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- ', Form '990-PF

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2010, and ending For calendar year 2010, or tax year beginning G Check all that apply: Initial return Initial Return of a former public charity Final return Address change Amended return Name change Employer identification number TENNYSON FAMILY FOUNDATION, INC. 35 SOUTH 4TH STREET 20-5632475 Telephone number (see the instructions) CUSTER, SD 57730 (605)673-2350If exemption application is pending, check here D 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check н X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method: X Cash Fair market value of all assets at end of year (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ► S 51,979 **股初國聯 Analysis of Revenue and** (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income income for charitable purposes (cash basis only) (see the instructions).) 10,300. Contributions, gifts, grants, etc, received (att sch) 2 Ck ► If the foundn is not req to att Sch B Interest on savings and temporary 136 136 cash investments Dividends and interest from securities 5a Gross rents. b Net rental income or (loss)..... 6a Net gain/(loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a.... Capital gain net income (from Part IV, line 2)... Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less: Cost of goods sold . . . c Gross profit/(loss) (att sch)..... 11 Other income (attach schedule) 348 12 Total. Add lines 1 through 11...... 10,648 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages...... 15 Pension plans, employee benefits... 16a Legal fees (attach schedule)..... **b** Accounting fees (attach sch)..... c Other prof fees (attach sch) . . SEE . .ST . 1 1.325 17 Interest..... Taxes (attach schedule)(see instr.)...SEE.STM.2 4 Depreciation (attach sch) and depletion . . Occupancy... 21 Travel, conferences, and meetings... Printing and publications 23 Other expenses (attach schedule) OGDE SEE STATEMENT 3 94 Total operating and administrative expenses. Add lines 13 through 23. <u>1,423</u> Contributions, gifts, grants paid PART. XV. 3,000 13,000. Total expenses and disbursements. 13,000 Add lines 24 and 25..... 14,423 Subtract line 26 from line 12: a Excess of revenue over expenses -3,775. 348. b Net Investment Income (if negative, enter -0-) . . C Adjusted net income (if negative, enter -0-). . . . 348.



Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)...... 58,659. Enter amount from Part I, line 27a..... 2 -3.775. 3 Other increases not included in line 2 (itemize) 3 4 54,884 5 5 Decreases not included in line 2 (itemize) 6 54,884. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30..... 6

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

7

4,194.

13,000.

