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Extersion

990-PF

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

2010

2 Form 990-PF (2010

OMB No 1545-0052

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2010, or tax year beginning and ending Initial return initial return of a former public chanty Final return G Check all that apply: Amended return Address change Name change A Employer identification number Name of foundation 48-1202943 THE ATTERBURY FAMILY FOUNDATION Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) 913-677-5300 Room/suite 2001 SHAWNEE MISSION PARKWAY If exemption application is pending, check here City or town, state, and ZIP code D 1. Foreign organizations, check here KS 66205 SHAWNEE MISSION 2. Foreign organizations meeting the **H** Check type of organization X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Cash X Accrual I Fair market value of all assets at J Accounting method: end of year (from Part II, col. (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 4,345,348 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (a) Revenue and Disbursements (b) Net investment (c) Adjusted net expenses per for chantable amounts in columns (b), (c), and (d) may not necessarily equal books income ıncome purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ► X if the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments 26,924 23,504 57,240 57,240 Dividends and interest from securities Gross rents 5a Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 136,605 Gross sales price for all assets on line 6a 136,605 Capital gain net income (from Part IV, line 2) 136,605 Net short-term capital gain Income modifications Gross sales less returns & allowances 10a Less: Cost of goods sold Gross profit or (loss) (attach schedule) STMT 1 11 Other income (attach schedule) -43,145 203 12 Total. Add lines 1 through 11 177,624 217,552 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) SEE STMT 2 44 16a STMT 3 5,475 Accounting fees (attach schedule) 150 STMT 4 150 Other professional fees (attach schedule) 17 1,388 Taxes (attach schedule) (see page 14 of the instructions) STMT 5 4,959 И0 Zun Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (att sch) STMT 295 Total operating and administrative expenses. 150 12,311 Add lines 13 through 23 244,470 25 Contributions, gifts, grants paid 244, 470 150 Total expenses and disbursements. Add lines 24 and 25 256,781 244,470 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -79,157 217,402 Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-) For Paperwork Reduction Act Notice, see page 30 of the instructions.

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

4,275,809

6

n-			
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	Losses for Tax on Investmen		10 1202513	<u></u>		Tage C
(a) List and describe the 2-story brick warehou	(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)		
1a FLOW-THRU SHORT	VARIO	OUS	VARIOUS			
b FLOW-THRU LONG T	ERM CAPITAL GAINS		P	VARIO	OUS	VARIOUS
c DIVIDENDS						
d						
е			<u> </u>			L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	or other basis ense of sale			or (loss)) minus (g)
a 54,356		·	_			54,356
b 82,111				ļ		82,111
<u>c</u> 138						138
<u>d</u>		<u> </u>		<u>. </u>		
	are in column (b) and award by the for	endation on 12/21	/60	<u> </u>		
(i) F M V as of 12/31/69	ain in column (h) and owned by the fou (j) Adjusted basis as of 12/31/69	(k) Exce	ess of col (i) ol (j), if any	col (k	(), but not	(h) gain minus less than -0-) or om col (h))
a						54,356
b						82,111
С						138
d		P.47-				· _
8						
2 Capital gain net income or (net capit	tal loss) If gain, also enter in P If (loss), enter -0- in P	•		2		136,605
▼	as defined in sections 1222(5) and (6) llumn (c) (see pages 13 and 17 of the i	_				54,356
If (loss), enter -0- in Part I, line 8 Part V Qualification Under	er Section 4940(e) for Reduce	d Tay on Not	Investment Inco	<u> </u>		54,356
If section 4940(d)(2) applies, leave this p Was the foundation liable for the section If "Yes," the foundation does not qualify	4942 tax on the distributable amount		base period?			Yes X No
1 Enter the appropriate amount in each	h column for each year, see page 18 o	f the instructions	before making any en	tries		
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of nonchantable-use ass			(d) bution ratio vided by col (c))
2009	347,		4,224,			0.082338
2008	372,		4,855,			0.076774
2007	517,		6,168,			0.083905
2006	281,		5,258,			0.053438
2005	223,	384	4,932,	317	1	0.045290
2 Total of line 1, column (d)		.		2		0.341745
3 Average distribution ratio for the 5-ye number of years the foundation has	ear base period—divide the total on line been in existence if less than 5 years	e 2 by 5, or by the	•	3		0.068349
4 Enter the net value of nonchantable-	use assets for 2010 from Part X, line 5	;		4		4,282,508
5 Multiply line 4 by line 3				5		292,705
6 Enter 1% of net investment income	(1% of Part I, line 27b)			6		2,174
7 Add lines 5 and 6				7		294,879
8 Enter qualifying distributions from Pa		and sometime #	t most up = 40/ 4-	8		244,470
If line 8 is equal to or greater than line Part VI instructions on page 18	ne 7, check the box in Part VI, line 1b, a	and complete tha	t part using a 1% tax r	ale See the		

