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## 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

For	alen	dar year 2010, or tax year beginning		, and e	nding		
G C	heck	all that apply: Initial return	Initial return of a fo	•	harity	Final return	1
		Amended return	Address chan	ge		Name change	
Nar	ne of	foundation				A Employer identification	n number
		THE JOHN AND MATILDA	SHUMSKY FOUN	DATION			
		C/O THOMAS E. GARTLAN	D, TRUSTEE			38-2806447	1
Nun	ber a	nd street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
		P.O. BOX 947				(231) 946-	1722
City	or to	own, state, and ZIP code				C If exemption application is p	. —
1		· ·	685-0947			D 1. Foreign organization	
H C	heck		empt private foundation			Foreign organizations mechanisms and attach contacts and attach contacts.	eeting the 85% test,
	_	ction 4947(a)(1) nonexempt charitable trust		ation			
I Fa		rket value of all assets at end of year   J   Accounts		Accr	ual	E If private foundation sta under section 507(b)(1	Mas terminated
			her (specify)			F If the foundation is in a	
	\$	661,512. (Part I, colu.	mn (d) must be on cash l	basis.)		under section 507(b)(1	
Pa	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		,		N/A	
	2	Check X If the foundation is not required to attach Sch B	·	1916			3 30
	3	Interest on savings and temporary cash investments		2.3.		2	1
	4	Dividends and interest from securities	18,364.	1	8,364.		STATEMENT 1
	5a	Gross rents	20/3010		0,0010		A A
	_	Net rental income or (loss)	2.5%	<i>₿</i> `	Mai . Vi	<u>^</u> ~ .	1.33
	_	Net gain or (loss) from sale of assets not on line 10	-5,298.	<u>-</u>	· \$' • \$\		
Ĕ	h	Gross sales price for all	* *** ** ***		***	(X) (Y) (S)	
Revenue	7	assets on line 6a 50 , 454 .  Capital gain net income (from Part IV, line 2)	***		0.		\$ &;·
	8	Net short-term capital gain	41 43	<u> </u>		- ***	*
	9	Income modifications		in 1880			
		Gross sales less-returns		134 .	*		* * *
	h	and allowances RECEIVED			<del>} \\</del>	· \$.	3
	c	Gross profit of Aloks)			, ,		( 35)
	11	Other income NOV 21 2011	19,944.	1	9,944.		STATEMENT 2
	12	Total. Add lines 1 through 11	33,010.		8,308.		,
	13	Compensation of officers of the compensation of officers of the compensation of officers of the compensation of the compensati	0.		0.		0.
	14	Other employee salaries and wages					<u> </u>
	15	Pension plans, employee benefits					
es		Legal fees					
ens	b	Accounting fees STMT 3	3.902.		0.		0.
꼾	C	Other professional fees	7.2 3.3				
ξĒ	17	Interest					
عَ الْحَادِ	18	Taxes STMT 4	657.		0.		0.
<b>∃</b> .	19	Depreciation and depletion					
ے اقار	20	Occupancy		_			
A G	21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications				<del></del>	
	23	Other expenses STMT 5	119.		0.		0.
<b>Z</b> :	24	Total operating and administrative					<u> </u>
ဌာန္စ		expenses. Add lines 13 through 23	4,678.		0.		0.
<b>⇒</b> 6	25	Contributions, gifts, grants paid	29,300.		<u> </u>		29,300.
SCANNED NUV 3 & 2011.	26	Total expenses and disbursements.	25,500		<del></del>		23,300.
Ķ	-	Add lines 24 and 25	33,978.		0.		29,300.
ৰ্জ	27	Subtract line 26 from line 12:	33,3,00		· ·		25,500.
	- '	-	-968.				
		Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	- 500 •	2	8,308.	-	
		Adjusted net income (if negative, enter -0-)	· · · · · · · · · · · · · · · · · · ·	<u>ر</u> -	0,300.	N/A	
0235	D1	LHA For Paperwork Reduction Act Notice, see	the instructions	L		/ W/ N	Form <b>990-PF</b> (2010)

