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# SCANNED AUG 1 8 2011

Form 990-PF

Department of the Treasury

### **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

2010

OMB No 1545-0052

For	caleni	dar year 2010, or tax year beginning JUN	14, 2010		DEC 31, 2010	
		all that apply X Initial return	<del></del>	ormer public charity	Final return	
		Amended return	Address chan		Name change	_ <del> </del>
Na	me of	foundation		<u> </u>	A Employer identification	number
		CRAIG L. VOSBURGH CHA		·	27-3019394	
Nu	nber ar	nd street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number 785–273–39	21
C#	, or to	533 DANBURY LANE			l:	
611	י טוינט	TOPEKA, KS 66606			If exemption application is p     1. Foreign organizations	
H (	Check	type of organization X Section 501(c)(3) ex	kempt private foundation	·	2. Foreign organizations me check here and attach co	eeting the 85% test,
	_	· · · · · · · · · · · · · · · · · · ·	Other taxable private founda	ation	E If private foundation sta	
I F	air ma	rket value of all assets at end of year   J Account		Accrual	under section 507(b)(1)	(A), check here
			ther (specify)		F If the foundation is in a	60-month termination
	\$	96,500 (Part I, colu	mn (d) must be on cash i		under section 507(b)(1)	
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	96,500.		N/A	
		Check Lifthe foundation is not required to attach Sch. B. Interest on savings and temporary	<u> </u>			<u> </u>
	3	cash investments .				
	1	Dividends and interest from securities				
	1 .	Gross rents				
_	١ ـ	Net gain or (loss) from sale of assets not on line 10	11. 11.1. 11. 11. 11. 11.			!' - !! - !!! - !!!
Revenue	b	Gross sales pnce for all assets on line 6a				
eve		Capital gain net income (from Part IV, line 2)		0.		
Œ	8	Net short-term capital gain		· · · · · · · · · · · · · · · · · ·		
	9	Income modifications				
	Ι.	Gross sales less returns and allowances .			<del></del>	
	ı	Less Cost of goods sold				
	l	Gross profit or (loss) Other income				
	l	Total. Add lines 1 through 11	96,500.	0.		
		Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
(A	15	Pension plans, employee benefits				
Jses	16a	Legal fees				
Expens	b	Accounting fees				
e E		Other professional fees				
Administrative	I	Interest				
istr		Depreciation and depletion		_		1114
ᆵ	20	Occupancy RECEIVED				
Ad	21	Travel, conferences and meetings	7			
and	22	Printing and publications Alica				
gu	23	Other expenses				
Operating	24	Total operating and administrative	E .	_		_
Ö		expenses. Add lines 13 through 23 N UT	0.	0.		0.
_	1	Contributions, grits, grants paid	U •			0.
		Total expenses and disbursements.  Add lines 24 and 25	0.	0.		0.
_		Subtract line 26 from line 12		0.		0.
		Excess of revenue over expenses and disbursements	96,500.			
	ſ	Net investment income (if negative, enter -0-)		0.	, ,	· · · · · · · · · · · · · · · · · · ·
	8	Adjusted net income (if negative, enter -0-)			N/A	

Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	(-)		· · · · · · · · · · · · · · · · · · ·
	Savings and temporary cash investments		96,500.	96,500.
	Accounts receivable			· · · · · · · · · · · · · · · · · · ·
-	Less allowance for doubtful accounts	il	· · · ·	-
	Pledges receivable			**************************************
	Less allowance for doubtful accounts	1	;	
		<del></del>		
5		· · · · · · · · · · · · · · · · · · ·		
6				
,	disqualified persons			
'	Other notes and loans receivable	1	:	
	Less allowance for doubtful accounts			
Assets	Inventories for sale or use		<del>_</del>	<del></del>
SS 9	Prepaid expenses and deferred charges			
1   10	a Investments - U S and state government obligations			
	b Investments - corporate stock	<u> </u>		
I	c Investments - corporate bonds			·
11	Investments - land, buildings, and equipment basis	1		
	Less accumulated depreciation			
12	! Investments - mortgage loans			
13	Investments - other		······	
14	Land, buildings, and equipment basis ►			
	Less accumulated depreciation			
15	Other assets (describe ►			
16	Total assets (to be completed by all filers)	0.	96,500.	96,500.
	Accounts payable and accrued expenses			
18				
ء ا				
Liabilities 51 20 21 21				
ig 21				
نا اتنا دورا اتنا	Other liabilities (describe ►			
["	Other habilities (describe			
22	Total liabilities (add lines 17 through 22)	0.	0.	
-   23	Foundations that follow SFAS 117, check here	<u> </u>	<u> </u>	
Se 24	and complete lines 24 through 26 and lines 30 and 31.			
වූ 24	•			
25 ala				
26 70				
or Fund Balan	Foundations that do not follow SFAS 117, check here			
<u>ا</u> ۾	and complete lines 27 through 31.		_	
27 عند ا	• • • • • • • • • • • • • • • • • • • •	0.	0.	
Net Assets		0.	0.	
Ž 29	• • • • • • • • • • • • • • • • • • • •	0.	96,500.	
2 30	Total net assets or fund balances	0.	96,500.	
31	Total liabilities and net assets/fund balances	0.	96,500.	
Par	Analysis of Changes in Net Assets or Fund E	Ralances		
rdi	Like :			
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)		1	
•	er amount from Part I, line 27a		2	96,500.
	er increases not included in line 2 (itemize)	•	3	0.
	d lines 1, 2, and 3		4	96,500.
	creases not included in line 2 (itemize)	•	5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	. 6	96,500.
		· · · · · · · · · · · · · · · · · ·		Form <b>990-PF</b> (2010)

