

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2010

OMB No 1545-0052

For calendar year 2010, or tax year beginning and ending G Check all that apply: Initial return Final return Initial return of a former public charity Amended return Address change Name change Name of foundation A Employer identification number THE RUTHMERE FOUNDATION C/O KEYBANK TRUST DEPARTMENT 32-0037914 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 101 SOUTH MAIN STREET 574-264-0330 City or town, state, and ZIP code C If exemption application is pending, check here ELKHART, IN 46516 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) F If the foundation is in a 60-month termination 3,270,259. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Part I Analysis of Revenue and Expenses (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income 130,628. Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2,427.STATEMENT 2.427. 2.427. 58,296.STATEMENT 58,296. 58,296 Dividends and interest from securities 5a Gross rents 825. 825. 825.STATEMENT 825. b Net rental income or (loss) <4,902. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 895,123. 0. Capital gain net income (from Part IV, line 2) 21,896 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances 22. STATEMENT b Less Cost of goods sold 22. c Gross profit or (loss) 22 11 Other income 42,045. 0 42,045.STATEMENT 5 229,341. 12 Total Add lines 1 through 11 61,548 125,511 48,000. 0 0. 48,000. Compensation of officers, directors, trustees, etc. 13 108,355. Other employee salaries and wages Ο. 0. 108,355. 15 Pension plans, employee benefits 11,433. 0 . 0 11,433. Expenses 4,926 16a Legal fees STMT 6 0. 0. 4,926. STMT 7 **b** Accounting fees 9,880. 0. 0 9,880. c Other professional fees STMT 8 31,180. 17.466. 0. 13,714. and Administrative 17 Interest 1,882. 0. 0 1,882. STMT 9 12,266. 0 18 0. 12,266. Depreciation and depletion 11,200. 0. 0. 19 RECEIVED 16,905. 16,905. 20 Occupancy 0. 0. Travel, conferences, and meetings 10,907 0. 0. 10,907. 21 Printing and publications2 Ö 8,557 0 0 8,557. 22 Other expenses 167,861 23 0. 0 167,861. Total operating and administrative = 24 expenses. Add lines 13 through 23 <u>443,352</u> 17,466 0 414,686. 25 Contributions, gifts, grants paid 2,420 2,420. Total expenses and disbursements 445,772 417,106. Add lines 24 and 25 17,466 0 27 Subtract line 26 from line 12 <216,431 2 Excess of revenue over expenses and disbursements 44,082 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) 125,511

THE RUTHMERE FOUNDATION

Form 990-PF (2010) C/O KEYBANK TRUST DEPARTMENT

32-0037914

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	End of year			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1 Cash - non-interest-bearing	20,708.	25,247.	25,247.			
2 Savings and temporary cash investments						
3 Accounts receivable ►						
Less: allowance for doubtful accounts	17,799.					
4 Pledges receivable ► 40,000.						
Less: allowance for doubtful accounts	63,000.	40,000.	40,000.			
5 Grants receivable	00,0001					
6 Receivables due from officers, directors, trustees, and other						
disqualified persons						
7 Other notes and loans receivable						
Less: allowance for doubtful accounts	1					
o l	0 506	0.260	0 260			
9 Prepaid expenses and deferred charges	9,586.	9,260.	9,260.			
102 investments 20.5, and state government obligations	700 224	CO1 000	705 405			
b Investments - corporate stock STMT 12	708,324.	601,092.	795,405.			
c Investments - corporate bonds STMT 13	50,172.	0.	0.			
11 Investments - land, buildings, and equipment basis						
Less accumulated depreciation						
12 Investments - mortgage loans	4 006 000					
13 Investments - other STMT 14	1,306,337.	1,205,374.	1,229,426.			
14 Land, buildings, and equipment: basis ► 441, 284.						
Less accumulated depreciation 158,898	44,649.	282,386.				
15 Other assets (describe ► STATEMENT 15)	1,565,126.	888,505.	888,505.			
16 Total assets (to be completed by all filers)	3,785,701.	3,051,864.	3,270,259.			
17 Accounts payable and accrued expenses	13,653.	10,428.				
18 Grants payable						
g 19 Deferred revenue						
20 Loans from officers, directors, trustees, and other disqualified persons						
Deterred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable Other habilities (decembs 5 and 5 a		<u>83,372.</u>				
22 Other liabilities (describe STATEMENT 16)	0.	1,990.				
			:			
23 Total liabilities (add lines 17 through 22)	13,653.	95,790.				
Foundations that follow SFAS 117, check here						
and complete lines 24 through 26 and lines 30 and 31						
24 Unrestricted	3,772,048.	2,956,074.				
25 Temporarily restricted						
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here						
Foundations that do not follow SFAS 117, check here						
and complete lines 27 through 31.						
27 Capital stock, trust principal, or current funds						
28 Paid-in or capital surplus, or land, bldg., and equipment fund						
Retained earnings, accumulated income, endowment, or other funds						
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	3,772,048.	2,956,074.				
-						
31 Total liabilities and net assets/fund balances	3,785,701.	3,051,864.				
Part III Analysis of Changes in Net Assets or Fund I	Ralances					
1 Total net assets or fund balances at beginning of year - Part II, column (a), lin	e 30					
(must agree with end-of-year figure reported on prior year's return)		1	3,772,048.			
2 Enter amount from Part I, line 27a		2	<216,431.			
3 Other increases not included in line 2 (itemize)		3	0.			
4 Add lines 1, 2, and 3		4	3,555,617.			
5 Decreases not included in line 2 (itemize)	SEE STA	ATEMENT 11 5	599,543.			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II,		6	2,956,074.			
	. 1, 14		Form 990-PF (2010)			