Form 990-PF (2010) TENNYSON FAMILY FOUNDATION, INC.	20-563			Page 4
Rart VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	- see the	instruct	tions)	
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)				
b Domestic foundations that meet the section 4940(e) requirements in Part V,	- 1	ON APPART AND	MANUFACTURE CONTRACTOR	3.
check here. ► X and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only. Others enter -0-)		\rightarrow $-$		0.
3 Add lines 1 and 2		-		3.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0				0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<u>5</u>	HEADER	SCHOOL STATE	3.
6 Credits/Payments:	ł			
a 2010 estimated tax pmts and 2009 overpayment credited to 2010. 6a b Exempt foreign organizations — tax withheld at source				
2 Extended to the second secon	_			
c Tax paid with application for extension of time to file (Form 8868)				
7 Total credits and payments. Add lines 6a through 6d	7		20,000	0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				3.
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 2011 estimated tax				
Part VII A Statements Regarding Activities				
		2600	Y	es No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?		-	1a	Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1ь	X
·				
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materia or distributed by the foundation in connection with the activities.	is publist	ied		
			1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$		0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	osed on			
foundation managers ▶ \$ 0.				
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, a of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	rticles	ļ		
			3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N/A
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	••••••		5	X
If 'Yes,' attach the statement required by General Instruction T.				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		2524		
 By language in the governing instrument, or 		20060		
 By state legislation that effectively amends the governing instrument so that no mandatory directions the with the state law remain in the governing instrument? 	nat conflic	ct P	6 Z	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV				X
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)				
SD				
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u> </u>	國際	
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		3	8b X	X Markett
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' cor	(3) or 494	2()(5)	20 SE	v
			9 2	<u>x </u>
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses	neir name ENT 5	es	10 3	x
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Form	990-PF (2010) TENNYSON FAMILY FOUNDATION, INC.	20-	563247	5	Page	e 5
	VIEA Statements Regarding Activities (Continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11	Х	ζ
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12	X	ζ
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address	on applica	tion?	13	Х	_
14	The books are in care of ► MICHAEL E TENNYSON Telephor	 e no. ►	(605)	673	-2350	
• •	The books are in care of ► MICHAEL E TENNYSON Telephor Located at ► 35 SOUTH 4TH STREET CUSTER SD ZIP + 4	<u> 577</u>	30			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			. N/A	▶∟]
	and enter the amount of tax-exempt interest received or accrued during the year				N/	_
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other bank, securities, or other financial account in a foreign country?			16	Yes N	_
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the reforeign country ►	name of th	ne			
Part	Statements Regarding Activities for Which Form 4720 May Be Required			STREAM		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes N	O
1 a	During the year did the foundation (either directly or indirectly):	□v	ত্যিয়			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X No X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	ΧNο			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	XNo			
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruct			1 b	N/A	2
	Organizations relying on a current notice regarding disaster assistance check here	▶				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2010?			1c	Х	
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No			
	If 'Yes,' list the years ► 20 , 20 , 20					
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see the instructions.)	(a)(2) to		2b	N/A	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years > 20, 20, 20	here.				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
b	If 'Yes,' did it have excess business holdings in 2010 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 approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.).	ed		3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	Х	<u></u>
<u> </u>	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 2010?			4b	X	_
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Rant VIEB Statements Regarding Activit		n 4720 May Be Reg	uired (continued)	Room edil acceptant for the se
5a During the year did the foundation pay or incu	_		П., Б	
` (1) Carry on propaganda, or otherwise attem	pt to influence legislation	on (section 4945(e))?	Yes X	No Series
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registra				No
(3) Provide a grant to an individual for travel,	, study, or other similar	purposes?	Yes X	No S
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o n 4940(d)(2)? (see ınstr	rganization described uctions)	Yes X]No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	ous, charitable, scientifion of cruelty to children	c, literary, or or anımals?	Yes X	No S
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or ir (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	ording disaster assistan	ce check here	▶	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?		N/A. Yes] No
6a Did the foundation, during the year, receive as on a personal benefit contract?				
b Did the foundation, during the year, pay prem	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b X
If 'Yes' to 6b, file Form 8870.				1
7a At any time during the tax year, was the found				,
b If yes, did the foundation receive any proceed				
Partivilis Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Hignly Pald E	imployees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
MICHAEL E TENNYSON	DIRECTOR	0.	0.	0.
35 SOUTH 4TH STREET	0.50			
CUSTER, SD 57730				
BONNIE L TENNYSON	DIRECTOR	0.	0.	0.
35 SOUTH 4TH STREET	0.50			
CUSTER, SD 57730				<u> </u>
SONJA A TENNYSON	DIRECTOR	0.	0.	0.
35 SOUTH 4TH STREET	0.50			
CUSTER, SD 57730				
JERAD M_TENNYSON	DIRECTOR	0.	0.	0.
35 SOUTH 4TH STREET	0.50			
CUSTER, SD 57730				
2 Compensation of five highest-paid employee	es (other than those inc	cluded on line 1– see ir	structions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE			•	
		-		
Total number of other employees paid over \$50,000	<u>. </u>		<u> </u>	0
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Form 990-PF (2010) TENNYSON FAMILY FOUNDATION, INC. 20-56 Partyllia Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	(c) compensation
Total number of others receiving over \$50,000 for professional services	0
Racinal 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 beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 PROVIDE FINANCIAL SUPPORT TO LOCAL TAX EXEMPT CHARITABLE ORGANIZATIONS THAT SERVE MANKIND SEE ATTACHED LIST	11,000.
2 JILL TENNYSON MEMORIAL SCHOLARSHIP - POST HIGH SCHOOL EDUCATIONAL SCHOLARSHIP	2,000.
3	2,000.
4	
Pan IX B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A	Amount
~	
2	
All other program-related investments. See instructions.	
Total Add lines 1 through 3	0.
Total. Add lines 1 through 3	Form 990-PF (2010)
	(2010)