THE JOHN AND MATILDA SHUMSKY FOUNDATION

Form 990-PF (2010) C/O THOMAS E. GARTLAND, TRUSTEE 38-2806447 End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year (a) Book Value (b) Book Value (c) Fair Market Value 14.514 1 Cash - non-interest-bearing 5,021 14,514. 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans STMT 6 625,977. 609,116. 13 Investments - other Land, buildings, and equipment basis 14 Less accumulated depreciation Other assets (describe 630,998. 623,630. 661,512. Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 6.400. 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 6,400 23 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. **Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. þ 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 624,598. 29 Retained earnings, accumulated income, endowment, or other funds 623,630 Net 30 Total net assets or fund balances 624,598. 623,630 630,998. 31 Total liabilities and net assets/fund balances 623,630 Part III Analysis of Changes in Net Assets or Fund Balances 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) 624,598. Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 623,630. Decreases not included in line 2 (itemize) 623,630. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Part IV Capital Gains	and Lo	sses for Tax on In	vestment	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.) (b) How acqu P - Purchas D - Donatio					quired hase ation	(c) Date acqu (mo., day, y		(d) Date sold (mo., day, yr.)		
1a 349.895 UT MER	IDIA	N VALUE FUND					P 1	<b>VARIOU</b>	S	12/13/10
b 414.25 UT MERI								VARIOU		06/22/10
c 1620.746 UT NO			S TRUS	<u>T</u>			P '	VARIOU	S	12/13/10
d CAPITAL GAINS	DIVI	DENDS	- · · · ·							
<u>e</u>					<u> </u>					
(e) Gross sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale							(h) Gain o (e) plus (f)		(g)	
a 9,977.				11,25						<u>-1,280.</u>
в 9,970.				13,33					···	-3,365.
c 9,977. d 530.				11,16	0.					-1,183. 530.
					$\dashv$					330.
e Complete only for assets showin	o oain in	column (h) and owned by t	he foundation	on 12/31/69			<i>(</i> 1)	Gains (Col. (	h) nain	minue
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F.M.V. as of 12/31/69  (j) Adjusted basis as of 12/31/69  (k) Excess of col. (i) over col. (j), if any				col.	(k), but not le Losses (fror	ess tha	n -0-) <b>or</b>			
a				(),,,						-1,280.
b				<del>.</del>						-3,365.
C	·									-1,183.
d										530.
e										
2 Capital gain net income or (net ca	pital loss	If gain, also enter  If (loss), enter -0-			}	2				-5,298.
3 Net short-term capital gain or (los	:s) as def									
If gain, also enter in Part I, line 8,			u (0).		] [					
If (loss), enter -0- in Part I, line 8		,				3			N/A	
Part V Qualification U							nent ince	ome		
(For optional use by domestic private	foundati	ons subject to the section 4	1940(a) tax оп	net investment in	come	e.)				
If section 4940(d)(2) applies, leave th	ns part bl	ank.								
. ,,	•									
Was the foundation liable for the sec				•	rioaz					Yes X No
If "Yes," the foundation does not qual  1 Enter the appropriate amount in					es.					····
(a)	30011 0010	(b)	20110110 001010	making any onan	(c)			1		(d) oution ratio
Base periód years Calendar year (or tax year beginnii	na in)	Adjusted qualifying dist	tributions	Net value of no	nchai	rıtable-	use assets	(col.	Distril (b) div	oution ratio vided by col. (c))
2009	.,,	2	4,500.			50	9,488		. , .	.048087
2008			3,040.				5,708			.058405
2007			2,059.				9,257			.052620
2006			0,273.				4,680			.048462
2005		3	0,061.			57	9,468	•		.051877
2 Total of line 1, column (d)								2		.259451
3 Average distribution ratio for the	5-year ba	se period - divide the total c	on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in existe	nce if less	s than 5 years						3		.051890
4 Enter the net value of noncharitat	ile-use as	sets for 2010 from Part X, I	line 5					4		609,662.
										24 625
5 Multiply line 4 by line 3		•						5		31,635.
C Enter 19/ of not investment incom	oo (10/ oi	FDort Line 27h)								202
6 Enter 1% of net investment incon	118 (1% 0)	Part I, line 270)					•	6		383.
7 Add lines 5 and 6								7		32,018.
, Add lines o and 0			• • • • • • • • • • • • • • • • • • • •							32,010.
8 Enter qualifying distributions from	n Part XII	. line 4						8		29,300.
If line 8 is equal to or greater than			The and come	lete that nart user	10 2 1º	% tov :	rate			22,3000
See the Part VI instructions.	i iiii 67, G	noon the box ill Fait VI, lille	וט, מווט כטוון	note that part usin	iya I	/0 LGLA I	alt.			
<del></del>										orm 000-DE (2010)