32-0037914

Part IV Capital Gains	and Lo	osses for Tax on In	vestmen	t Income						
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						How acquired - Purchase - Donation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
12 SHORT TERM LOS	SES					P	VARI	ous	VARIOUS	
b LONG TERM LOSS	ES					P	VARI		VARIOUS	
c COMMON TRUST F	UND	GAIN				P	VARI	OUS	VARIOUS	
d CAPITAL GAIN D	IVID	ENDS				P	VARI	OUS	VARIOUS	
e COMMON TRUST F	UND	GAIN			<u> </u>	P	VARI	OUS	VARIOUS	
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus		
a 60,065.	_			47,61					12,450.	
b 805,182.				852,41	١0.				<47,228.	
c 9,446.									9,446.	
d 616.				 .					616.	
<u>e</u> 19,814.									19,814.	
Complete only for assets showing	ng gain in						(I) Gains (C			
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			ol. (k), but i Losses	(from col.		
<u>a</u>									12,450.	
_b						_			<47,228.	
<u>C</u>									9,446.	
<u>d</u>									616.	
<u>e</u>									19,814.	
2 Capital gain net income or (net ca	ıpıtal loss	$\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases}$	n Part I, line In Part I, line	7 7	}	2			<4,902.	
3 Net short-term capital gain or (los	ss) as de	•								
If gain, also enter in Part I, line 8,			(-/-] [
If (loss), enter -0- in Part I, line 8 Part V Qualification U		Section 4940(e) for				3			21,896.	
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quarted.	tion 4942 lify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	art.					Yes X No	
1 Enter the appropriate amount in (a)	each coil	· · · · · · · · · · · · · · · · · · ·	uctions before	making any entri					(4)	
Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dis		Net value of no		ritable-use asset		(001. (b) divided by 001. (0))		
2009			7,597.			<u>,940,71</u>			.168802	
2008			<u>9,559.</u>			,399,58			.158177	
2007			8,177.			,901,43			.123448	
2006			<u>7,859.</u>			<u>,922,26</u>			.112193	
2005		28	<u>5,941.</u>		4	<u>,407,40</u>	2.	ľ	.064877	
2 Total of line 1, column (d)							2_		.627497	
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	r of ye	ars	3		.125499	
4 Enter the net value of noncharitat	ole-use as	ssets for 2010 from Part X,	line 5				4_		2,045,055.	
5 Multiply line 4 by line 3							_ 5	 -	256,652.	
6 Enter 1% of net investment incor	ne (1% o	f Part I, line 27b)					6		441.	
7 Add lines 5 and 6							7		257,093.	
8 Enter qualifying distributions from							8		417,106.	
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, c	heck the box in Part VI, line	1b, and comp	olete that part usir	ng a 1	% tax rate.				

