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990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as 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 For calendar year 2010, or tax year beginning Sep 20 2010 , 2010, and ending Dec 31 G Check all that apply X Initial return I Initial Return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number MICHAEL L AND MARGIE BENNETT FOUNDATION 27-3630915 Number and street (or P O box number if mail is not delivered to street address) Room/surte В Telephone number (see the instructions) 4280 SERGEANT RD STE 250 (712) 266-3676 City or town State ZIP code С If exemption application is pending, check here SIOUX CITY IA 51106 D 1 Foreign organizations, check here Check type of organization: X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation here and attach computation If private foundation status was terminated Ε Fair market value of all assets at end of year J Accounting method: X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 2,848,841 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books for charitable income ıncome columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions).) Contributions, gifts, grants, etc, received (att sch) 2,724,662 Ck ► If the foundn is **not** req to att Sch B Interest on savings and temporary cash investments 1,500. 1,500. Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) L-6a Stmt 287,726 R E V E 6a Net gam/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 3,012,388 287,726 Capital gain net income (from Part IV, line 2) NU Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 3,013,896. 289,234 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits S 16a Legal fees (attach schedule) 90 ADMINISTRATIVE **b** Accounting fees (attach sch) c Other prof fees (attach sch) 50 50 50. 17 Interest 18 Taxes (attach schedule)(see instr.) Depreciation (attach sch) and depletion 20 Occupancy 0 MUN 3 3 21 Travel, conferences, and meetings EXPENSES Printing and publications 22 Other expenses (attach schedule) UCIDENLIT 24 Total operating and administrative expenses. Add lines 13 through 23 50 50. 25 Contributions, gifts, grants paid 150,000. 150,000. Total expenses and disbursements. Add lines 24 and 25 150,050 50 150,050. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 2,863,846. 289,184 **b** Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)

Form 990-PF (2010) MICHAEL L AND MARGIE BENNETT FOUNDATION 27-3630915 Page 2 Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year End of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value 0 Cash - non-interest-bearing 1,863,841 1,863,841. Savings and temporary cash investments Accounts receivable Less: allowance for doubtful accounts Pledges receivable Less: allowance for doubtful accounts 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) Other notes and loans receivable (attach sch) Less allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges 10a Investments - U.S and state government obligations (attach schedule) **b** Investments — corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) 0 1,000,005. 985,000. 11 Investments – land, buildings, and equipment, basis Less: accumulated depreciation (attach schedule) 12 Investments - mortgage loans 13 Investments – other (attach schedule) 14 Land, buildings, and equipment. basis Less accumulated depreciation (attach schedule) 15 Other assets (describe ▶ Total assets (to be completed by all filers see instructions. Also, see page 1, item I) 0 2,863,846. 2,848,841. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F E N T D Unrestricted . . . 25 Temporarily restricted 26 Permanently restricted A S S E T ► |X Foundations that do not follow SFAS 117, check here В and complete lines 27 through 31. A 27 Capital stock, trust principal, or current funds A S 28 Paid-in or capital surplus, or land, building, and equipment fund C 29 2,863,846 Retained earnings, accumulated income, endowment, or other funds 0 Ε S 30 Total net assets or fund balances (see the instructions) 2,863,846 Total liabilities and net assets/fund balances (see the instructions) 0 2,863,846 Part III **Analysis of Changes in Net Assets or Fund Balances** 1 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) 2 Enter amount from Part I, line 27a 2 2,863,846. 3 Other increases not included in line 2 (itemize) 3

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 BAA

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

2,863,846.

2,863,846.