023511 12-07-10

(a) List and des	s and Losses for Tax on I cribe the kind(s) of property sold (e warehouse, or common stock, 200 st	g , real estate,	income	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a		······································		D - Dollation	1	
	ONE	<del></del>		·		
C			<del>-</del>			
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (los (e) plus (f) minus	
<u>a</u>						<u> </u>
b		+				
C	<del></del>				<del></del>	
d	<del></del>			-		
Complete anhy for accets about	ung gain is calumn (h) and award by	the foundation	nn 10/21/60		//\ O=i== /O=1 /F\ ===	
Complete only for assets snow	ring gain in column (h) and owned by				(I) Gains (Col (h) gai col (k), but not less th	n minus an -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		Losses (from col	(h))
<u>a</u>						
<u>b</u>						
<u>C</u>		-		+	····-	
<u>d</u>						
<u>e</u>				<u> </u>		
2 Capital gain net income or (net o		er in Part I, line 7 ·0- in Part I, line 7		} 2		
3 Net short-term capital gain or (le If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) a 3. column (c)	and (6)				
If (loss), enter -0- in Part I, line	8			<u> </u>		
Part V Qualification	Under Section 4940(e) fo	r Reduced	Tax on Net	Investment	Income	
If section 4940(d)(2) applies, leave	ate foundations subject to the section this part blank ection 4942 tax on the distributable a lalify under section 4940(e) Do not c	mount of any yea	ır in the base pe			N/A
	n each column for each year; see inst			es		·
(a) Base penod years Calendar year (or tax year begin	(b)		<u></u>	(c) oncharitable-use ass		(d) ibution ratio ivided by col. (c))
2009						
2008		ĺ				
2007						
2006						
2005						
<b>- -</b>						
2 Total of line 1, column (d)	2				2	
	e 5-year base penod - divide the total	I on line 2 by 5, o	r by the number	r of years		
the foundation has been in exist	ence it less than 5 years				3	
4 Enter the net value of nonchanta	able-use assets for 2010 from Part X	, line 5			4	
5 Multiply line 4 by line 3				-	5	
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)				6	
7 Add lines 5 and 6					7	
8 Enter qualifying distributions fro	om Part XII, line 4				. 8	·
If line 8 is equal to or greater that See the Part VI instructions	an line 7, check the box in Part VI, lin	ie 1b, and comple	ete that part usin	ig a 1% tax rate		

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see ir	ıstru	ctio	ns)
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 instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	of Part I, line 27b					
<sub>C</sub>	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0.
	Add lines 1 and 2	3				0.
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-	5				0.
6	Credits/Payments					· · ·
	2010 estimated tax payments and 2009 overpayment credited to 2010 . 6a					
		1 1				
		1 1				
	Tax paid with application for extension of time to file (Form 8868)	1				
	Backup withholding erroneously withheld	┨ _ ┃				0.
7	Total credits and payments Add lines 6a through 6d	7				<u> </u>
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	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2011 estimated tax ► Refunded ►	11				
	rt VII-A Statements Regarding Activities		<del>,</del>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in	1		Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		. [	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?		[	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ O . (2) On foundation managers ▶ \$ O .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶ \$ 0.		İ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities.		F	-,,,,,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	or	Ī			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		. [	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	ſ	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	Ň,	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	·	5		X
•	If "Yes," attach the statement required by General Instruction T.		·	<del></del>		******
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
•	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law				
	remain in the governing instrument?		1	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	•	ŀ	7	X	
•		•	ļ	•		
0-	If "Yes," complete Part II, col. (c), and Part XV.		ľ			
49	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	KS					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		ŀ		v	
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	mver	, }	9		<u>X</u> _
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	TMT	<u> </u>	10	X	