Form	990-PF (2010) THE ATTERBURY FAMILY FOUNDATION 48-1202943		F	Page 4
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)		
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		4.	348
	here ▶ and enter 1% 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).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
	Add lines 1 and 2		1	348
3	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u> </u>	3<u>7</u>0
4			1	348
5			4,	340
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 790			
Ь	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 2,000			
d	Backup withholding erroneously withheld 6d 6d		_	
7	Total credits and payments Add lines 6a through 6d 7		<u>2,</u>	<u> 790</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			<u> 12</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,	570
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
•	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
·	on foundation managers. > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
4	If "Yes," attach a detailed description of the activities.	_		<u> </u>
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3		3		_X_
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4a		
þ	·	4b		X
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		7,7	
	conflict with the state law remain in the governing instrument?	6_	X	—
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			l I
	instructions) ► MO			i
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ì
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			ì
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	I]	
	names and addresses	10		<u>X</u>
]	.1/15 INT 30 FTP 46 TOT 1,646 For	m 99 ()-PF	(2010)

Form	990-PF(2010) THE ATTERBURY FAMILY FOUNDATION 48-1202943			P	age 5
Pa	art 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		44		v
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)		11	-	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		40		₩
	August 17, 2008?		12	Х	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	Į	13		L
44	Website address ► HTTP: //WWW.ATTERBURYFOUNDATION.ORG The books are in care of ► DAVID L WOODS Telephone no ►	013-6	77_	E30	٠.
14	2001 SHAWNEE MISSION PARKWAY	213-0	, , –	550	U
	Located at ► SHAWNEE MISSION KS ZIP+4 ►	66205			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	00203			▶ □
15		15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		_	Yes	No
	over a bank, 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 the foreign country ▶				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	Dunng the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_			
	disqualified person? Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes	∐ No [
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	(F)			
	the benefit or use of a disqualified person)?	X No		İ	i
	(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	X No			
	termination of government service, if terminating within 90 days) Yes Yes	X No		ĺ	
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)?	ŀ	1b	1	х
	Organizations relying on a current notice regarding disaster assistance check here	▶ m h	10		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			l	
•	were not corrected before the first day of the tax year beginning in 2010?	N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	, [
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and				
	6e, Part XIII) for tax year(s) beginning before 2010?	X No		1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	ŀ			
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	/-	1		
	all years listed, answer "No" and attach statement—see page 22 of the instructions)	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
2-	▶ 20 , 20 , 20 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes	X No		1	
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or	22 140	į	ĺ	
J	disqualified persons after May 26, 1969, (2) the lapse of the 5-year penod (or longer penod approved by the		ľ		
	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			- 1	
	foundation had excess business holdings in 2010)	N/A	3b	1	
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	Γ			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?		4b		X
		For	n 99 (PF	(2010)