Part Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: 1 a 23,655. 1 b 28;653. **b** Average of monthly cash balances...... c Fair market value of all other assets (see instructions)..... 1 c 52,308. 1 d d Total (add lines 1a, b, and c)..... e Reduction claimed for blockage or other factors reported on lines 1a and 1c ٥. 2 Acquisition indebtedness applicable to line 1 assets 2 3 52,308. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 785. (for greater amount, see instructions)..... 5 51,523. Net value of noncharitable-use assets, Subtract line 4 from line 3. Enter here and on Part V, line 4...... 5 2,576. Minimum investment return. Enter 5% of line 5..... 6 Participation Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here X and do not complete this part.) Minimum investment return from Part X, line 6....... N/A....... 1 2a Tax on investment income for 2010 from Part VI, line 5..... **b** Income tax for 2010. (This does not include the tax from Part VI.)..... 2Ь 2 c 3 3 Distributable amount before adjustments. Subtract line 2c from line 1...... 4 Recoveries of amounts treated as qualifying distributions..... 5 Deduction from distributable amount (see instructions)..... 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part (See instructions) 大概 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26..... 1a 13,000. 1b **b** Program-related investments — total from Part IX-B..... 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 48 Amounts set aside for specific charitable projects that satisfy the:

a Suitability test (prior IRS approval required)......

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.

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4......

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

b Cash distribution test (attach the required schedule)

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Form 990-PF (2010)

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3 a 3 b

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manazini Undistributed income (see instr	uctions)	N/A		
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only				
b Total for prior years: 20, 20, 20				
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
e From 2009				
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from Part				
XII, line 4: ► \$			1.0	
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus.				
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	24-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-			
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount — see instructions				
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				-
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007 c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Form 990-PF (2010) TENNYSON FAMILY				20-563247	5 Page 10
PartXIV Private Operating Foundation					
1a If the foundation has received a ruling or one is effective for 2010, enter the date of the	ruling			. <u></u>	
b Check box to indicate whether the foundate	ion is a private ope	rating foundation de	scribed in section	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	· · · · · · · ·	Prior 3 years		•
income from Part I or the minimum investment return from Part X for	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
each year listed	348.	416.	770.	3,245.	4,779.
b 85% of line 2a	296.	354.	655.	2,758.	4,063.
c Qualifying distributions from Part XII, line 4 for each year listed	13,000.	6,500.	5,350.	1,000.	25,850.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	13,000.	6,500.	5,350.	1,000.	25,850.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(j)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	1,717.	1,686.	2,030.	2,163.	7,596.
c 'Support' alternative test — enter:	·	·			•
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)		-			
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during th	(Complete this p e year – see ins	part only if the outractions.)	organization ha	d \$5,000 or mor	e in
Information Regarding Foundation Managers at List any managers of the foundation who had close of any tax year (but only if they have SEE STATEMENT 6	ave contributed mo	re than 2% of the to han \$5,000). (See s	otal contributions re ection 507(d)(2).)	eceived by the found	lation before the
b List any managers of the foundation who o	wn 10% or more of	the stock of a corpo	oration (or an equa	Ily large portion of t	the ownership of
a partnership or other entity) of which the NONE	foundation has a 10	% or greater interes	st.		
2 Information Regarding Contribution, Gran	t Gift Loan Schol	archin etc Program	nc.		
Check here I if the foundation only makes	akes contributions	to preselected chari	table organizations		
complete items 2a, b, c, and d.					
a The name, address, and telephone numbe	r of the person to w	nom applications sn	iouia de addressed	:	
SEE STATEMENT 7					
b The form in which applications should be s	ubmitted and inform	nation and materials	they should include	le:	•
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines:				·	
-					
SEE STATEMENT FOR LINE 2A d Any restrictions or limitations on awards, s	uch as by geograph	ical areas, charitabl	e fields, kinds of in	stitutions, or other f	actors:
•	y 55-FF.	,	•	,	
SEE STATEMENT FOR LINE 2A					

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Supplementary information	continucay			
3 Grants and Contributions Paid During the Y	ear or Approved for Fu	ture Paymer	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	contribution	
a Paid during the year		1		
SEE STATEMENT 8				
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b Approved for future payment				
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Total		<u></u>		L

