 18 of the wrksht). 17 Total net gain or (loss). Combine lines 13 and 14a 18 Total net gain or (loss). Combine lines 13 and 14a 19 Each set gain. 10 Each set gain. 10 Each set gain. 10 Each set gain. 11 Each set gain. 10 Each set gain. 11 Each set gain. 11 Each set gain. 12 Each set gain. 13 Each set gain. 14 Each set gain. 14 Each set gain. 15 Total net gain or (loss). Combine lines 13 and 14a 16 Each set gain. 17 Each set gain. 18 Each set gain. 19 Each set gain. 19 Each set gain. 10 Each set gain. 11 Each set gain. 11 Each set gain. 12 Each set gain. 12 Each set gain. 13 Each set gain. 14 Each set gain. 14 Each set gain. 15 Each set gain. 16 Each set gain. 16 Each set gain. 16 Each set gain. 17 Each set gain. 18 Each set gain. 18 Each set gain. 18 Each set gain. 19 Each set gain. 10 Each set gain. 11 Each set gain. 12 Each set gain. 13 Each set gain. 14 Each set gain. 15 Each set gain. 16 Each set gain. 16 Each set gain. 16 Each set gain. 17 Each set gain. 18 Each set gain. 18 Each set gain. 18 Each set gain. 19 Each set gain. 10 Each set g | | | | | (4) Pos | oficionos' | (2) Ea | toto'o | raye z |
| 13 Not short-term gain or (loss): a Total for year 14 Not tong-term gain or (loss): a Total for year 14 Not tong-term gain or (loss): a Total for year 15 Total net gain or (loss). Combine lines 13 and 14 a 15 Total net gain or (loss). Combine lines 13 and 14 a 16 Souther (line): 15 Total net gain or (loss). Combine lines 13 and 14 a 16 Souther (line): 17 South (line): 18 South (line): 19 South (line): 19 South (line): 10 South (line): 10 South (line): 10 South (line): 11 South (line): 10 South (line): 11 South (line): 11 South (line): 12 South (line): 13 South (line): 14 South (line): 15 Total net gain or (loss). Combine lines 13 and 16 so. compile Part N and the Capital Loss Campover Worksheet, as necessary 15 Total net gain or (loss): 16 South (line): 17 South (line): 18 Total net gain or (loss): 19 South (line): 19 South (line): 10 South (line): 11 South (line): 11 South (line): 12 South (line): 13 South (line): 14 South (line): 15 South (line): 16 South (line): 17 South (line): 18 South (line): 19 South (line): 19 South (line): 19 South (line): 10 South (line): 11 South (line): 12 South (line): 13 South (line): 14 South (line): 14 South (line): 15 South (line): 16 South (line): 16 South (line): 17 South (line): 18 South (line): 18 South (line): 18 South (line): 19 South (line): 19 South (line): 10 South (line): 11 South (line): 11 South (line): 12 South (line): 13 South (line): | Га | | · · · · · · · · · · · · · · · · · · · | nart | | | | | (3) Total |
| 14 Net long-term gain or (loss): a Total for year b Unrecaptured section 1250 gain (see line 18 of the wrksht). 14 | 13 | Net sh | | - | (333 | F-9/ | | | |
| a Total for year | | | | 13 | | | | | |
| b Unrecaptured section 1250 gain (see line 18 of the wrkshit.) 14b | | | - · · · · · · · · · · · · · · · · · · · | 142 | | | | | -866. |
| c 2 9% rate gain or (loss). Combine lines 13 and 14a | b | Unreca | entured section 1250 gain (see line 18 of the wright) | | - | | | | |
| 15 Total net gain or (loss). Combine lines 13 and 14a 15 -865. Note: / line 15, column (3), as a net pain, early the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) if lines 14a and 15, column (2), are net gains, go to Part V. and do not complete Part IV if line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary Part IV Capital Loss Limitation 16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 Note: if the loss on line 15, column (3) as more than \$3,000, or if Form 1041, line 4c (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet on page 7 of lite instructions to figure your capital loss carryover Part V Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2) and Form 1041. In the 2b(1), and Form 4952, line 49 are more than zero. Both Form 1041, line 2b(1), and Form 4952, line 49 are more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I or Form 990-T, and Form 990-T, line 34, is more than zero. Form 990-T and Form 990-T, and Form 990-T, line 34, is more than zero. Subtract line 25 from line 40, col. (2) in line 20 (or Form 990-T, line 34). 18 Enter the smaller of line 14a or 15 in column (2) but not less than zero. 20 Line 10 line 20 line 2 | | | - ' | | | | | | |
| Note: If line 15, column (3), as and gain, inter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV if line 15, column (3), as a not loss, complete Part IV and the Capital Loss Carryower Worksheet, as necessary Part IV Capital Loss Limitation 16 Enter here and enter as a (boss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or b \$3.000. Note: If tine 6as on line 15, column (3) or more than \$3.000, or if Form 1041, line 22 (or Form 990-T, line 34), is a bos, complete the Capital Loss Carryower Worksheet on page 70 if the instructions (10 sea and 10 sea and | 15 | Total | ant gain or (locs). Combine lines 13 and 14a | - | | | | · · · · · · · · · · · · · · · · · · · | -866. |