4

5

6

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company) (b) How P - F - F - F - F - F - F - F - F - F -					e (month, day, year)	(d) Date sold (month, day, year)	
1a 235	27 shares of CF	10/19/10	12/30/10				
ь			· · · · ·				
С							
d							
е	_ 						
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) m		
a	3,012,388.		2,72	4,662.		287,726.	
b							
с			·				
<u>d</u>			.				
<u>e</u>	<u>-</u> l						
		g gain in column (h) and owned by			(I) Gains (Col	umn (h)	
	Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	n (i) nny	gain minus column (than -0-) or Losses (fi		
a						287,726.	
b							
<u> </u>		- No 1 - 1					
d		W-10-2-1					
е							
_	al gain net income or (net i	capital loss). If gain, also If (loss), end capital loss) as defined in sections 1222(5) and capital loss).	enter in Part I, line 7 er -0- in Part I, line 7 and (6).	-	2	287,726.	
If gair		8, column (c) (see the instructions).	··· –	-	3		
Part V	:	Section 4940(e) for Reduce	d Tay on Net Investm	ent Incom	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
·		foundations subject to the section 4			<u>. </u>		
Was the fou	foundation does not qualif	on 4942 tax on the distributable among under section 4940(e). Do not con	nplete this part	·-	Yes	☐ No	
1 Enter		each column for each year, see the	instructions before making	any entries			
	(a) ase period years dar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	ssets	(d) Distribution (column (b) divided		
	2009						
	2008						
	2007						
	2006						
	2005						
2 Total	of line 1, column (d)				2		
3 Avera	age distribution ratio for the per of years the foundation	5-year base period — divide the tot has been in existence if less than 5	al on line 2 by 5, or by the years		3		
4 Enter	the net value of noncharit	able-use assets for 2010 from Part)	K, line 5		4		
5 Multip	oly line 4 by line 3				5		
6 Enter	1% of net investment inco	ome (1% of Part I, line 27b)			6		
	ines 5 and 6				7		
8 Enter	qualifying distributions fro	m Part XII. line 4			8		
If line	e 8 is equal to or greater th	an line 7, check the box in Part VI,	line 1b. and complete that	ے ° art using a	% tax rate. See the		

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		7-36309:		F	age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 –	see the instr	uctions)		
1 8	Exempt operating foundations described in section 4940(d)(2), check here	1 1			
	Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)				
ı	Domestic foundations that meet the section 4940(e) requirements in Part V,	1		5,7	<u> 784.</u>
	check here ► and enter 1% of Part I, line 27b				ŧ
•	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	1 1			
_	foundations only Others enter -0-)	2			0.
3	Add lines 1 and 2	3		5,7	784.
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		5,7	784.
6	Credits/Payments·				
	a 2010 estimated tax pmts and 2009 overpayment credited to 2010 6 a	1 1			,
1	Exempt foreign organizations — tax withheld at source 6b				1
	Tax paid with application for extension of time to file (Form 8868) . 6c 50,0	00.			
	d Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7		50,0	000.
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10		44.3	216.
11	and the contract of the contra	▶ 11			216.
	rt VII-A Statements Regarding Activities				
				Yes	No
13	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a		x
!	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1ь		х
	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.				
	c Did the foundation file Form 1120-POL for this year?		. <u>1c</u>		X
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ►\$ (2) On foundation managers ►\$				'
	(1) On the foundation \$ (2) On foundation managers \$ (2) Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	od on			
	foundation managers	011	İ		
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		<u> </u>		
_	,	•			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	ies	3	Ì	x
А	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		x
	b if 'Yes,' has it filed a tax return on Form 990-T for this year?		4b		 ^
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		x
J	If 'Yes,' attach the statement required by General Instruction T		<u> </u>		1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
U	,				1
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	t conflict			
_	with the state law remain in the governing instrument?		6	X	
7		_	7	X	·
8	a Enter the states to which the foundation reports or with which it is registered (see the instructions)				
	IA - Iowa				
	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		۱ ۵.		
	(or designate) of each state as required by General Instruction G^{2} if 'No,' attach explanation .		<u>8b</u>	X	+
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 4942(j)(5) _		
	for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' comp	nete Part XIV	9	 	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the	ır names	10	_ v	