Part XVIA Analysis of Income-Producing Activities

		····				
Enter	r gross amounts unless otherwise indicated	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	1 (E)
•	•	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Arnount	Related or exempt function income (see the instructions)
1	Program service revenue:	<u> </u>		code		
а				<u> </u>		
b				<u> </u>		
c						
đ						
е						
f						
g	Fees and contracts from government agend	cies		ļ		
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments .			14		
4	Dividends and interest from securities			14	212.	
5	Net rental income or (loss) from real estate	: 234				
ą	Debt-financed property			ļ		
b	Not debt-financed property					1
6	Net rental income or (loss) from personal property $\ \ .$			ļ		
	Other investment income		·			
8	Gain or (loss) from sales of assets other than inventory	y				
9	Net income or (loss) from special events		<u></u>			
10	Gross profit or (loss) from sales of inventor	y				
11	Other revenue:					
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C.						
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e						
				100000		
12	Subtotal. Add columns (b), (d), and (e)			and the	348.	<u> </u>
13	Total. Add line 12, columns (b), (d), and (e)		Kales and		348.
13	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify ca)			13	<u> </u>
13 (See	Total. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify ca	alculations.)		· · · · · · · · · · · · · · · · · · ·	13	<u> </u>
13 (See Par	Total. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify care. Relationship of Activities	to the Accompl	ishment of Exemp	ot Purp	13 oses	348.
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13 (See Part	Total. Add line 12, columns (b), (d), and (e worksheet in line 13 instructions to verify cate and the line 13 instructions to verify cate and the line 13 instructions to verify cate and the line 13 instructions to verify cate and line 14 instructions to verify cate and line 15 instructions and line 15 instructions and line 15 instructions and line 15 instructions and line 15 instructions and line 15 instructions and line 15 instructions and line 15 instructions to verify cate and l	to the Accompl	ishment of Exemp	ot Purp	13 oses	348.
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Form \$90-PF (2010) TENNYSON FAMILY FOUNDATION, INC. 20-5632475 Part VIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•					交易等 A	es No
described in se-	ation directly or indirection 501(c) of the Co cal organizations?	ectly engage in any of the followin ode (other than section 501(c)(3) o	g with any other organiz organizations) or in secti	ation on 527,		
• .	-	tion to a noncharitable exempt org	anization of:			
					1a (1)	X
• •						$\frac{1}{x}$
b Other transaction					1 (2)	
		le exempt organization				X
* *		charitable exempt organization			1b (2)	$\frac{\Lambda}{X}$
		or other assets				$\frac{1}{X}$
						$\frac{\Lambda}{X}$
• •	•					$\frac{\lambda}{X}$
	=					X
		bership or fundraising solicitations				$\frac{\Lambda}{X}$
c Sharing of facili	ties, equipment, mai	ling lists, other assets, or paid em	ployees		1c	
d If the answer to the goods, othe	any of the above is rassets, or services or sharing arrangem	Yes,' complete the following sche given by the reporting foundation. ent, show in column (d) the value	dule. Column (b) should if the foundation receive of the goods, other asset	always show the fair red less than fair marke	narket value t value in d.	of
		Name of noncharitable exempt organization		transfers, transactions, and		nents
N/A						
				······································		
			- 			
						
			···-	 		
						
			-	**	 -	
						
						
		- 				
	·	· · · · · · · · · · · · · · · · · · ·	- 	···		
				·		
						
				 		
	n directly or indirectletion 501 (c) of the Co te the following sche	y affiliated with, or related to, one ode (other than section 501(c)(3))	or more tax-exempt org or in section 527?	anizations	Yes	ΧNο
	of organization	(b) Type of organiza	ation	(c) Description of rela	ationship	
N/A				1	<u> </u>	
						
						
Under penalties or correct, and comp	perjury, I declare that I have lets benearation of prepare	we examined this return, including accompanying other than taxpayer or fiduciary) is based or	ing schedules and statements, ar n all information of which prepare	nd to the best of my knowledge er has any knowledge.	and belief, it is t	rue,
Here	[[[]]]]]]]		15-13-11	▶ DIRECTOR		
	Sficer or trustee	Mr	Date	Title		
	preparer's name	Preparer's signature	Date		PTIN	
J	/ · ·		16ell 5-9-1	Check if I if		\1
Paid KENN					P0000520	17
Preparer Firm's n		LL, BURKART, SAGE, CPA'S		Firm's EIN ► 46-03	33021	
Jse Only Firm's a	TOTAL -	ACKSON BLVD., SUITE 2	nt	⊣	240 27	34
	RAPID	CITY, SD 57702	.	Phone no. (605)	348-772	
3ΔΑ					Form 990-PI	F (2010)