orn	1990-PF (2010) THE ATTERBURY FAMILY FOUNDATION		1202943			Pa	ge b			
Pa	art VII-B Statements Regarding Activities for Which Form	<u>4720 May Be F</u>	Required (con	tinued)						
5a						- 1				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4)			Yes X No						
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,									
	directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc., organization			()		-				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the inst			Yes X No						
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	r educational		-						
	purposes, or for the prevention of cruelty to children or animals?			Yes X No						
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify und			37 / B	_					
	Regulations section 53.4945 or in a current notice regarding disaster assistance		e instructions)?	N/A	5b					
	Organizations relying on a current notice regarding disaster assistance check he			▶ ∐						
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax	37/3 C	🗀		1				
	because it maintained expenditure responsibility for the grant?		N/A 📙	Yes No		1				
	If "Yes," attach the statement required by Regulations section 53 4945-5(d).					1				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ay premiums	О.	. .		- 1				
	on a personal benefit contract?			Yes X No	.		v			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit conti	ract?		6b		<u>X</u>			
_	If "Yes" to 6b, file Form 8870.	-144	П,	v ▼ N.						
	At any time during the tax year, was the foundation a party to a prohibited tax sh			Yes X No N/A	ا ہے ا					
	If Yes, did the foundation receive any proceeds or have any net income attributa Art VIII Information About Officers, Directors, Trustees, Fo				7b					
F	and Contractors	undation man	agers, riigiliy	r ald Employ	ces,					
1 1	ist all officers, directors, trustees, foundation managers and their compensa	tion (see page 22	of the instruction	ns).						
				(d) Contributions to						
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	employee benefit		ense acc				
	(-),	devoted to position	0-)	plans and deferred compensation	other	allowanc	es			
SE	E STATEMENT 13	1	_	· · · · · · · · · · · · · · · · · · ·						
				[
	·	1								
	·									
2	Compensation of five highest-paid employees (other than those included on	line 1 — see page	e 23 of the instru	ctions).						
	If none, enter "NONE."									
		(b) Title, and average		(d) Contributions to employee benefit	(a) Eva	ense acci	ount			
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowance				
		devoted to position	L	compensation						
NO	NE .				Ì					
		<u> </u>			<u> </u>					
		-			 					
-										
					ĺ					
			 	<u> </u>	<u> </u>					
	1		L	L	L	т				
ota	number of other employees paid over \$50,000	· · ·			000	DF :-	0			
				For	m 990	- - - (2	(10טנט:			

Form 990-PF (20	010) THE ATTERBURY FAMILY FOUNDATION	48-1202943	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)		
3 Five highe	est-paid independent contractors for professional services (see page 23 of the	e instructions). If none, enter "N	ONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	·		
	· ·		
-			
Total number of	others receiving over \$50,000 for professional services		—
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant statistical inform d other beneficianes served, conferences convened, research papers produced, etc	nation such as the number of	Expenses
1 N/A			
·	· ·		
2			
	•		
3		•	
4			
	•		İ
Part IX-B	Summary of Program-Related Investments (see page 24 o	f the instructions)	
	largest program-related investments made by the foundation during the tax year on lines 1 an	d 2	Amount
1 N/A			
2			
	·		
All other program	r-related investments. See page 24 of the instructions		
3 .	•	·	

•

Total. Add lines 1 through 3

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2010)