_ •	THE RUTHMERE FOUNDATION			_	
	990-PF (2010) C/O KEYBANK TRUST DEPARTMENT		<u>003791</u>		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	or 4948	- see instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1_1_		4	41.
	of Part I, line 27b		•		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	İ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u>0.</u>
3	Add lines 1 and 2	3_		4	41.
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	_	4	41.
6	Credits/Payments:	_			
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1, 23	<u>5.</u>			
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d	7		1,2	<u>35.</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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10	ļ		94.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	▶ 11	<u> </u>	•	0.
	art VII-A Statements Regarding Activities			lV	I NI -
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter	vene in		res	No
	any political campaign?		<u>1a</u>	+	X
D	Did it spend more than \$100 during the year (either directly) for political purposes (see instructions for definition	•	<u>1b</u>	+-	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publications of the activities and copies of any materials publications.	ished or			
	distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?		<u>1c</u>	+ -	X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u>0.</u>			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				1
_	managers. • \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	+	X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporate	on, or			٠,,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	 	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		1/3 48		_X_
_	of "Yes," has it filed a tax return on Form 990-T for this year?	IV	I/A 4b	-	77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	╅┈┈	X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or Pu state legislation that effectively amende the governing instrument on that an amendatory discretizes that conflict with the	-4-4- 1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the remaining the source and the source and the source are the source are the source and the source are the source and the source are t	state law		7.7	
7	remain in the governing instrument?		6	X X	├
′	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
0.	If "Yes," complete Part II, col. (c), and Part XV				-
σa	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	IN				
D	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			37	
^	of each state as required by General Instruction G? If "No," attach explanation	1	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	caiendar		4.	
40	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	X	- -
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	L	<u> </u>

THE RUTHMERE FOUNDATION			
Form 990-PF (2010) C/O KEYBANK TRUST DEPARTMENT 32-003	7914	1	Page 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 application?	13	X	
Website address ► N/A			
14 The books are in care of ► KEYBANK TRUST DEPARTMENT Telephone no. ► 574-2	95-2	000	
Located at ► 101 S. MAIN ST., ELKHART, IN ZIP+4 ►4			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	0320	_	
and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?	16		X
See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	10 1		- 21
the foreign country	İ		
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_!		
	 1	Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	140
1a 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 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)?			
(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.)			
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 page 22 of the instructions)?	1b		X
Organizations relying on a current notice regarding disaster assistance check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2010?	1c_		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)):			
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
before 2010? Yes X No			
If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
>			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?			
b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved 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.) N/A	3ь		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b 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
	orm 990	-PF	

THE RUTHMERE FOUNDATION					
FORM 990-PF (2010) C/O KEYBANK TRUST DEPART			32-00379	14	Page 6
Part VII-B Statements Regarding Activities for Which I	orm 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?			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					
509(a)(1), (2), or (3), or section 4940(d)(2)?		es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or t		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the excentions described i		3 LAL 140		
section 53.4945 or in a current notice regarding disaster assistance (see instru		ir negulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		unad			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494		I/A 10	'S NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			ŀ		
a personal benefit contract?	pay premiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?	10		6 b	x
If "Yes" to 6b, file Form 8870	ersonal benefit contract?		'	טט	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction2	□ v.	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	_
1.6 11 1.000		nagers Highly		, ,	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	oco, i odiladiloli ivid	magers, riiging	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accou allo	int, other wances
SEE STATEMENT 17		48,000.	0.		0.
			!		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	ačcóu	xpense nt, other
NONE	devoted to position		compensation	allov	wances
NONE					
		-			
		_			
Total number of other employees paid over \$50,000	<u> </u>	I			0
1 Otal named of other employees paid over \$50,000					<u>U</u>

Form 990-PF (2010) C/O KEYBANK TRUST DEPARTMENT	32-0	037914	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	н		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Con	npensation
NONE	(2) .)	(3)	
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities	-		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inforr number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the	Expense	s
1 RUTHMERE MUSEUM			
		414	<u>,686.</u>
2			
3			
	-		
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2.	Amount	
1 N/A			
2			
All other program-related investments. See instructions.			
3			
·			

THE RUTHMERE FOUNDATION

Form **990-PF** (2010)

▶

0.

Total. Add lines 1 through 3

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	2,053,219.
	Average of monthly cash balances	1b	22,979.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	2,076,198.
	Reduction claimed for blockage or other factors reported on lines 1a and	"	2/0/0/2500
•	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,076,198.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,143.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,045,055.
6	Minimum investment return. Enter 5% of line 5	6	102,253.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)	,	499
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_	417,106.
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	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	417,106.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	441.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	416,665.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2010)

Part XIII Undistributed Income (se	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
<u> </u>	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010	· · · ·			
a Enter amount for 2009 only				
b Total for prior years:				
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: ► \$				
a Applied to 2009, but not more than line 2a			<u> </u>	
b Applied to undistributed income of prior	<u></u> _			
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2010 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2010				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable amount - see instructions				
e Undistributed income for 2009. Subtract line				
4a from line 2a Taxable amount - see 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:				<u> </u>
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