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

Schedule of Contributors

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

OMB No 1545-0047

2010

Internal Revenue Service	7.1.1.2.07 (3.7.3.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		
Name of the organization		Employer	identification number
TENNYSON FAMILY	FOUNDATION, INC.	20-56	32475
Organization type (check	one):		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a 527 political organization	i private fo	oundation
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a priv	vate found	ation
	501(c)(3) taxable private foundation		
Note. Only a section 501 (c	ins covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a sing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more Parts I and II.)		
Special Rules			
For a section 501(c)(3) 509(a)(1) and 170(b)(1 (2) 2% of the amount of) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the)(A)(vi), and received from any one contributor, during the year, a contribution of on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I a	e regulatio of the great nd II.	ns under sections ter of (1) \$5,000 or
aggregate contribution:), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one is of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, liter lty to children or animals. Complete Parts I, II, and III.	contribute ary, or edu	or, during the year, ucational purposes, or
contributions for use e), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one exclusively for religious, charitable, etc., purposes, but these contributions did not enter here the total contributions that were received during the year for an excluded any of the parts unless the General Rule applies to this organization because.	: aggregate <i>usivelv</i> relic	e to more than \$1,000. gious, charitable, etc.
religious, charitable, e	tc, contributions of \$5,000 or more during the year		▶\$
Caution: An organization of 990-PF) but it must answer 990-PF, to certify that it do	that is not covered by the General Rule and/or the Special Rules does not file So er 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form oes not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-P	chedule B n 990-EZ, 'F).	(Form 990, 990-EZ, or or on line 2 of its Form
BAA For Paperwork Red 990EZ, or 990-PF.	duction Act Notice, see the Instructions for Form 990, Schedul	le B (Form 9	990, 990-EZ, or 990-PF) (2010

Schedule	B (Form 990, 990-EZ, or 990-PF) (2010)	Page 1	of 1 of Part I
Name of org	anization SON FAMILY FOUNDATION, INC.	1	er identification number 632475
	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MIKE & BONNIE TENNYSON 35 SOUTH 4TH STREET CUSTER, SD 57703	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
(a)	(b)	\$(c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
Number	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d)` Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page

of 1 of P

of Part II

Name of organization

TENNYSON FAMILY FOUNDATION, INC.

20-5632475

Partill	Noncash	Property	(see	instructions.)
---------	---------	-----------------	------	---------------	---

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	. (d) Date received
N,	/A		
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) . Date received
_			
		\$	

	3 (Form 990, 990-EZ, or 990-PF) (2010)			Page 1	of 1	of Part III
Name of organ					Employer identificat	
	ON FAMILY FOUNDATION, INC. Exclusively religious, charitable, e	to individual contributio	ne to coeti	ion 501/c)/		
Fillicing and Fil	organizations aggregating more th	an \$1.000 for the vear.Co	omplete cols ((a) through (e	and the following	ng line entry.
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. (b)	total of <i>exclusively</i> religious, cl (Enter this information once. S	naritable, etc, See instruction	ns.)	▶\$	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		1	(d) ription of how gif	t is held
	N/A					
					-	
	Transferee's name, addres	(e) Transfer of gift s. and ZIP + 4	Rela	ationship of t	transferor to trans	sferee
		,		•	<u> </u>	<u> </u>
!		· · · · · · · · · · · · · · · · · · ·				
						
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift	ĺ	Descr	ription of how gift	t is held
		(e)				
	Transferee's name, addres	Transfer of gift s. and ZIP + 4	Rela	ationship of t	ransferor to trans	feree
		,				
•		•				 -
(a)	(b)	(c)		1	(d)	
No. from Part I	Purpose of gift	Use of gift		Desci	ription of how gif	t is held
1 41(1		**************************************				
			<u> </u>			
		(e)		1		
	Transferee's name, addres	Transfer of gift	Dals	ationship of t	ransferor to trans	force
	transièree s name, adures	5, and zir + 4	Neiz	tuonsnip oi t	Tansieror to trains	<u> </u>
(a)	(b)	(c)	<u> </u>	I	(d)	
No. from	Purpose of gift	Use of gift		Descr	ription of how gift	is held
Part I						
		(e)		L		
		Transfer of gift				
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of t	ransferor to trans	feree