244,470

4

6

5

120,217

130,790

138,177

34,693

C

Excess from 2006

Excess from 2007 Excess from 2008

Excess from 2009

Excess from 2010

Forn	990-PF (2010) THE ATTERBUR	Y FAMILY F	OUNDATION	48-12029	43	Page 1
Pa	art XIV Private Operating For	undations (see p	age 27 of the ins	tructions and Part	VII-A, question 9)
1a	If the foundation has received a ruling or	determination letter t	hat it is a private opera	ating		
	foundation, and the ruling is effective for			•		
b	Check box to indicate whether the found		-	ribed in section 49	942(j)(3) or 494	2(j)(5)
2a	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	<u></u>	1	, , , , , , , , , , , , , , , , , , ,		<u> </u>
	each year listed					
ь	85% of line 2a		<u> </u>	-		
-	Qualifying distributions from Part XII,					
С	line 4 for each year listed					
	Amounts included in line 2c not used directly		 			
d	•					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c		 	 		· - · · · · ·
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets			<u> </u>		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)	 				
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	· · · ·				
Pa	ert XV Supplementary Inforn	nation (Complete	this part only if	the foundation ha	ad \$5.000 or more	in assets at
	any time during the ye	•	• •		, . ,	
1	Information Regarding Foundation Mar					
a	List any managers of the foundation who	-	re than 2% of the total	contributions received	by the foundation	
u	before the close of any tax year (but only					
	ALAN L ATTERBURY	ii arey nave continua	ed more than \$6,000)	(000 0000011 001 (0)(2)	•,	
	List any managers of the foundation who	own 10% or more of	the stock of a cornorat	tion (or an equally large	nortion of the	
b	ownership of a partnership or other entity				portion of the	
	N/A) or willion the lounda	uon nas a 1070 or grea	ito: intorest.		
	Information Regarding Contribution, G	rant Gift Laan Sah	olorobio etc. Program	me:		
2	Check here ► X if the foundation only				and not accept	
	unsolicited requests for funds If the foun					
				o or the manuchons) to	individuals of	
	organizations under other conditions, con					
а	The name, address, and telephone numb	er of the person to w	nom applications shou	id be addressed.		
	N/A					
b	The form in which applications should be	submitted and inform	nation and materials the	ey should include:		
	N/A					
C	Any submission deadlines.					
	N/A				. <u> </u>	
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable fi	ields, kınds of institutior	ns, or other	
	factors:					
	N/A					
D 4 4						Form 990-PF (2010

3 Grants and Contributions Paid During the	e Year or Approved for I			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Name and address (home or business) a Paid during the year SEE STATEMENT 14	or substantial contributor	recipient	COMMUNICITIES	244,470
Total b Approved for future payment N/A			▶ 3a	244,470
Total			▶ 3b	

DAA

Part XVI-A				T		
Enter gross am	ounts unless otherwise indicated.	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e) Related or exempt
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of
1 Program se				 		the instructions)
a				 	-	
		-		-		
		-		<u> </u>	-	
				 	· · · · · · · · · · · · · · · · · · ·	
e		-		 		
T		-	· · · · · · · · · · · · · · · · · · ·	╆	 	
_	d contracts from government agencies	}	····	+		
•	dues and assessments			111	26 024	
	savings and temporary cash investments			14	26,924	
	nd interest from securities			14	57,240	
	come or (loss) from real estate	-				
	anced property	-		 		
	t-financed property	-		 		
	come or (loss) from personal property	-		111	000	
7 Other invest				14	203	
	s) from sales of assets other than inventory			14	136,605	
	or (loss) from special events					
	or (loss) from sales of inventory	-		1		
11 Other reven		-		-	42 240	
	STATEMENT 15				-43,348	 -
		-				
		-				
9 9	ld columns (h) (d) and (c)	-	0		177 624	
	d columns (b), (d), and (e)			<u> </u>	177,624	177 624
	ne 12, columns (b), (d), and (e) In line 13 Instructions on page 29 to verify calculate	hana \			13	177,624
Part XVI-B	Relationship of Activities to the A		ent of Evernnt Pr	irnoso	<u> </u>	
Line No.	Explain below how each activity for which incom					····
▼	accomplishment of the foundation's exempt purplinstructions.)					of the
N/A	·					
	· · · · · · · · · · · · · · · · · · ·					
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·	and the second s				·	
			<u> </u>			