15111114 792967 00524

THE JOHN AND MATILDA SHUMSKY FOUNDATION Form 990-PF (2010) 38-2806447 C/O THOMAS E. GARTLAND, TRUSTEE Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigs \) 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% 766. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 680 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 7 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached R 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 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Refunded I Part VII-A | Statements Regarding Activities Yes No 1a 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 b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? X 1b 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? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 incorporation, or bylaws, or other similar instruments? If "Yes." attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4h 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 X If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

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of each state as required by General Instruction G? If "No," attach explanation

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," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

X

3Ь

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

	TRUSTEE		38-28064	47 Page 6
Part VII-B   Statements Regarding Activities for Which F	form 4720 May be F	sequirea (contin	ued)	<del></del>
<ul><li>5a During the year did the foundation pay or incur any amount to:</li><li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section</li></ul>	4945(e))?	☐ Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or	* **			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	,		s 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)?		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A 5	ib
Organizations relying on a current notice regarding disaster assistance check hi	ere	_		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		
expenditure responsibility for the grant?	. N	[/A	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		I .	Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y6	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors		nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(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
SEE STATEMENT 7		0.	0.	0.
		H		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	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	(e) Expense account, other
MANTE	devoted to position		compensation	allowances
NONE				
		<del>                                     </del>		
		<del> </del>		
Total number of other employees paid over \$50,000		<u> </u>		0

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Total, Add lines 1 through 3

All other program-related investments. See instructions.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foun	dations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			<del>,,</del> _
a	Average monthly fair market value of securities	ļ	1a	609,396.
	Average of monthly cash balances		1b	609,396. 9,550.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	618,946.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	618,946.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	9,284.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	609,662.
6	Minimum investment return. Enter 5% of line 5		6	30,483.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations of foreign organizations check here   and do not complete this part.)	ons and	d certain	
1	Minimum investment return from Part X, line 6		1	30,483.
2a	Tax on investment income for 2010 from Part VI, line 5	66.		
b	Income tax for 2010. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	766.
3	Distributable amount before adjustments. Subtract line 2c from line 1	<b>1</b>	3	29,717.
4	Recoveries of amounts treated as qualifying distributions	Ī	4	0.
5	Add lines 3 and 4	- [	5	29,717.
6	Deduction from distributable amount (see instructions)	•	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	29,717.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	29,300.
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	29,300.
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	L	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	29,300.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation gi	ualifies for th	e section

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4940(e) reduction of tax in those years.

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,	Оограз	T Cars prior to 2009	2003	2010
line 7				29,717.
2 Undistributed income, if any, as of the end of 2010				25,717
a Enter amount for 2009 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 _ 1,937.				
b From 2006 277.				
c From 2007 3,030.				
d From 2008 5,675.				
e From 2009				
f Total of lines 3a through e	10,919.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$29,300.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				29,300.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	417.			417.
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,502.			
b Prior years' undistributed income. Subtract	10,502.			
line 4b from line 2b		0.		
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		0.		
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 instr.			0.	
f Undistributed income for 2010. Subtract				<u></u>
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	1,520.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	8,982.			
10 Analysis of line 9:				
a Excess from 2006 277.				
b Excess from 2007 3,030.				
c Excess from 2008 5,675.				
d Excess from 2009	1			
e Excess from 2010				5 000 DE (0040)

THE JOHN AND MATILDA SHUMSKY FOUNDATION

C/O THOMAS E. GARTLAND, TRUSTEE

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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to **Amount** any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year SEE STATEMENT 8 **▶** 3a 29,300. Total b Approved for future payment NONE Total