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	990-PF (2010) MICHAEL L AND MARGIE BENNETT FOUNDATION	27-	363091	.5	P	age 5
Part	VII-A Statements Regarding Activities (Continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption. Website address	applicatio	n?	13	х	
14	The books are in care of Michael Bennett Telephone		(712)	266	-367	6
15	Located at • 4280 Sergeant Road, Ste 250 Sioux City IA ZIP + 4 • Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	<u>511</u>	06		<u>-</u>	<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	►	15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other autbank, securities, or other financial account in a foreign country?	hority ove	era 	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the nar foreign country ►	ne of the				
Parl	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		-			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly):		_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			_
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X Yes	X No No			
-	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	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	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is 'Yes' to $1a(1)$ -(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction	ns)?		1 b		x
	Organizations relying on a current notice regarding disaster assistance check here	•	· 📙	ŀ		
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		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					,
а	At the end of tax year 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 , 20			1	ļ	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a	a)(2))(2) to		-		
c	all years listed, answer 'No' and attach statement — see the instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere.	••	2b		
	► 20 , 20 , 20 , 20					
3 a	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			
t	of f 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 approved to the 5-year period to the 5-year period (or longer period approved to the 5-year period to the 5-year period to the 5-year period (or longer period approved to the 5-year period to the 5-year period to the 5-year period (or longer period approved to the 5-year period to the 5-year period to the 5-year period (or longer period approved to the 5-year period to the					
	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)			3b		
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
	Did the foundation make any investment in a prior year (but offer December 21, 1000) (but offer December 21, 1000)					
	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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Part VII-B Statements R 5a During the year did the fol (1) Carry on propaganda,			es for Which Form	14720 May Be Regi	uired (continued)		
(1) Carry on propaganda,	undation						
		-	=	(.	
679 1 Cl		•	_		Yes X	NO	
on, directly or indirect	ly, any v	oter registrat			Yes X	1 1	
(3) Provide a grant to an		ŕ	•	•	Yes X	NO	
	(2), or (3)	, or section	4940(d)(2)? (see instruc	ctions)	Yes X	No	
(5) Provide for any purposeducational purposes,	se other , or for th	than religiou e prevention	s, charitable, scientific, of cruelty to children of	literary, or ranimals?	Yes X	No	
b If any answer is 'Yes' to 5 described in Regulations s (see instructions)?	a(1)-(5), section 5	did any of th 3.4945 or in	ne transactions fail to qua a current notice regardi	ualify under the exception ng disaster assistance	ns	5b	-
Organizations relying on a	a current	notice regar	ding disaster assistance	check here	▶ 🗌		
c If the answer is 'Yes' to que tax because it maintained	uestion 5 expendi	a(4), does th ture respons	ne foundation claim exer ibility for the grant?	mption from the	Yes	No	
If 'Yes,' attach the statem	ent requi	red by Regu	lations section 53 4945-	5(d)			
6a Did the foundation, during on a personal benefit cont	the year	, receive an	y funds, directly or indire	ectly, to pay premiums	Yes X	No	
b Did the foundation, during	-	, pay premit	ims, directly or indirectly	y, on a personal benefit	contract?	6b	X
If 'Yes' to 6b, file Form 88 7a At any time during the tax		as the found	ation a party to a probib	ited tay shelter transact	ion? Yes X	No	
b If yes, did the foundation in	•					7b	
Part VIII Information A	bout C			Foundation Manag			 S,
and Contracto							<u> </u>
1 List all officers, directors	, trustee	s, foundation			ıctions).		
(a) Name and ac	ddress		(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 account, owances
Michael L Bennett 1508 Stoneridge Poi Sioux City		51106	Chairperson 0.00	0.	0.		0.
Margie Bennett							
4508 Stoneridge Poi			Vice Chairperson				
Sioux City	IA	51106	0.00	0.	0.		0.
Mary Weaver			S				
2530 So Cecilia St Sioux City	TA	51106	Secretary 0.00	0.	0.		0.
See Information about Officers, D					<u> </u>		<u> </u>
,							
				0.	0.		0.
2 Compensation of five hig			_				
(a) Name and address of paid more than \$	each em 550,000	ployee	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, owances
NONE							
0							
0							<u>*</u> ,
0							
0							
Total number of other employed	os poid s	vor \$50 000	l	L	<u> </u>		17
BAA	es paid (ver \$50,000	TEEA0306 (7/3/10		F 60	None 0-PF (2010

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E	Mployees
and Contractors (continued)	mpioyees,
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	
	<u>, , , , , , , , , , , , , , , , , , , </u>
Total number of others receiving over \$50,000 for professional services ▶	None
.ist 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. 1 N/A	Expenses
	0.
2	
3	
4	
Part 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	Amount
1 <u>N/A</u>	
	0.
	0.
All other program-related investments See instructions	0.
2	0.
All other program-related investments See instructions	0.