32-0037914

Part XIV Private Operating Fo	oundations (see inst	tructions and Part VII-	A <u>, q</u> uestion 9)							
1 a If the foundation has received a ruling or	determination letter that i	t is a private operating								
foundation, and the ruling is effective for 2010, enter the date of the ruling										
b Check box to indicate whether the found	ation is a private operating	g foundation described in		1942(j)(3) or 49	42(<u>J)(</u> 5)					
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years							
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	102,253.	97,036.	119,979.	145,072.	464,340.					
b 85% of line 2a	86,915.	82,481.	101,982.	123,311.	394,689.					
c Qualifying distributions from Part XII,										
line 4 for each year listed	417,106.	<u> </u>	380,427.	360,550.	<u>1,485,977.</u>					
d Amounts included in line 2c not										
used directly for active conduct of					_					
exempt activities	0.	0.	0.	0.	0.					
e Qualifying distributions made directly										
for active conduct of exempt activities.	415 106	207 004	200 405	260 550	4 405 055					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets	417,106.	327,894.	380,427.	360,550.	1,485,977.					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0.					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	68,169.	64,691.	79,986.	96,715.	309,561.					
c "Support" alternative test - enter:		,		J 0 / 0	<u> </u>					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					0.					
(3) Largest amount of support from										
an exempt organization					0.					
(4) Gross investment income					0.					
Part XV Supplementary Info			f the foundation I	had \$5,000 or mo	re in assets					
at any time during t	ne year-see the ir	nstructions.)			 					
1 Information Regarding Foundatio	-									
a List any managers of the foundation who			butions received by the fo	oundation before the clos	se of any tax					
year (but only if they have contributed m	iore man \$5,000). (See Se	cuon 507 (u)(2).)								
NONE	400/									
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	of the ownership of a pa	artnership or					
NONE	Ta vovo or groutor interest	•								
2 Information Regarding Contributi	on Grant Gift Loon	Sahalarahin ata Dra								
	nly makes contributions to	preselected charitable o	rganizations and does no							
a The name, address, and telephone numl	·	<u> </u>		,						
THE RUTHMERE FOUNDAT 101 SOUTH MAIN STREE	ION C/O KEY	* *								
b The form in which applications should b NONE SPECIFIED			ould include:							
c Any submission deadlines:										
NONE SPECIFIED										
d Any restrictions or limitations on awards NONE	, such as by geographical	l areas, charitable fields, i	kinds of institutions, or otl	her factors:						

THE RUTHMERE FOUNDATION

Form 990-PF (2010) C/O KEYBANK TRUST DEPARTMENT

Part XV Supplementary Information (continued)

32-0037914 Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION						
a Paid during the year FIRST PRESBYTERIAN CHURCH			CHARITABLE	2,420.					
Total	· · · · · · · · · · · · · · · · · · ·	I	▶ 3a	2,420.					
NONE									
Total	1	L	<u>▶</u> 2h	0					

Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2010)

Enter gross amounts unless otherwise indicated.		Unrelated business income			ded by section 512, 513, or 514	(e)		
J		(a) Business	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program	n service revenue:	code	Amount	sion	Amount	function income		
-	THMERE MUSEUM			1 1		14,461.		
	FT SHOP			11		704.		
	DDINGS			+-+		5,900.		
	OGRAMS/CONCERTS					2 350		
				-		2,359.		
е <u>М</u> Т	SC. OTHER					916.		
' <u>-</u>				-				
	and contracts from government agencies							
	rship dues and assessments			<u> </u>		17,705.		
3 Interest	on savings and temporary cash							
ınvestm	ents			14	2,427.			
4 Dividen	ds and interest from securities			14	58,296.			
5 Net rent	al income or (loss) from real estate:							
	t-financed property			14	825.	,		
	debt-financed property	i i		+	0231			
	al income or (loss) from personal				· · · -·			
propert				+ - 1				
	vestment income							
	(loss) from sales of assets other							
than inv				18	<4,902.	>		
	ome or (loss) from special events			1				
10 Gross p	rofit or (loss) from sales of inventory					22.		
11 Other re	evenue:							
a								
			- 					
<u> </u>	· · · · · · · · · · · · · · · · · · ·							
to Subtota	II. Add columns (b), (d), and (e)		0	+	56 646	12 067		
	Add line 12, columns (b), (d), and (e)		· U	•]	J0,040.	42,067. 98,713.		
					13	30,713.		
	heet in line 13 instructions to verify calculations.)				 			
Part X	VI-B Relationship of Activities t	o the Acco	mplishment of E	xemp	t Purposes			
Line No	Explain below bow each activity for which upon	ma in roportad i	n solume (a) of Dort VIII	A sontrib	usted importantly to the accom	nlightment of		
	Explain below how each activity for which inco the foundation's exempt purposes (other than			A COULUD	outed importantly to the accon-	ipiisnment oi		
<u>▼</u>				00T T	DOME ON DE	TODI NI		
13	PRESERVATION OF THE RU	THMERE I	MUSEUM AND	COPP.	ECTIONS FOR D	LSPLAY		
		-						
			•					
			•					
								