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Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated I	Unrelated business income Excluded by			(e)
	(a) Business	(b) Amount	(c) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C					
d			+		
e		<u></u>			
f		_ <del></del>			<del>-</del> .
g Fees and contracts from government agencies		<u>.</u>			<del>-</del>
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments				10 264	
4 Dividends and interest from securities			14	18,364.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			+ +	-	
b Not debt-financed property			+ +		
6 Net rental income or (loss) from personal					
property 7 Other investment income			15	19,944.	-
8 Gain or (loss) from sales of assets other			15	19,944.	
than inventory	i i		14	530.	-5,828.
9 Net income or (loss) from special events			1.3		-3,020.
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
_					
a b					
c			+		
d					· · · ·
e			-   -		
12 Subtotal. Add columns (b), (d), and (e)			0.	38,838.	-5,828.
13 Total. Add line 12, columns (b), (d), and (e)			·	13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Asser		Fuerent D		

Line No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).										
8	PORTFOLIO	INVESTMENTS	SOLD	TO	MAXIMIZE	RETURN	ON	PORTFOLIO			
									_		
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023621 12-07-10

Form **990-PF** (2010)

•	ਜ਼ਾ ਕੁਧਦਾ ਜ	OHN AND MAT	דד.הא פשוו	MCKA EUII	אדייו ער נוצר	ONT.			
Form 990		HOMAS E. GAI			MDAIL	38-280	6447	Pa	ige 13
Part )					nd Rela	tionships With Noncha			gc 10
	Exempt Organ								
1 Did	the organization directly or indi		following with an	v other organization	on described	in section 501(c) of		Yes	No
	Code (other than section 501(c		<del>-</del>						
	nsfers from the reporting found								
	Cash		p g				1a(1)		x
	Other assets						1a(2)		X
	er transactions:						1545/		
	Sales of assets to a noncharita	ble exempt organization					16(1)	Ì	x
	Purchases of assets from a no		zation				1b(2)		Х
	Rental of facilities, equipment,	· -					1b(3)		X
٠,	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees						1b(5)		Х
	Performance of services or me	embership or fundraising s	olicitations				1b(6)		Х
	aring of facilities, equipment, ma						1c		Х
		=		umn (b) should ah	wavs show t	he fair market value of the goods,	other ass	sets.	
						nsaction or sharing arrangement,		•	
	umn (d) the value of the goods,				_				
(a) Line no	o (b) Amount involved	(c) Name of none	haritable exempt	organization	(d) D	escription of transfers, transactions, and	sharing ar	rangeme	ents
-			N/A						
		_							
			•						
2a Ist	the foundation directly or indirec	tly affiliated with, or relate	d to, one or more	tax-exempt organi	zations desc	cribed			_
ın s	section 501(c) of the Code (othe	r than section 501(c)(3)) o	or in section 527?	•		L	Yes	LX	☐ No
b If "	Yes," complete the following sch	<del></del>							
	(a) Name of org	ganization	(b) Typ	e of organization		(c) Description of relations	ship		
	N/A								
								_	
				- <del></del>					
				<del></del>	1				
					<u> </u>				<del></del>
	and complete Declaration of prep					and to the best of my knowledge and be ny knowledge	elief, it is tr	ue, corre	⊭ct,
Sign		1. Founds	2	11/10	/)/				
Here		c , swe		11/19/		TRUSTEE			
	Signature of officer or tr			Date	15:	Title			
	Print/Type preparer's n	ame ·   Pre	parer's signature		Date	Check If PTIN			

Form **990-PF** (2010)

231-946-1722

Paid

Preparer

**Use Only** 

MARY F. KRANTZ,

Firm's name ► DGN , LLC

Firm's address ▶ P.O. BOX 947

TRAVERSE CITY, MI 49685-0947

self- employed

Fırm's EIN ▶

Phone no.