2010	FEDERAL STA	TEMENTS		PAGE 1
CLIENT TENN2475	TENNYSON FAMILY FO	UNDATION, IN	C.	20-5632475
5/09/11	-	, , ,		11:20AM
STATEMENT 1 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES				
PROFESSIONAL FEES	(A) EXPENSES PER BOOKS 1,325 TOTAL \$ 1,325	 5.	NT ADJUSTED NET INCOM	
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES				
FEDERAL TAXES	(A) EXPENSES PER BOOKS TOTAL \$ 4		NT ADJUSTED NET INCOM	
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES				
ANNUAL FEE (STATE OF SD) ADVERTISING	6	S INCOM	NT ADJUSTEI E <u>NET INCOM</u>	
STATEMENT 4 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER				·
OMILID THE CONTROL		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS GROWTH FUND OF AMERICA MUT	CUAL FUND	COST	\$ 29,496.	\$ 26,591.
		TOTAL		

2010

FEDERAL STATEMENTS

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CLIENT TENN2475

TENNYSON FAMILY FOUNDATION, INC.

20-5632475

5/09/11

11:20AM

STATEMENT 5 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

MIKE & BONNIE TENNYSON

35 SOUTH 4TH STREET CUSTER, SD 57703

STATEMENT 6 FORM 990-PF, PART XV, LINE 1A **FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS**

MICHAEL E TENNYSON. BONNIE L TENNYSON

STATEMENT 7 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

JILL TENNYSON MEMORIAL SCHOLARSHIP TENNYSON FAMILY FOUNDATION, INC

NAME: CARE OF:

MICHAEL E TENNYSON 35 SOUTH 4TH STREET

STREET ADDRESS:

TELEPHONE:

CUSTER, SD 57730 (605) 673-2350

CITY, STATE, ZIP CODE:

FORM AND CONTENT:

SEE ATTACHED APPLICATION FORM

SUBMISSION DEADLINES:

FEBRUARY 15

RESTRICTIONS ON AWARDS:

SEE ATTACHED APPLICATION FORM

STATEMENT 8 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
CUSTER YMCA 644 CROOK STREET CUSTER, SD 57730	NONE	EXEMPT	FUND YOUTH PROGRAMS	\$ 250.
COLLEGE SCHOLARSHIP JENNIFER CSONGRADI CUSTER, SD 57730	NONE	INDIVIDUA	JILL TENNYSON MEMORIAL SCHOLARSHIP	1,000.
CHRISTMAS FOR KIDS CUSTER, SD 57730	NONE	EXEMPT	FUNDS FOR GIFTS FOR CHILDREN	500.

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ZU		u

FEDERAL STATEMENTS

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CLIENT TENN2475

TENNYSON FAMILY FOUNDATION, INC.

20-5632475

5/09/11

11:20AM

STATEMENT 8 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT		AMOUNT
CUSTER MINISTERIAL ASSOCIATION 12622 US HWY 16A CUSTER, SD 57730	NONE	EXEMPT	RENT/UTILITY ASSISTANCE	\$	500.
CUSTER FIRE DEPARTMENT CUSTER, SD 57730	NONE	EXEMPT	FUND PROGRAMS		250.
CUSTER COUNTY 1880 COURTHOUSE MUSEUM 411 MT. RUSHMORE RD PO BOX 826 CUSTER, SD 57730	NONE	EXEMPT	FUND EDUCATION AND OUTREACH PROGRAMS		250.
SOUTHERN HILLS LITERACY COUNCIL 147 N 5TH STREET CUSTER, SD 57730	NONE	EXEMPT	FUND YOUTH READING PROGRAMS		500.
CUSTER SENIOR CENTER CUSTER, SD 57730	NONE	EXEMPT	FUNDS FOR COMPUTERS FOR SENIOR CENTER		250.
WEAVE CUSTER, SD 57730	NONE	EXEMPT	VIOLENCE VICTIMS ASSISTANCE		500.
CUSTER LIBRARY CUSTER, SD 57730	NONE	EXEMPT	FUND YOUTH READING PROGRAM		150.
CUSTER FOOD PANTRY CUSTER, SD 57730	NONE	EXEMPT	FUND FOOD PROGRAM		500.
CUSTER YOUTH AND ALUMNI FOUNDATION PO BOX 63 CUSTER, SD 57730	NONE	EXEMPT	FUND YOUTH PROGRAMS		500.
SALVATION ARMY CUSTER, SD 57730	NONE	EXEMPT	FUND PROGRAMS		500.
UNITED WAY OF THE BLACK HILLS CUSTER, SD 57730	NONE	EXEMPT	FUND PROGRAMS		500.
COLLEGE SCHOLARSHIP JOSEPHINE THOMSEN CUSTER, SD 57730	NONE	INDIVIDUA	JILL TENNYSON MEMORIAL SCHOLARSHIP	•	1,000.
VOLUNTEERS OF AMERICA CUSTER, SD 57730	NONE	EXEMPT	FUND PROGRAMS		2,500.