			·					
		· -			· · · · · · · · · · · · · · · · · · ·			
								
								
		- 						
		•						
								

Part XVII	Information Re Exempt Organi		sfers To a	and Trans	actions a	nd Rela	tionsh	ips With	Noncharit	able	9	_ _
1 Did the or	ganization directly or indir	ectly engage in any	of the following	ng with any oth	ner organizatio	n describe	d in sectio	n 501(c) of			Yes	No
	(other than section 501(c)				•							
	from the reporting founda			-								ı
(1) Cash	• •			ga						1a(1)		_X
(2) Other										1a(2)		X
b Other tran										14(2)		
	of assets to a noncharitat	nle exemnt organiza	ation							1b(1)		X
	náses of assets from a nor								Г	1b(2)		X
• •	al of facilities, equipment, (•	organization						Г			X
	bursement arrangements	offici assets								<u>1b(3)</u> 1b(4)		X
	s or loan guarantees											X
. ,	rmance of services or mei	mbarchin or fundra	icina colicitatio	ane.						1b(5)	\vdash	X
. ,	f facilities, equipment, mai	•	ū						-	1b(6) 1c		X
	wer to any of the above is '				(h) chould alv	vave chow	the four ma	rkat valua af	L the apode off		L	
or service	s given by the reporting for the goods, to any or the above is	oundation. If the fou	indation receiv	ed less than fa	• •				= :		ь с ю,	
a) Line no	(b) Amount involved		f noncharitable		nızatıon	(d) o	escription o	f transfers, trans	sactions, and sha	ring ar	rangeme	nts
			N/A		· 							

					·				··-			
	·			-								
					•							
			·									
*				4.444								
							·,					
				-								
				-							_	
ın section	ndation directly or indirect 501(c) of the Code (other omplete the following sche	than section 501(c	•		exempt organi	zations des	cribed			Yes	X] No
	(a) Name of org	anization		(b) Type of	organization		(c) Description	of relationship			
	N/A											
												
- 				<u>L</u>								
	er penalties of perjury, I declare complete peclaration of pregar	e that I have examined to rerupther than taxpayer	this return, includ r or fiduciary) is b	ding accompanyii eased on all infori	mation of which p	d statements, preparer has a	and to the lany knowled	pest of my know lige	ledge and belief,	it is tr	ue, corre	ct,
	Signature of officer or tru	stee			Date	·	Tit	le	:			
	Print/Type preparer's na	ıme	Preparer's s	ignature		Date		Check	ıf PTIN			
Paid	SANDRA S S	CHNEIDER	dande	Stehr	i ee Dos	11-10	-/1	self- employed		5/4	41	7
Preparer Use Only	Firm's name ► RSM		EY, INC			<u> </u>		Firm's EIN	•	∆'		<u></u>
	Firm's address ▶ PO		J 16515					Dhar	/F74\	20	6 2	700
	ELKHART, IN 46515-0099							Phone no.	(574)	43	o - 3	7 O U

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2010

THE RUTHMERE FOUNDATION C/O KEYBANK TRUST DEPARTMENT 32-0037914 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 X 501(c)(3) exempt private foundation Form 990-PF 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** 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

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)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

	1		\sim		
'ag e	1 0	f	2	of	Part

Name of organization
THE RUTHMERE FOUNDATION
C/O KEYBANK TRUST DEPARTMENT

Employer identification number

32-0037914

Part	Con	tributors	(see instructions)
------	-----	-----------	--------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FULMER, L CRAIG ELKHART, IN 46515	\$5,000.	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
2	CITTADINE, JACK OR KAREN ELKHART, IN 46515	\$5,000.	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
3	JOAN BEARDSLEY NORRIS ELKHART, IN 46515	\$5,000.	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
4	ELKHART, IN 46515	\$7,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	ROBERT AND MARY PAT DEPUTY ELKHART, IN 46515	\$7,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	DEPUTY, LARRY OR SHERROD ELKHART, IN 46515	\$7,000.	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution)

Name of organization
THE RUTHMERE FOUNDATION
C/O KEYBANK TRUST DEPARTMENT

Employer identification number 32-0037914

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	FREESE, GEORGE OR KATHERINE ELKHART, IN 46515	\$5,000.	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
8	NORRIS, JOAN (JOAN BEARDSLEY NORRIS, JONATHAN B. ELKHART, IN 46515	\$ 25,000.	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
9	DEPUTY, THOMAS & MARGARET ELKHART, IN 46515	\$7,000.	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
10	DEPUTY, RICHARD ELKHART, IN 46515	\$7,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(Complete Part II if there is a noncash contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Pa