FORM 990-PF DIVI	DENDS AND	INTER	EST FROM	SECU	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
FIRST GLOBAL INVESTMENT S	ERVICE		18,894.		530.	18,3	64.
TOTAL TO FM 990-PF, PART	I, LN 4 =		18,894.		530.	18,3	64.
FORM 990-PF	TO	HER II	NCOME			STATEMENT	2
DESCRIPTION		1	(A) REVENUE PER BOOKS	S	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
OIL & GAS ROYALITIES			19,9	944.	19,944.		
TOTAL TO FORM 990-PF, PAR	T I, LINE	11	19,9	944.	19,944.		
FORM 990-PF	ACC	OUNTI	NG FEES			STATEMENT	3
DESCRIPTION	( A EXPEN PER E	-	(B) NET INVI MENT INC			(D) CHARITAI E PURPOSI	
PROFESSIONAL FEES	3	,902.		0.	•		0.
TO FORM 990-PF, PG 1, LN	16B 3	,902.		0.			0.
FORM 990-PF		TAX	ES			STATEMENT	4
DESCRIPTION	( <i>)</i> EXPEN PER E		(B) NET INVI MENT INC	EST-	(C) ADJUSTED NET INCOME		
					_	_	
TAXES		657.		0.	•		0.
TAXES TO FORM 990-PF, PG 1, LN	18	657.		0.			0

FORM 990-PF	OTHER E	XPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
MISCELLANEOUS	119.		0.			0.
TO FORM 990-PF, PG 1, LN 23	119.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE' VALUE	т
ARTISAN INTERNATIONAL FUND FMI FOCUS FUND MERIDIAN VALUE FUND NEEDHAM GROWTH FUND TWEEDY BROWNE GLOBAL VALUE FU		FMV FMV FMV FMV FMV		42,750. 82,059. 32,260. 37,049. 57,217.	45,4 88,2 29,1 49,7 68,1	93. 71. 12.
VANGUARD/ WELLESLEY INCOME FUND NORTHEAST INVESTORS TRUST FUN VANGUARD GNMA FUND ARTISAN MID-CAP FUND VANGUARD FIXED INCOME FUND	IND ID	FMV FMV FMV FMV FMV		68,782. 61,403. 66,970. 43,060. 80,692.	72,8 53,9 68,8 54,5 76,6	43. 22. 81. 48.
WEITZ SHORT INTERMED INCOME TOTAL TO FORM 990-PF, PART II		FMV		36,874.	39,3	48.

	LIST OF OFFICERS, D AND FOUNDATION MANA	STATEMENT 7		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
KENNETH KLEINRICHERT 1028 HANNAH TRAVERSE CITY, MI 49684	PRESIDENT 1.00	0.	0.	0.
MARY OOSTERHOUSE 7700 PENINSULA DRIVE TRAVERSE CITY, MI 49684	DIRECTOR 1.00	0.	0.	0.
THOMAS GARTLAND 415 MUNSON AVE. TRAVERSE CITY, MI 49684	DIRECTOR 1.00	0.	0.	0.
SUE NICHOLS 1260 LAKE RIDGE CIRCLE TRAVERSE CITY, MI 49684	SECRETARY 1.00	0.	0.	0.
PATRICK HEINTZ 440 WEST FRONT AT OAK TRAVERSE CITY, MI 49684	TREASURER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.	0.

FORM 990-PF

STATEMENT

· · · · · · · · · · · · · · · · · · ·			<del></del>
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
FATHER FRED FOUNDATION PO BOX 2260 TRAVERSE CITY, MI 49685	NONE FOOD BANK & NEEDY FAMILIES	501(C)3	7,800.
GRAND TRAVERSE AREA CATHOLIC SCHOOLS 123 E. ELEVENTH STREET TRAVERSE CITY, MI 49684	NONE TEACHER & STUDENT SCHOLARSHIPS	501(C)3	6,500.
GRAND TRAVERSE AREA DYSLEXIA ASSOCIATION 207 W. GRANDVIEW PRKWY STE 206 TRAVERSE CITY, MI 49684	NONE ASSISTANCE TO NEEDY FAMILIES	PRIVATE COMPANY	500.
GRAND TRAVERSE AREA STUDENTS FOR LIFE 1017 HANNAH TRAVERSE CITY, MI 49686	NONE STUDENT PROGRAMS	501(C)3	1,000.
HOLY CROSS CHILDREN'S SERVICES - BOYSVILLE 207 W. GRANDVIEW PRKWY TRAVERSE CITY, MI 49684	NONE EDUCATIONAL SUPPLIES	501(C)3	500.
IMMACULATE CONCEPTION CHURCH 720 SECOND STREET TRAVERSE CITY, MI 49684	NONE FOOD BANK & UKRAINIAN FAMILY IN NEED	CHURCH	1,500.
PREGNANCY CARE CENTER PO BOX 5363 TRAVERSE CITY, MI 49686	NONE WOMEN'S PREGNANCY ASSISTANCE	501(C)3	3,500.
ST. FRANCIS CHURCH 1025 SOUTH UNION STREET TRAVERSE CITY, MI 49684	NONE FOOD BANK	CHURCH	1,200.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