| 16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b 33,000 or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Caryover Worksheet on page 7 of the instructions to figure your capital loss caryover Worksheet on page 7 of the instructions to figure your capital loss caryover Worksheet on page 7 of the instructions to figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital loss caryover Worksheet on page 8 of the instructions of figure your capital capi | Note | e: If line | 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo | rm 990 | | | | | nn (2), are net gains, go |
| a The loss on line 15, column (3) or b \$3.000. All page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carpover Worksheet on page 7 of the instructions to ligue your capital loss carpover Worksheet on page 7 of the instructions to ligue your capital loss carpover Worksheet on page 7 of the instructions to ligue your capital loss carpover Worksheet on page 7 of the instructions to ligue your capital loss carpover Worksheet on page 7 of the instructions to ligue your capital loss carpover Worksheet on page 8 of the instructions of 15 or 10 | Pa | rt IV | Capital Loss Limitation | | | | | | |
| Note: If the loss on line 15, column (3), is more than \$3.00, or if Firm 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Campower Worksheet on page 7 of the instructions to flague your capital loss carryon. Part V Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 20; and Form 1041, line 22, is nown than zero Caution: Skip this part and complete the worksheet on page 8 of the instructions if: Either line 14b, coi (2) or ine 14c, coi (2) is more than zero, or Both Form 1041, line 2b(11), and Form 4952, line 4g are more than zero. Form 990-T, and Form 990-T, line 34, is more than zero. Form 990-T, and Form 990-T, line 34, is more than zero. The start shale income from Form 1041, line 2b (or Form 990-T, line 34). Enter the smaller of line 14a or 15 in column (2) but not loss than zero. Add lines 18 and 19 If the estate or trust is filing Form 4952, enter the amount from line 40, chlorworse, enter -0. Add lines 18 and 19 Are the amount on line 20 if zero or less, enter -0. Subtract line 22 from line 17, if zero or less, enter -0. Are the amount on line 23 equal to or more than the amount on line 24? Yes. Skip lines 25 and 26, go to line 27 and check the "No" box. No. Enter the amount from line 20, fill fill ne 26 is blank, enter -0.) Better the amount from line 26 (if line 26 is blank, enter -0.) Better the amount from line 26 (if line 26 is blank, enter -0.) Better the tax on the amount on line 23 black here -0.) Better the amount from line 26 (if line 26 is blank, enter -0.) Better the amount from line 27 is black, enter -0.) Better the amount from line 28 can be a black here and the smaller of line 17 or line 22 Are the amount from line 26 (if line 26 is blank, enter -0.) Better the tax on the amount on line 23 black here -0.) Better the tax on the amount on line 23 black here - | 16 | Enter h | nere and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F | Part I, II | ne 4c, if a | trust), the sr | naller of: | | |
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| there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skyp this part and complete the workshed to nage 8 of the instructions if: • Either line 14b, col (2) or line 14c, col. (2) is more than zero, or • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part 1 of Form 990-T, and Form 990-T, line 34, is more than zero Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero 17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 17 | Pa | rt V | Tax Computation Using Maximum Capital Gains Rate | es | | | | | |
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| (see the Schedule Ginstructions in the instructions for Form 1041) | | | | | | | d Trusts | | |
| 32 Add lines 30 and 31 | • | _ | | | | | | 31 | |
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| · · · · · · · · · · · · · · · · · · · | 32 | Add line | es 30 and 31 | | | | | 32 | |
| | | | | | | | | | |

Schedule D (Form 1041) 2009

33

G, line 1a (or Form 990-T, line 36) . . .

(see the Schedule Ginstructions in the instructions for Form 1041)........

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side ROBERT CUMMINS FAMILY FOUNDATION, INC.

Employer identification number 73-1486208

| (a) Description of property (Example 100 sh 7% preferred of "Z" Co) | (b) Date acquired (mo , day, yr) | (c) Date sold (mo , day, yr) | (d) Sales price (see page 4 of the instructions) | (e) Cost or other basis (see page 4 of the instructions) | (f) Gain or (loss) Subtract (e) from (d) |
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| 6b Total. Combine the amounts in colu | umn (f) Enter here a | nd on Schedule D, I | ine 6b | <i></i> | -866 |