Name of organization

THE RUTHMERE FOUNDATION

C/O KEYBANK TRUST DEPARTMENT

Employer identification number

32-0037914

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
		\$	
(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
		\$	
(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
		\$	

Name of organization

Employer identification number

THE RUTHMERE FOUNDATION

O KEY	BANK TRUST DEPARTMENT		32-0037914
art III	Exclusively religious, charitable, etc., inc more than \$1,000 for the year. Complete Part III, enter the total of exclusively religious \$1,000 or less for the year (Enter this info	columns (a) through (e) and the us, charitable, etc, contributions	on 501(c)(7), (8), or (10) organizations aggregating of following line entry. For organizations completing s of
No.	\$1,000 or less for the year (Enter this into	mation once See instructions)	
om ert I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -			
_ _			
		(e) Transfer of gift	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			
No.			
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -			
-			
		(e) Transfer of gift	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			
-			
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ =			
_			
		(e) Transfer of gift	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			
No.			
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
_			
		(e) Transfer of gif	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
1 _			

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY C	ASH INVESTMENTS	STATEMEN	NT 1
SOURCE			AMOUN	1T
INTEREST INCOME - OTHER				2,427.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		2	2,427.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMEN	NT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN AMOUN	
KEYBANK INTEREST & DIVIDENDS	58,296.	0.	58	3,296.
TOTAL TO FM 990-PF, PART I, LN 4	58,296.	0.	58	3,296.
FORM 990-PF REN	TAL INCOME		STATEMEN	NT 3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROS RENTAL I	
RENT OF BUILDING AND GROUNDS		2		825.
TOTAL TO FORM 990-PF, PART I, LINE	5A			825.

FORM 990-PF INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10	STATEMENT	4
INCOME		
1. GROSS RECEIPTS		
4. COST OF GOODS SOLD (LINE 15)		
6. OTHER INCOME	22	
7. GROSS INCOME (ADD LINES 5 AND 6)		22
COST OF GOODS SOLD		
8. INVENTORY AT BEGINNING OF YEAR		
14. INVENTORY AT END OF YEAR		

FORM 990-PF	OTHER	INCOME		STATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
RUTHMERE MUSEUM GIFT SHOP		14,461.	0.	14,461.
WEDDINGS PROGRAMS/CONCERTS MISC. OTHER		5,900. 2,359. 916.	0. 0. 0.	5,900. 2,359. 916.
MEMBERSHIP DUES AND ASSESSMENT TOTAL TO FORM 990-PF, PART I,		42,045.	0.	17,705.
FORM 990-PF	LEGA	L FEES	-	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
LEGAL FEES	4,926	. 0	. 0	4,926.
TO FM 990-PF, PG 1, LN 16A =	4,926	. 0	. 0	4,926.
FORM 990-PF	ACCOUNT	ING FEES	:	STATEMENT 7
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION	PER BOOKS		NET INCOME	
DESCRIPTION ACCOUNTING FEES		MENT INCOME	_	PURPOSES

FORM 990-PF	OTHER PROFES	SIONAL FEES	ST	PATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING SERVICES BOOKKEEPING TRUSTEE FEES PERSONAL RECRUITMENT MANAGEMENT FEES	7,669. 4,827. 968. 250. 17,466.	0.	0. 0. 0. 0.	7,669. 4,827. 968. 250.
TO FORM 990-PF, PG 1, LN 16C	31,180.	17,466.	0.	13,714.
FORM 990-PF	TAX	ES	SI	CATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
IN BUSINESS ENTITY FEE PAYROLL TAXES REAL ESTATE	7. 11,491. 768.	0. 0. 0.	0. 0. 0.	7. 11,491. 768.
TO FORM 990-PF, PG 1, LN 18	12,266.	0.	0.	12,266.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 10
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELEPHONE REPAIRS & MAINTENANCE POSTAGE & SHIPPING OFFICE SUPPLIES MEMBERSHIP, DUES,	8,454. 72,612. 5,570. 8,697.	0. 0.	0. 0. 0. 0.	8,454. 72,612. 5,570. 8,697.
SUBSCRIPTIONS MISCELLANEOUS BANK FEES INSURANCE ADVERTISING AND PROMOTIONS PROGRAM EXPENSES	1,161. 4,349. 928. 29,197. 27,743. 9,150.	0. 0. 0.	0. 0. 0. 0.	1,161. 4,349. 928. 29,197. 27,743. 9,150.
TO FORM 990-PF, PG 1, LN 23	167,861.	0.	0.	167,861.
		·		