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Part X: Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign found	ations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. a Average monthly fair market value of securities	1a	477,638.
b Average of monthly cash balances	1 b	116,454.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	594,092.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	2	
3 Subtract line 2 from line 1d	3	594,092.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	8,911.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	585,181.
6 Minimum investment return. Enter 5% of line 5	6	5,772.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► ☐ and do not complete this		ntions
1 Minimum investment return from Part X, line 6	1	5,772.
2a Tax on investment income for 2010 from Part VI, line 5	84.	-
b Income tax for 2010. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	5,784.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	0.

Part XII Qualifying Distributions (see instructions)

7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1

4 Recoveries of amounts treated as qualifying distributions

Deduction from distributable amount (see instructions)

5 Add lines 3 and 4

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	150,050.
b Program-related investments – total from Part IX-B	1 b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	150,050.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part 1, line 27b (see instructions)	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	150,050.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
Inne 7 2 Undistributed income, if any, as of the end of 2010				0.
a Enter amount for 2009 only	H			
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				
d From 2008				
e From 2009				
f Total of lines 3a through e	·, ·,			
4 Qualifying distributions for 2010 from Part				
XII, line 4. ► \$ 150,050.		_	-	
a Applied to 2009, but not more than line 2a				· · <u> </u>
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	150,050.			
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:	150 050			
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	150,050.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed 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		0.		
e Undistributed income for 2009 Subtract line 4a from			_	
line 2a Taxable amount — see instructions	1		0.	
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				0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	ŀ	·		
·				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.		L	<u> </u>
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	150,050.			
10 Analysis of line 9				
a Excess from 2006 0.		1		
b Excess from 2007 0 .				
c Excess from 2008 .	1	1		
d Excess from 2009 . 0.	-{			
e Excess from 2010 150,050.		<u> </u>	<u> </u>	Form 990 PF (2010)

Form 990-PF (2010) MICHAEL L AND MA			715 A	27-3630915	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or do is effective for 2010, enter the date of the r	uling .		<u>-</u>		
b Check box to indicate whether the foundation	on is a private ope	rating foundation de:	scribed in section	4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<u> </u>	Prior 3 years		
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:		İ			
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	-				·- <u>-</u>
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(X)X)BXIII)	:				
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Information Regarding Foundation Manag List any managers of the foundation who h close of any tax year (but only if they have Michael L Bennett b List any managers of the foundation who o a partnership or other entity) of which the formation is a second of the foundation of the foundation who or a partnership or other entity) of which the foundation is a second of the foundation who or a partnership or other entity) of which the foundation is a second of the foundation who or a partnership or other entity) of which the foundation is a second or content	ave contributed more contributed more wn 10% or more o	than \$5,000) (See s	section 507(d)(2).) oration (or an equa		
2 Information Regarding Contribution, Gran Check here ► ☒ if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	nakes contributions	to preselected char	itable organizations	s and does not accept nizations under other	unsolicited conditions,
a The name, address, and telephone number	r of the person to v	whom applications sl	hould be addressed	•	
b The form in which applications should be s	submitted and infor	mation and material	s they should includ	le	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograp	phical areas, charitat	ole fields, kinds of i	nstitutions, or other fa	ctors:
		TEEA0310 02/16/11		F	orm 990-PF (20

Part XV. Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor oundation Recipient Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year Morningside College 1501 Morningside Ave Sioux City IA 51106 N/A 50,000. Support Goodwill Industries Wall Street Mission 3100 W 4th St N/A Sioux City IA 51103 Support 50,000. Boys and Girls Home of Sioux City Iowa 2101 Court St N/A Sioux City IA 51102 Support 50,000. Total 3 a 150,000. **b** Approved for future payment **Total** 3 b

PartiXVI A Analysis of Income-Producing Activities

Enter gross	s amounts unless otherwise indicated.	Unrelate	ed business income	Excluder	1 by section 512, 513, or 514	
1 Prog	ram service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions)
b			 			
с						
d						
е	<u> </u>					
f						
g Fees	and contracts from government agencies				1	
2 Mem	bership dues and assessments .					
3 Interes	st on savings and temporary cash investments		:	14	8.	
4 Divid	lends and interest from securities			14	1,500.	
5 Net r	ental income or (loss) from real estate:		一方がいる。	海		
a Debt	-financed property				1	
b Not o	debt-financed property					
6 Net re	ntal income or (loss) from personal property					
7 Othe	r investment income					
8 Gain d	or (loss) from sales of assets other than inventory .			18	287,726.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory .					
	r revenue.	14.14	P. T. P. C.	1000		The state of the s
		<u>, , , , , , , , , , , , , , , , , , , </u>				
	· · · · · · · · · · · · · · · · · · ·	<u> </u>				
				-		
		<u> </u>		 		-
e	· · · · · · · · · · · · · · · · · · ·	<u> </u>		1		<u> </u>
						