THE JOHN AND MATILDA SHUMSKY FO	UNDATION		38-2806447
ST. MARY'S SCHOOL PO BOX 340 LAKE LEELANAU, MI 49653	NONE AS NEEDED FOR SCHOOL	501(C)3	1,000.
ST. PATRICK'S CHURCH FOOD PANTRY 630 W. SILVER LAKE RD TRAVERSE CITY, MI 49684	NONE FOOD BANK	501(C)3	1,000.
ST. VINCENT DE PAUL 715 BEITNER TRAVERSE CITY, MI 49686	NONE FOOD BANK & NEEDY FAMILIES	501(C)3	3,500.
ACME CHRISTIAN THRIFT STORE & FOOD PANTRY 5782 US 31 NORTH ACME, MI 49610	NONE FOOD BANK & NEEDY FAMILIES	501(C)3	300.
	NONE ASSISTANCE TO NEEDY FAMILIES	501(C)3	1,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		29,300.

Form 8868 (Rev 1-2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this bo	x	<b>•</b>	X
Note. Only complete Part II if you have already been granted an a				8868.	
<ul> <li>If you are filing for an Automatic 3-Month Extension, complete</li> </ul>					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no co	opies r	needed).	
Name of exempt organization	Empl	loyer identification	number		
THE JOHN AND MATILDA SHUMSKY FOUNDATION					
C/O THOMAS E. GARTLAND, TRUSTEE			3	<u>8-2806447</u>	
File by the extended Number, street, and room or suite no. If a P O. box, so					
due date for C/O DENNIS, GARTLAND & NIERO	<b>BARTH</b>	- 415 MUNSON AVENUE	, S	UITE 201	
return See City, town or post office, state, and ZIP code For a fo	oreign add	lress, see instructions.			
TRAVERSE CITY, MI 49686					
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)		•	0 4
Application	Return	Application		<u> </u>	Return
Is For	Code	Is For			Code
Form 990	01	13101			0000
Form 990-BL	02	Form 1041-A		······································	08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	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	an autor	<del>*</del>	slv file	d Form 8868.	
		TRUSTEE - 415 MUNSO			•
• The books are in the care of ▶ BOX 947, TRAVES					
Telephone No ► 231-946-1722		FAX No. ▶			
If the organization does not have an office or place of business	s in the Ur	nited States, check this box			
• If this is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If th	is is fo	r the whole group, c	heck this
box ▶ . If it is for part of the group, check this box ▶	and atta	ach a list with the names and EINs of all	memb	ers the extension is	for.
4 I request an additional 3-month extension of time until	NOVEM	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, c	heck reas	on Initial return	Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
	A CO	MPLETE AND ACCURATE	RET	<u>URN IS NOT</u>	YET
AVAILABLE					
		<del></del>			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			^
nonrefundable credits See instructions.			8a	\$	0.
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 all	lowed as a	a credit and any amount paid			^
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using					۸
EFTPS (Electronic Federal Tax Payment System). See instru		nd Verification	8c_	\$	0.
Under penalties of perjury, I declare that I have examined this form, includ	ling accom		e best o	f my knowledge and b	elief,
it is true, correct, and complete, and that I am authorized to prepare this fo			_	_	
Signature ► Title ► (	C.P.A	•	Date	Form 9969 /Br	4.0044