IN NET ASSETS OR F	UND BALANCES	STATEMENT 11
		AMOUNT
		381,178. 218,365.
, LINE 5		599,543.
CORPORATE STOCK		STATEMENT 12
	BOOK VALUE	FAIR MARKET VALUE
•	601,092.	795,405.
LINE 10B	601,092.	795,405.
CORPORATE BONDS		STATEMENT 13
	BOOK VALUE	FAIR MARKET VALUE
	0.	0.
LINE 10C	0.	0.
OTHER INVESTMENTS		STATEMENT 14
VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
COST COST COST COST COST	565,272. 55,697. 33,682. 0. 550,723.	568,952, 55,697, 31,806, 0, 572,971,
•		
	, LINE 5 CORPORATE STOCK LINE 10B CORPORATE BONDS LINE 10C OTHER INVESTMENTS VALUATION METHOD COST COST COST COST COST	CORPORATE STOCK BOOK VALUE 601,092. LINE 10B CORPORATE BONDS BOOK VALUE 0. LINE 10C OTHER INVESTMENTS VALUATION METHOD BOOK VALUE COST COST COST COST COST S565,272. COST S55,697. COST COST 33,682. COST 0.

FORM 990-PF	OTHER ASSETS		STATEMENT 15
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
MUSEUM COLLECTIONS CHARITABLE REMAINDER UNIT TRUST ELKHART CO COMMUNITY FOUNDATION LAND AND BUILDINGS	534,952. 0. 0. 1,030,174.	780,032. 108,473. 0.	780,032. 108,473.
TO FORM 990-PF, PART II, LINE 15	1,565,126.	888,505.	888,505.
FORM 990-PF OT	HER LIABILITIES		STATEMENT 16
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
DESCRIPTION		BOY AMOUNT 0. 0.	1,941. 49.

	LIST OF OFFICERS, D AND FOUNDATION MANA	STATEMENT 17		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ROBERT B. BEARDSLEY 5510 BAYVIEW DRIVE FT LAUDERDALE, FL 33308	PRESIDENT 0.00	0.	0.	0.
GEORGE E. FREESE 3117 CRABTREE LANE ELKHART, IN 46514	VP & TREASURER 0.00	0.	0.	0.
DORINDA MILES SMITH 833 LINWOOD RD BIRMINGHAM, AL 35222	SECRETARY 0.00	0.	0.	0.
SUSAN C S EDWARDS 98 SUMMER ST KENNEBUNK, ME 04043	DIRECTOR 0.00	0.	0.	0.
ALICE A. MARTIN 14612 MEADOW LANE LAKESIDE, MI 49116	DIRECTOR 0.00	0.	0.	0.
JOAN BEARDSLEY NORRIS 6835 N PEPPER TREE LN PARADISE VALLEY, AZ 85253	DIRECTOR 0.00	0.	0.	0.
ROBERT DEPUTY 22628 WEATHERBY LN ELKHART, IN 46514	DIRECTOR 0.00	0.	0.	0.
ARTHUR J. DECIO 3215 GREENLEAF BLVD ELKHART, IN 46514	DIRECTOR 0.00	0.	0.	0.
CHARLES LOVING 15881 LAKESHORE DR N. GRANGER, IN 46530	DIRECTOR 0.00	0.	0.	0.
EDWARD BEARDSLEY 6300 N. CAMELBACK MANOR PARADISE VALLEY, AZ 85253	DIRECTOR 0.00	0.	0.	0.
WILLIAM A. FIRSTENBERGER 2501 WESTWOOD ROAD WINONA LAKE, IN 46590	EXECUTIVE DIRE	CTOR 48,000.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	E 6, PART VIII	48,000.	0.	0.

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)