12 Subt	otal Add salumas (b) (d) and (a)	1 4 4 4 4 4 5 5 5 5 5 5 5 5				
12 Subt	otal. Add columns (b), (d), and (e)	250 G 34			289,234.	200, 224
13 Tota	I. Add line 12, columns (b), (d), and (e)				289,234.	289,234.
(See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ns.)		· ··	13	289,234.
(See works	I. Add line 12, columns (b), (d), and (e)	ns.)		· ··	13	289,234.
(See works)	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
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(See work) Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.
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See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Barriage Relationship of Activities to the	ns.) Accompl	ishment of Exemp	t Purp	oses 13	289,234.

Form 990-PF (2010) MICHAEL L AND MARGIE BENNETT FOUNDATION 27-3630915 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							1 1	Yes	No
1 Did the o	rganization directly of	or indirectly en	gage in any of the following ner than section 501(c)(3) of	g with any	other organization	7	· · · · · · · ·		
	o political organization		ier triair section 301(c)(3) (луаниган	ons) or in section 52	,			'
a Transfers	from the reporting f	oundation to a	noncharitable exempt org	anızatıon	of:				ľ
(1) Cash	l						1a (1)		X
(2) Othe	r assets			•			1a (2)		X
b Other tra	nsactions:								
' (1) Sales	s of assets to a nonc	haritable exen	npt organization				1 b (1)		x
(2) Purcl	hases of assets from	a noncharitat	ole exempt organization		•		1 b (2)		X
(3) Rent	al of facilities, equipr	ment, or other	assets				1 b (3)		x
(4) Reim	bursement arrangem	nents .					1 b (4)		_X_
(5) Loan	s or Ioan guarantees	i					1 b (5)		X
(6) Perfo	ormance of services of	or membershı <mark>j</mark>	o or fundraising solicitation	s	••		1b(6)		x
c Sharing of	of facilities, equipme	nt, mailing list	s, other assets, or paid em	ployees			1 c		x
d If the one	wor to one of the oh	ovo io IVos I o	amalata tha fallauwaa aaba	ماريات حداد					
the goods	s, other assets, or se	ervices given b	omplete the following sche by the reporting foundation ow in column (d) the value	If the fou	ndation received les	s than faır market	value in	Oī	
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organizati	on	(d) Description of tran	sfers, transactions, and	d sharing arran	ngement	.s
					- "				
		VI							
			···						
describe	d in section 501(c) of	f the Code (oth	ted with, or related to, one ner than section 501(c)(3))	or more to	ax-exempt organiza ion 527?	tions	Yes	s X	No
	complete the followin		427						
(a)	Name of organization	on	(b) Type of organi	zation		Description of re	ationship		
					+				
			· · · · · · · · · · · · · · · · · · ·						
									—
Under p	enalties of periury. I declare	e that I have exam	ned this return, including accompa	nvina schedi	les and statements, and to	the best of my knowled	doe and belief	ıt is true	
Sign Here ► 1	Mary By	of preparer (other	ined this return, including accompa than taxpayer or fiduciary) is based	on all inform	11/14/11	Secretar			
Sign	Print/Type preparer's name		Preparer's signature)		Date	Title	T DTIN		
	'' ' '		rieparer's signature	050	Date 11-15-11	Check if I if	PTIN		
Paid	TERRY LOCKIE		mysoc	<u> </u>	11/10-11	self-employed	P00234	<u> 4040</u>	
Preparer	,	ERRY LOCE		, P.C.		Firm's EIN ►			
Use Only	l Firm's address 🕒 💳	04 JACKSO			F440F 444		a. c==	000	
	<u>S</u>	IOUX CITY	<u> </u>	IA	51105-1916	Phone no (71	•		
BAA							Form 99	}0-PF	(2010)