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	· • • · · · · · · · · · · · · · · · · ·
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
any voter registration drive?		<u></u>	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fall to qualify und	der the exceptions described	ın Regulations	/-	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?	•	I/A L Ye	es L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5 <i>(d)</i> .			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		L Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		<del></del>		7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly	y 	
1 List all officers, directors, trustees, foundation managers and their		T	1 4 m	<del>,</del>
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CRAIG L VOSBURGH	TRUSTEE			
533 DANBURY LANE				
TOPEKA, KS 66606	0.00	0.	0.	0.
				i
				İ
	•			
		l		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	T-7-10-	
(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	•			
	·			
		<u></u>		
Total number of other employees hald over \$50,000				0

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ightharpoons

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	48,250.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	48,250.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	48,250.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	724.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	47,526.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	1,309.
P	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,309.
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)		
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,309.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,309.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,309.
P	art XII Qualifying Distributions (see 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	0.
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	· <del>-</del> · ·
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		· <del>// ===</del>
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation of	malifies for the	section

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4940(e) reduction of tax in those years

Form 990-PF (2010) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) 2010 Corpus Years prior to 2009 2009 1 Distributable amount for 2010 from Part XI, 1,309. line 7 2 Undistributed income, if any, as of the end of 2010 0 a Enter amount for 2009 only b Total for prior years 0. 3 Excess distributions carryover, if any, to 2010 a From 2005 **b** From 2006 c From 2007 d From 2008 e From 2009 0. f Total of lines 3a through e 4 Qualifying distributions for 2010 from 0. Part XII, line 4 ►\$ 0 a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 0. d Applied to 2010 distributable amount 0. e Remaining amount distributed out of corpus 0 0. 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: 0 a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 .... b Prior years' undistributed income. Subtract 0. 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 instr

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)

8 Excess distributions carryover from 2005 not applied on line 5 or line 7

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

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	"			_

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	L. VOSBURGH		<del></del>		) 19394 Page 1
Part XIV Private Operating	Foundations (see in	structions and Part VII	l-A, question 9)	N/A	<del> </del>
1 a If the foundation has received a ruling	g or determination letter tha	t it is a private operating			
foundation, and the ruling is effective	for 2010, enter the date of $% \left\{ 1,2,\ldots ,2\right\}$	the ruling	. ▶	,	
<b>b</b> Check box to indicate whether the for	ınd <u>ation is a private operati</u>	ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 10000	<del>.</del>
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII.	ı				
line 4 for each year listed					<del>                                     </del>
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities .				ļ	ļ
e Qualifying distributions made directly	1				
for active conduct of exempt activities	S				
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					<del>                                     </del>
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)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
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					
Part XV Supplementary In			if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Founda	tion Managers:				
a List any managers of the foundation			ributions received by the	o foundation before the clo	se of any tax
year (but only if they have contributed	i more than \$5,000) (See s	section 507(a)(2) )			
NONE		· · · · · · · · · · · · · · · · · · ·	_ <u>-</u>		
<ul> <li>b List any managers of the foundation of other entity) of which the foundation</li> </ul>			(or an equally large port	on of the ownership of a p	artnership or
• • • • • • • • • • • • • • • • • • •	iias a 10 /0 of greater liftere	ot .			
NONE					
2 Information Regarding Contrib			-		
Check here L If the foundation the foundation makes gifts, grants, et					
	<del></del>			ompieto items za, b, c, an	3 0
a The name, address, and telephone nu CRAIG L VOSBURGH CH			400162260		
533 DANBURY LANE, T					
b The form in which applications should			rould include:		
c Any submission deadlines					
d Any restrictions or limitations on awa	rds, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
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)	or substantial contributor	recipient		
a Paid during the year				-
		<u> </u>		
NONE				
<u>-</u>			·	
				T.
•				
Total			▶ 3a	0.
b Approved for future payment				
NONE				
		<u> </u>		<del></del>
Total			<b>▶</b> 3b	0.