	ou are filing for an Automatic 3-Month Extension, complet	-	**			\mathbf{x}	
-	ou are filing for an Additional (Not Automatic) 3-Month Ex	-	• • • • • • • • • • • • • • • • • • • •				
	ot complete Part II unless you have already been granted a		•				
	ronic filing (e-file). You can electronically file Form 8868 if y						
	ed to file Form 990-T), or an additional (not automatic) 3-mor						
	e to file any of the forms listed in Part I or Part II with the exc						
	nal Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details on the	ne elec	stronic filing of this f	orm,	
Par	ww.irs gov/efile and click on e-file for Charities & Nonprofits		ber't and the second of the se				
	poration required to file Form 990-T and requesting an auton	natic 6-mo	onth extension - check this box and com	plete			
Part I					>	لـــا	
	ner corporations (including 1120-C filers), partnerships, REM Income tax returns.	Cs, and ti	rusts must use Form 7004 to request an	exten	sion of time		
					mployer identification number		
print	1 .						
File by	C/O KEYBANK TRUST DEPARTMEN			3	32-0037914		
due dat	e for Number, street, and room or suite no If a P O. box, se 	ee instruct	tions.				
instruct		reign add	ress, see instructions.				
Enter	the Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Appli	cation	Return	Application			Return	
<u>ls</u> Fo	·	Code	Is For			Code	
Form	990	01	Form 990-T (corporation)			07	
Form	990-BL	02	Form 1041-A	Α			
Form 990-EZ		03	Form 4720				
Form 990-PF		04	Form 5227				
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
<u>Form</u>	990-T (trust other than above)	06	Form 8870			12	
• Th	KEYBANK TRUST I e books are in the care of ► 101 S. MAIN ST.						
	lephone No. ► 574-295-2000		FAX No.				
• If t	he organization does not have an office or place of business	in the Un					
	his is for a Group Return, enter the organization's four digit (s is fo	r the whole group, c	heck this	
box 1							
1	I request an automatic 3-month (6 months for a corporation						
	AUGUST 15, 2011 , to file the exempt	organizat	tion return for the organization named a	bove.	The extension		
	is for the organization's return for:						
	▶ X calendar year 2010 or						
	tax year beginning	, and	d ending		_ ·		
2	If the tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: Initial return Fina	l retur	n		
	Change in accounting period						
	a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
	nonrefundable credits. See instructions.				\$	<u> </u>	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	estimated tax payments made. Include any prior year overpayment allowed as a credit.				s 1	<u>,235.</u>	
	Balance due. Subtract line 3b from line 3a. Include your page					-	
	by using EFTPS (Electronic Federal Tax Payment System) S		· · · · · · · · · · · · · · · · · · ·	3c	\$	0.	
Cauti	on. If you are going to make an electronic fund withdrawal w	uth this Fo	orm 8868, see Form 8453-FO and Form	8879.1	FO for navment inst	nictions	

LHA

For Paperwork Reduction Act Notice, see Instructions.

% (♥)					D 0	
Form 8868 (Rev. 1-2011)		Death and sheet this ha			Page 2	
If you are filing for an Additional (Not Automatic) 3-Month Ext					لکا	
Note. Only complete Part II if you have already been granted an a		•	Form :	8868		
If you are filing for an Automatic 3-Month Extension, complet Rartill Additional (Not Automatic) 3-Month Extension (Not Automatic)						
	Klensio	in of time. Only file the original (no co	<u> </u>			
Type or Name of exempt organization			Emp	loyer identification	number	
Drint THE RUTHMERE FOUNDATION	_					
C/O KEYBANK TRUST DEPARTMENT				2-0037914		
extended Number, street, and room or suite no. If a P.O. box, se	e instruc	tions.				
due date for 101 SOUTH MAIN STREET			_			
return See City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions.				
ELKHART, IN 46516						
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
		·		<u> </u>		
Application	Return	Application			Return	
Is For	Code	Is For		4	Code	
Form 990	01		, to their		经验	
Fôrm 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 408(a) trust)	ıst) 05 Form 6069				11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already granted			sly file	d Form 8868.		
KEYBANK TRUST I						
 The books are in the care of ► 101 S. MAIN ST. 	<u> </u>	LKHART, IN 46516				
Telephone No. ► <u>574-295-2000</u>		FAX No				
 If the organization does not have an office or place of business 	in the Ur	inted States, check this box				
If this is for a Group Return, enter the organization's four digit Communication	Group Exe	emption Number (GEN) If the	s is fo	r the whole group, c	heck this	
		ch a list with the names and EINs of all	memb	ers the extension is	for.	
-	OVEM	BER 15, 2011.				
5 For calendar year 2010 , or other tax year beginning		, and ending			·	
6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return						
Change in accounting period						
7 State in detail why you need the extension						
ADDITONAL TIME IS REQUIRED TO	PREP	ARE A COMPLETE AND A	CCU	RATE RETUR	N	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any	i			
nonrefundable credits. See instructions			8a	\$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, 6	enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayment allo	owed as a	credit and any amount paid				
previously with Form 8868.			8b	\$ 1	<u>,235.</u>	
c Balance due. Subtract line 8b from line 8a. Include your pay	yment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System) See instru			8c	\$	0.	
		d Verification				
Under penalties of perjury, I declare that I have examined this form, including	ng accomp	anying schedules and statements, and to the	best o	f my knowledge and be	elief,	
it is true, correct, and complete, and that am authorized to prepare this for	rm.			0 60 1		
Signature Marka Achne & Citle DC	PA		Date	<u>▶7-28-11</u>	<u></u> -	

Form 8868 (Rev. 1-2011)