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

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
MICHAEL L AND MARGIE BENNETT	FOUNDATION	27-3630915
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	private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Get Note . Only a section 501(c)(7), (8), or (10) organization	neral Rule or a Special Rule. nization can check boxes for both the General Rule and a S	necial Rule. See instructions
	meanor can check boxes for both the deficial full and a c	pecial Nate 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		
For a section 501(c)(3) organization filing For	orm 990 or 990-EZ, that met the 33-1/3% support test of the	regulations under sections
(2) 2% of the amount on (i) Form 990. Part	I from any one contributor, during the year, a contribution of VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I an	the greater of (1) \$5,000 or
	ation filing Form 990 or 990-EZ, that received from any one	
aggregate contributions of more than \$1,000) for use <i>exclusively</i> for religious, charitable, scientific, litera	ry, or educational purposes, or
the prevention of cruelty to children or anim.	, , , , , , , , , , , , , , , , , , , ,	
For a section 501(c)(7), (8), or (10) organization for use exclusively for religious	ation filing Form 990 or 990-EZ, that received from any one s, charitable, etc, purposes, but these contributions did not a	contributor, during the year,
If this box is checked, enter here the total co	ontributions that were received during the year for an <i>exclus</i>	ively religious, charitable, etc.
purpose Do not complete any of the parts u	nless 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 Sch	iedule B (Form 990, 990-EZ, or
990-PF) but it must answer 'No' on Part IV, line	2 of their Form 990, or check the box on line H of its Form requirements of Schedule B (Form 990, 990-EZ, or 990-PF	990-EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act Notice, se		<u> </u>
990EZ, or 990-PF.	e the instructions for Form 330, Schedule B	(Form 990, 990-EZ, or 990-PF) (2010)

nployer identification nu

MICHAE	EL L AND MARGIE BENNETT FOUNDATION	' -	630915
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Michael Bennett 4508 Stoneridge Pt Sioux City IA 51106	\$2,724,662.	Person Payroli Noncash X (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)
(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)

Employer Identification number 27-3630915

MICHAEL L AND MARGIE BENNETT FOUNDATION

Part II Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	23527 Shares of CF Industries Holdings Inc stock		
		\$ 2,724,662.	10/19/10
(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
		<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
·		ş	

Form 990-PF Part I, Line 6a

Name

Net Gain or Loss From Sale of Assets

2010

Employer Identification Number

MICHAEL L AND MARGIE BENNETT FOUNDATION 27-3630915 Asset Information: Description of Property: CF Industries stock **Date Acquired** 10/19/10 How Acquired: Donated Date Sold: various Name of Buyer: Sales Price: **3,012,388.** Cost or other basis (do not reduce by depreciation) . 2,724,662 Sales Expense: Valuation Method. 287,726. Accumulation Depreciation Total Gain (Loss): Description of Property: Date Acquired: How Acquired: Date Sold Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation: Description of Property. Date Acquired How Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense. Valuation Method. Total Gain (Loss): Accumulation Depreciation Description of Property: Date Acquired How Acquired. Date Sold: Name of Buyer Sales Price: Cost or other basis (do not reduce by depreciation) Sales Expense: Valuation Method: Total Gain (Loss) Accumulation Depreciation Description of Property: Date Acquired: How Acquired: Date Sold Name of Buyer: Sales Price. Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method: Total Gain (Loss): Accumulation Depreciation Description of Property. How Acquired. Date Acquired: Date Sold: Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price. Sales Expense: Valuation Method Total Gain (Loss) Accumulation Depreciation: Description of Property How Acquired Date Acquired. Date Sold: Name of Buyer Sales Price: Cost or other basis (do not reduce by depreciation) Sales Expense: Valuation Method: Total Gain (Loss): Accumulation Depreciation Description of Property: Date Acquired: How Acquired Date Sold. Name of Buyer Sales Price: Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Total Gain (Loss): Accumulation Depreciation

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business Michael J Bennett 20616 N. 74th St Scottsdale AZ 85255 Person X Business Christopher	Treasurer 0.00	0.	0.	0.
16359 W St Omaha NE 68135	Director 0.00	0.	0.	0.

of	ta	l				

0.	0.	0.