rai	. A V II	Exempt Organiza	_	ansiers roan	iu mansactio	iis aliu Kelat	ionsinps with Notici	iaiilabie		
1 [oid the org	anization directly or ind		ge in any of the fo	llowing with any c	ther organization	n described		Yes	No
	_	i01(c) of the Code (othe		-		_				
c	rganizatio	ns?								
аΤ	ransfers fi	rom the reporting found	ation to a no	oncharitable exem	pt organization of	f:		į		
(1) Cash							1a(1)		X
(2) Other a	issets				-		1a(2)		X
b C	Other trans	actions.								
(1) Sales o	of assets to a nonchanta	able exempt	t organization				1b(1)		X
(:	2) Purcha	ses of assets from a no	onchantable	exempt organizati	on			1b(2)		X
(3) Rental	of facilities, equipment,	or other as:	sets			••	1b(3)		<u>X</u>
(-	4) Reimbi	ursement arrangements	;	•				1b(4)	1	<u>X</u>
		or loan guarantees		•				1b(5)		<u> X</u>
•	•	nance of services or me	•	•				1b(6)		<u>X</u>
		facilities, equipment, m						_1c_		<u>X</u>
							vays show the fair market			
					-		eceived less than fair marke			
	aiue in any Line no	(b) Amount involved		of noncharitable exer			assets, or services received ion of transfers, transactions, an		monto	
$\frac{(a)}{A \setminus V}$	LITTO	(b) Amount involved	(c) Name	Of HOHOHAHAAAA	npt organization	(d) Descript	ion or transfers, transactions, an	u snamy anange	inenis	
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	<u>-</u> -	<u> </u>								
		lation directly or indirec	•			• -	tions			
		section 501(c) of the	· ·	than section 501(c)(3)) or in section	า 527?		∐ Ye	s X	No
b If		mplete the following sch	redule.							
- NT		Name of organization		(b) Type of o	organization	· · · · · · · · · · · · · · · · · · ·	(c) Description of relation	ship		
N/	<u>A</u>				_					
										
										
							· · · · · · · · · · · · · · · · · · ·			
	Under pe	enalties of periury. I declare	that I have ex	kamined this return, in	ncluding accompany	and schedules and	statements, and to the best of m	v knowledge and		—
	belief, it i	s true, correct, and comple	Declaration	n of reparer (other th	nan taxpayer or fiduo	ciary) is based on a	statements, and to the best of m Il information of which preparer f	as any knowledge	е	
ign		KNIMI ØSI	SONIAL		//-	15-11	TAX OFFICE	:R		
lere	Sign	ature of officer or trustee	~ ~ // ~		Date	/	Title	<u> </u>		
	Print/T	ype preparer's name			Preparer's signati	ure		Date	Check	<u>~</u>
aid	/				/ /	$\mathbf{\Omega}$			cneck [u self-empl	
repar	er 🔼 🧵	teren 0	5 bor.		5/4			1'11:11		
se On	ly Firm's	name ► STEVE	NT.C		CPA		PTIN			
	Firm's		BURLIN				Firm's EIN	43-1395		
		N. KA	NSAS C	CITY, MO	64116		Phone no	816-842		
								Form 990	-PF (2	2010)

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A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943

Federal Statements

FYE: 12/31/2010

	Adjusted Net Income	vs.	w.		Charitable Purpose	\$ \$		Charitable Purpose	& &		Charitable Purpose	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Income	Net Investment Income	\$ 203	\$ 203	al Fees	Adjusted Net	w w	nting Fees	Adjusted Net	w w	essional Fees	Adjusted Net	w w
- Form 990-PF, Part I, Line 11 - Other Income	Revenue per Books	\$ 203 2,439 -9,155 377 -37,043	\$ -43,145	2 - Form 990-PF, Part I, Line 16a - Legal Fees	Net Investment	\$ \$	Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment	\$ \$	m 990-PF, Part I, Line 16c - Other Professional Fees	Net Investment	\$ 150 \$ 150
Statement 1 - Form 990-PI				Statement 2 - Form 990-P	Total	\$\$	Statement 3 - Form 990-PF,	Total	\$ 5,475	Statement 4 - Form 990-PF, Part	Total	\$ 150 \$ 150
Σί	Description	FLOW THROUGH ORDINARY INCOME-PARTNERSHIPS RENTAL INCOME-PARTNERSHIPS OTHER INCOME-PARTNERSHIPS OTHER PORTFOLIO DEDUCTS-PARTNERSHIP	TOTAL	60 1	Description	INDIRECT LEGAL FEES TOTAL	Stat	Description	STEVEN T OSBORNE, CPA TOTAL	Stateme	Description	INDIRECT OTHER PROFESSIONAL FEES TOTAL