CRAIG L. VOSBURGH CHARITABLE TRUST

nter gross amounts unless otherwise indicated	Unrelated t	ousiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue	code			· · · · · · · · · · · · · · · · · · ·	
ab	_		+++	<del></del>	
		<del></del>			
				<del></del>	
e		·	+-		
·	_			· · · · · · · · · · · · · · · · · · ·	
g Fees and contracts from government agencies  Membership dues and assessments		<del> </del>	-		<del></del>
Interest on savings and temporary cash					
Investments					
Dividends and interest from securities					<del></del>
Net rental income or (loss) from real estate			-		
	-				
a Debt-financed property					•
b Not debt-financed property			<del>-    </del>		
Net rental income or (loss) from personal					
property		<del></del>		· · ·	<del></del>
Other investment income					<u> </u>
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C	1 1				
d			i l		
d					
e		(	).	0.	
e Subtotal Add columns (b), (d), and (e)	_		0.		
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			0.	0.	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations				13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations				13	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activities	to the Accom	nplishment of	Exempt P	13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activities	s to the Accorr	nplishment of	Exempt F	13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  the worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activities  ne No.  Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  the worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activities  ne No.  Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations  art XVI-B  Relationship of Activities  ne No. Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  ine No. Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations  Part XVI-B  Relationship of Activities  ine No.  Explain below how each activity for which in	s to the Accorr	nplishment of	Exempt F	13	

		Exempt Organ	izations					
1	Did the or		rectly engage in any of the followi	ng with any other organization	on described in section 501(c) of		Yes	No
	the Code	(other than section 501(c)	)(3) organizations) or in section 5	27, relating to political organ	nizations?			
а	Transfers	from the reporting founda	ation to a noncharitable exempt o	rganization of				İ
	(1) Cash					1a(1)		Х
	(2) Other	assets			-	1a(2)		X
b	Other tran	sactions						
	(1) Sales	of assets to a noncharital	ble exempt organization			1b(1)		X
	(2) Purch	nases of assets from a nor	ncharitable exempt organization			1b(2)		Х
		il of facilities, equipment, (	· · ·			1b(3)		X
		bursement arrangements			•	. 1b(4)	_	X
		s or loan guarantees				1b(5)		X
		•	mbership or fundraising solicitati	ons		1b(6)		X
C			iling lists, other assets, or paid er		•	10		Х
	-		=		ways show the fair market value of t		ets.	
_					ie in any transaction or sharing arra		,	
			other assets, or services received		,	• • • • • • • • • • • • • • • • • • • •		
a) L	ne no	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transa	actions, and sharing ar	rangeme	nts
			N/A	· · · · · · · · · · · · · · · · · · ·				
	ĺ							
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20	le the four	adation dispaths or indispat	the affiliated with or related to on	n ar mara tay-ayamat araani	zatione decombed			
24		· · · · · · · · · · · · · · · · · · ·	tly affiliated with, or related to, one r than section 501(c)(3)) or in sec	-	zations described	Yes	T	] No
		omplete the following sche		XIIII 327 /		res	ليك.	טוו ר
ט	ii res, co	(a) Name of org		(b) Type of organization	(c) Description o	of relationship		
		N/A	anzabon	(b) Type of organization	(c) bescription e	n relationship		
		N/A				· .		
			-					
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		Signature of officer or tru		Date	Trtle Charle	4 DTIN		
		Print/Type preparer's na	ame Preparer's s	signature		f PTIN		
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Pa		1/006LASC	MILLER CL	rughed un	8/3/11			
	eparer	Firm's name MIL	LER HAVILAND KE	ETTER PC, PA	Firm's EIN ▶			
Us	e Only			<u>'</u>				
			01 W. 47TH PLAC					_
		WE.	STWOOD, KS 6620	)5	Phone no	(913)432	<u>-27</u>	27
					Form <b>990</b>	-PF	2010)	

### Schedule B (Form 990, 990-EZ, or 990-PE)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2010

Name of the organization

Employer identification number

CRAIG L. VOSBURGH CHARITABLE TRUST 27-3019394 Organization type (check one): Filers of: Section: \_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** I For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

### CRAIG L. VOSBURGH CHARITABLE TRUST

27-3019394

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JOHN B VOSBURGH  1805 FOREST BLVD  TULSA, OK 74114	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	PATRICIA J VOSBURGH  1805 FOREST BLVD  TULSA, OK 74114	\$\$	Person X Payroll  Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II ff there is a noncash contribution.)