•	2010	FEDERAL STATEMENTS	
	CLIENT TENN2475	TENNYSON FAMILY FOUNDATION, INC.	
	5/09/11		

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STATEMENT 8 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CAMP LAUGH A LOT CUSTER , SD 57730	NONE	EXEMPT	FUND YOUTH PROGRAM	\$ 100.
AUTISM SPEAKS CUSTER, SD 57730	NONE	EXEMPT	FUND PROGRAM	100.
REFLECTIONS PARK POST 184 CUSTER, SD 57730	NONE	EXEMPT	FUND WWII, KOREAN AND VIETNAM WAR VETERANS MEMORIAL IN ESTELLINE, SD	300.
SHANNON & LISA RODMAN CUSTER, SD 57730	NONE	INDIVIDUA	MEDICAL EXPENSES	250.
OUTDOOR CAMPUS WEST CUSTER, SD 57730	NONE	EXEMPT	FUND SOUTH DAKOTA GAME FISH & PARKS YOUTH OUTDOOR LEARNING PROGRAM	600.
RAPID CITY CLUB FOR BOYS RAPID CITY, SD 57701	NONE	EXEMPT	FUND YOUTH PROGRAMS	1,000.
BLACK HILLS PLAYHOUSE CUSTER, SD 57730	NONE	EXEMPT	FUND FINE ARTS PROGRAMS	1,000.
			TOTAL	\$ 13,000.

Jill Tennyson Memorial Scholarship

The Jill Tennyson Memorial Scholarship was established in 2006 by the Tennyson Family to honor Jill's love for learning and dedication to helping people. Jill was born December 13, 1978, and she lived and attended school in Custer, South Dakota. After her graduation from Custer High School she continued her education in college and earned her Master's Degree in Social Work in 2004. She returned to Custer to work in the community at the Star Academy as a drug and alcohol counselor and as a social worker at the Custer Regional Senior Care before she died on March 26, 2006.

The scholarship fund has been established to encourage and enable highly motivated Custer High School students to pursue educational opportunities which will prepare them to assist in solving society's problems. Each year one Custer High School graduate or graduating senior will be selected to receive a one time \$1,000 scholarship. The scholarship is open to any student planning to attend post-high school education; however, the intention of the memorial is for it to be especially valuable to those students pursuing a career which serves mankind through human service, social work, or teaching.

Qualified applicants need to complete the application form, answer the two essay questions in a typed double spaced paper and include two letters of reference (preferably from teachers and/or employers). All materials should be mailed to

Jill Tennyson Memorial Scholarship 35 S. 4th St. Custer, SD 57730

Applications need to be postmarked no later than February 15, 2008.



Jill Tennyson Memorial Scholarship Application	: ^	
Full Name:		
Birth Date:		
Mailing Address:	9	
Phone Number:	·	
Year of Graduation from CHS:		
High School GPA:		
Class Rank:	l	
College/University Planning to Attend:	·	
Degree(s) Pursuing:		
Extra Curricular Activities:		
Community Service:	·	
ast Employment:		
•		

Jill Tennyson Memorial Scholarship Application

On a separate piece of paper please provide a double spaced typed response to the following questions. There is no required length of the essay.

- 1. What do you see as the major social issues we as a society are faced with today? Which one of these is the most important to you and why? How do you see yourself in your professional career contributing to the solution of this issue?
- 2. What professional career objectives and goals do you have? What is your plan of action for achieving these goals?

Please include two letters of reference with you application (preferably form teachers and/or employers).

Please submit all application material by February 15, 2008. Applications can be mailed to:

Jill Tennyson Memorial Scholarship 35 S. 4th St. Custer, SD 57730