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A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943

Federal Statements

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FYE: 12/31/2010

	Charitable Purpose	ហ	\$		Charitable Purpose	w w	
xes	Adjusted Net	w.	\$	xpenses	Adjusted Net	w w	
Statement 5 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	w	\$	Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	w w	
Statement 5 - Form 99	Total	\$ 4,434 3,611 -3,086	\$ 4,959	Statement 6 - Form 990-PF,	Total	\$ 234 27 27 34 34 34 34	
	Description	CURRENT TAX FOREIGN TAX DEFERRED TAX	TOTAL		Description	EXPENSES MISCELLANEOUS BANK FEES ENTERTAINMENT TOTAL	

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A4500 THE ATTERBURY FAMILY FOUNDATION

48-1202943 FYE: 12/31/2010

Federal Statements

Statement 7 - Form	Form 990-PF, Part II, Line 10a - US and State Government Investmen	US and State Go	vernment Investments		
Description	Beginning of Year	End of Year	Basis of Valuation	_	Fair Market Value
ERAL HOME LOAN BANK	\$ 1,200,000	\$ 669,85	51 MARKET	ጭ	669,851
TOTAL	\$ 1,200,000	\$ 669,851	.51 <u>.</u>	ঞ	669,851

\$ 669,851	\$ 669,851		Fair Market Value	\$ 95,056	\$ 95,056
MARKET		vestments	Basis of Valuation	MARKET	
669,851	669,851	rporate Stock Ir	End of Year	92,056	92,056
₩	w	0p - Co		ψ	w.
1,200,000	3 1,200,000	F, Part II, Line 1	Beginning of Year	88,647	88,647
৵	₩.	m 990-F		₩	\$\$
FEDERAL HOME LOAN BANK	TOTAL	Statement 8 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	Description	COMMON STOCK-EXXON MOBIL CORP	TOTAL

	Fair Market Value	\$	15,697	5,388	94,410	85,000	2,830,952	29,652	386,593	\$ 3,447,694
<u>nents</u>	Basis of Valuation	MARKET	MARKET	MARKET	MARKET	MARKET	MARKET	MARKET	MARKET	
Line 13 - Other Investm	End of Year	\$	15,697	5,388	94,410	85,000	2,830,952	29,652	386,593	\$ 3,447,694
Statement 9 - Form 990-PF, Part II, Line 13 - Other Investments	Beginning of Year	96 \$	11,560		75,120	85,000	2,632,088	8,955	220,281	\$ 3,033,100
<u>Statement</u>	Description	REIT-ANTHRACITE CAPITAL INC	REIT-GENERAL GRWTH PPTYS INC	REIT-HOWARD HUGHES CORPORATION	MLP-KAYNE ANDERSON MLP INVT CO	LLC-K/H LEE'S SUMMIT, LLC	TRIANGLE PEAK PARTNERS GLOBAL ALLOC	TORCH HILL INVESTORS	PARKWAY INVESTORS A	TOTAL

A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943

FYE: 12/31/2010

Federal Statements

Statement 10 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	leginning of Year	 End of Year
DEFERRED FEDERAL EXCISE TAX CURRENT FEDERAL EXCISE TAX	\$ 3,492 199	\$ 406 4,133
TOTAL	\$ 3,691	\$ 4,539

Statement 11 - Form 990-PF, Part III, Line 3 - Other Increases

Description		Amount
ADJUSTMENT TO MARKET VALUE	\$	230,940
GRANT ADJUSTMENTS		105,000
NON-DIVIDEND DISTRIBUTIONS		3,243
TOTAL	\$_	339,183