of Part II

Name of organization

Page of of Employer identification number

### CRAIG L. VOSBURGH CHARITABLE TRUST

27-3019394

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) of Part III Employer identification number Name of organization CRAIG L. VOSBURGH CHARITABLE TRUST 27-3019394

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

Relationship of transferor to transferee

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

•				
CRAIG	L.	VOSBURGH	CHARITABLE	TRUST

27-3019394

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	1
NAME OF CONTRIBUTOR	ADDRESS		
JOHN B VOSBURGH	1805 FOREST BLVD TULSA, OK 74114		
PATRICIA J VOSBURGH	1805 FOREST BLVD TULSA, OK 74114		

### Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

Internal Hever	nue Service	File a sepa	rate appi	ication for each return.			
● If you a	re filing for an <b>Auto</b>	matic 3-Month Extension, complet	e only Pa	rt I and check this box		. •	X
If you a	re filing for an <b>Addi</b>	tional (Not Automatic) 3-Month Ext	tension, c	complete only Part II (on page 2 of this	form).		
Do not co	omplete Part II uni	ess you have already been granted a	n automa	tic 3-month extension on a previously fi	led For	m 8868.	
Electronia	c filing (e-file). You	ı can electronically file Form 8868 if y	ou need a	3-month automatic extension of time to	o file (6	months for a corpo	oration
required to	o file Form 990-T), o	or an additional (not automatic) 3-mor	nth extens	ion of time. You can electronically file F	orm 88	368 to request an ex	dension
of time to	file any of the form	s listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for Trans	sfers A	Associated With Cer	taın
Personal l	Benefit Contracts, v	which must be sent to the IRS in paper	er format	(see instructions). For more details on ti	he elec	tronic filing of this f	orm,
visit www.	irs.gov/efile and cli	ck on e-file for Chanties & Nonprofits.					
Part I	Automatic	3-Month Extension of Time	Only su	bmit original (no copies needed).			
A corpora	tion required to file	Form 990-T and requesting an auton	natic 6-mo	onth extension - check this box and com	plete		
Part I only	,					<b>&gt;</b>	
	orporations (includ ome tax returns.	ing 1120-C filers), partnerships, REMi	ICs, and ti	rusts must use Form 7004 to request an	exten	sion of time	
Type or	Name of exempt	organization			Employer identification number		
<b>print</b> File by the	CRAIG L.	VOSBURGH CHARITABI	LE TRU	JST	2	7-3019394	
due date for filing your	Number, street, a 533 DANBI	and room or suite no. If a P.O. box, se URY LANE	ee instruct	tions.			
return See instructions	City, town or pos	st office, state, and ZIP code. For a fo KS 66606	reign add	ress, see instructions.			
Enter the	Return code for the	e return that this application is for (file	a separa	te application for each return)	-		0 4
Application	on		Return	Application			Return
ls For			Code	ls For		<u></u>	Code
Form 990			01	Form 990-T (corporation)			07
Form 990	·BL		02	Form 1041-A			08
Form 990	-EZ		03	Form 4720			09
Form 990	·PF		04	Form 5227			10
Form 990	T (sec. 401(a) or 40	08(a) trust)	05	Form 6069			11
Form 990	T (trust other than		06	Form 8870			12
	ocks are in the care one No. ► 785	CRAIG L. VOSBUR of ► 533 DANBURY LN -273-3921		PEKA, KS 66606			
		ot have an office or place of business	s in the Un				
	•			emption Number (GEN) . If the	ıs ıs fo	r the whole group, c	heck this
_				ch a list with the names and EINs of all			
1 I red		3-month (6 months for a corporation	required 1	to file Form 990-T) extension of time unt tion return for the organization named a	til		<u></u>
	or the organization's		. v. g				
▶[	calendar year _	or					
▶□	X tax year begini	JUN 14, 2010	, an	d ending <u>DEC 31, 2010</u>		·	
2 If th	e tax year entered  Change in accou	in line 1 is for less than 12 months, cl inting period	heck reas	on: X înitial return Fina	al retur	n	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						•	0.
nonrefundable credits. See instructions.				notice debte and date of the	3a	\$	<del>••</del>
		Form 990-PF, 990-T, 4720, or 6069,			٠.	<b>,</b>	Λ
	mated tax_payment	s made. Include any prior year overp		llowed as a credit.	3b	\$	0.
		A Residue Annual Control Control		h ship forms of positional	1		
		t line 3b from line 3a. Include your pa onic Federal Tax Payment System). S			3c	\$	0.

LHA

For Paperwork Reduction Act Notice, see Instructions.