(Rev January 2011)

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

OMB No 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box **►** |x| • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Employer identification number Type or print MICHAEL L AND MARGIE BENNETT FOUNDATION 27-3630915 File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See instructions 4280 SERGEANT RD, STE 250 City, town or post office, state, and ZIP code For a foreign address, see instructions SIOUX CITY 51106 IA Enter the Return code for the return that this application is for (file a separate application for each return) 04 Application Return Application Return Is For Code is For 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 (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of • Michael Bennett Telephone No ► (712) 266-3676 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time ___, 20 _11 __, to file the exempt organization return for the organization named above The extension is for the organization's return for calendar year 20 x tax year beginning Sep 20 , 20 10 , and ending Dec 31 , 20 10 . 2 If the tax year entered in line 1 is for less than 12 months, check reason X Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a|\$ nonrefundable credits. See instructions 50,000.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

BAA For Paperwork Reduction Act Notice, see Instructions.

payments made Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System) See instructions

Form 8868 (Rev 1-2011)

0.

50,000.

3Ы\$

Form 8868	(Rev 1-2011) MICHAEL L BENNETT AN	ID MARGI	E BENNETT FOUNDAT	ION 27-3630915	Page 2			
• If you a	are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and ch	neck this box	► 🛛			
Note. Only	complete Part II if you have already been granted a	an automati	c 3-month extension on a pre	eviously filed Form 8868.	_			
• If you a	are filing for an Automatic 3-Month Extension, com	plete only F	Part I (on page 1).					
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time, Only file the orio	inal (no copies needed).				
<u></u>	Name of exempt organization			Employer identification number				
7								
Type or print	MICHAEL L BENNETT AND MARGIE B	ENNETT	FOUNDATION	27-3630915				
p	Number, street, and soom or suite number if a P.O. box, see inst			,=				
File by the extended								
due date for filing the	4280 SERGEANT RD, STE 250							
return. See instructions,	City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
II di decional	SIOUX CITY		106					
	10100K CIII	IM JI	.100					
Enter the B	Return code for the return that this application is for	(file a cona	rate application for each retu	ura)	. 04			
Citter the r	teturi code for the return that this application is for	(ine a Sepa	rate application for each retu	#III)	104			
A!:!:			[A1!A!		Datum			
Application	П	Return Code	Application Is For		Return Code			
			314 N + 801271 P 21478	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	W3/21			
Form 990	DI .	01	· · · · · · · · · · · · · · · · · · ·	232 - 14				
Form 990-E		02	Form 1041-A		80			
Form 990-6		03	Form 4720		09			
Form 990-F		04	Form 5227		10			
	T (section 401(a) or 408(a) trust)	05	Form 6069		11			
	T (trust other than above)	06	Form 8870	12				
	not complete Part II if you were not already grante	d an automa	atic 3-month extension on a	previously filed Form 8868.				
	oks are in care of Michael Bennett							
		FAX No >						
	rganization does not have an office or place of busi				_			
	s for a Group Return, enter the organization's four o							
whole grou	p, check this box \dots $ hildsymbol{arphi}$. If it is for part of the \underline{c}	group, check	this box 🏲 🔲 and attach a	a list with the names and EINs of	ali			
	he extension is for.							
	uest an additional 3-month extension of time until							
5 For c	alendar year , or other tax year beginning	g <u>Sep 3(</u>			<u>0</u> .			
6 If the	tax year entered in line 5 is for less than 12 month	s, check rea	ason: X Initial retu	rn 🔲 Finat return				
	Change in accounting period							
7 State	in detail why you need the extension Addit:	ional_t	ime is needed for	preparation				
of	accurate return for the initial	year -	including pending	preparation of Form	1023 -			
App	olication for Exempt Status							
Ba If this	s application is for Form 990-BL, 990-PF, 990-T, 47	20. or 6069.	enter the tentative tax, less	any				
попге	efundable credits. See instructions				40,204.			
b If this	s application is for Form 990-PF, 990-T, 4720, or 60	69, enter ar	ny refundable credits and est	imaled tax	-			
	nents made. Include any prior year overpayment allo Form 8868			01.000.	50,000.			
					30,000.			
c Balai	nce due. Subtract line 8b from line 8a. Include your PS (Electronic Federal Tax Payment System). See ii	payment wi nstructions	ith this form, if required, by u	8c \$	0.			
			d Verification					
Under nenallie				I of my knowledge and belief, it is true.				
correct, and co	es of perjury, I declare that I have examined this form, including accommodate, and that I am authorized to prepare this form.	433						
Signature 🕨	Title 🕨			Dalo 🟲				
BAA				Form 886B (F	Rev 1-20111			

BAA