Statement 12 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	_	Amount
FLOW THRU DISTRIBUTION / INCOME DIFFERENCE	\$	149,316
FLOW THRU BOOK VS TAX DIFFERENCES		9,327
NON-DEDUCTIBLE CHARITABLE CONTRIBUTIONS		880
ROUNDING		2
TOTAL	\$	159,525

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A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943 FYE: 12/31/2010

Federal Statements

Trustees,	
Directors,	
of Officers,	
ne 1 - List o	Etc.
III, Lin	山
Part VI	
990-PF	
3 - Form	
ment 1	
State	

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ALAN L ATTERBURY 1228 W 57TH KANSAS CITY MO 64113	BOARD CHAIR	00.0	0	0	0
MARY P ATTERBURY 1228 W 57TH KANSAS CITY MO 64113	PRESIDENT	0.00	0	0	0
JENNIFER L ATTERBURY 2001 SHAWNEE MISSION PARKWAY SHAWNEE MISSION KS 66205	VP & SECY	0.00	0	0	0
ANDREW L ATTERBURY 2001 SHAWNEE MISSION PARKWAY SHAWNEE MISSION KS 66205	VP & TREAS	0.00	0	0	0
DAVID A ATTERBURY 1228 W 57TH KANSAS CITY MO 64113	VP	0.00	0	0	0
ANNE GROSZEK 12855 PEMBROKE CIRCLE LEAWOOD KS 66209	ASST TREAS	0.00	0	0	0

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48-1202943 Federal Statements

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Form 990-PF, Part XV, Line	1a - Managers Who	Contributed Over 2% or \$5,000

Name of Manager	Am	ount
ALAN L ATTERBURY	\$	
TOTAL	\$	0

A4500 THE ATTERBURY FAMILY FOUNDATION

Federal Statements

FYE: 12/31/2010

48-1202943

Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

2,000 2,000 2,500 2,500 1,000 1,500 1,000 9,600 2,000 7,500 5,000 Amount Purpose GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL GENERAL Status 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 6066 DEVELOPMENT OFFICE 24 1108 EAST 10TH STREET 500 WEST US HIGHWAY 435 WEST 116 STREET STREET Relationship 8150 WORNALL ROAD W ARMOUR ROAD 6429 WILLOW LANE 3101 MAIN STREET MAIN STREET MAIN STREET Address 3022 BROADWAY GORDON PARKS ELEMENTARY S 3715 WYOMING EAST 26 BOX 871317 NONE NONE NONE NONE NONE NONE NONE NONE NONE NONE CENTER PRACTICAL BIOETHIC 1111 3101 625 211 MISSION HILLS KS 66208 INDEPENDENCE MO 64050 KANSAS CITY MO 64105 KANSAS CITY MO 64108 KANSAS CITY MO 64111 KANSAS CITY MO 64106 KANSAS CITY MO 64114 KANSAS CITY MO 64111 KANSAS CITY MO 64187 KANSAS CITY MO 64111 KANSAS CITY MO 64111 COLUMBIA BUSINESS SCHOOL HARRY S TRUMAN LIBRARY NEW YORK NY 10027 NEW YORK NY 10027 HANOVER NH 03755 Address JACKSON COUNTY CASA COLUMBIA LAW SCHOOL DELASALLE EDUCATION JUST LIKE YOU FILMS CITY UNION MISSION AMERICAN RED CROSS DARTMOUTH COLLEGE Name CHILDREN'S TLC GILLIS CCVI

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1,000

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GENERAL

501(C)(3)

GENERAL

501(C)(3)

CHERRY

KANSAS CITY REPERTORY THE 4949

KANSAS CITY MO 64110

NONE

KANSAS CITY YOUNG AUDIENC 5601 WYANDOTTE

KANSAS CITY MO 64113

KANSAS CITY ZOO

GENERAL

501(C)(3)

GRAND, 11TH FLOOR

KAUFFMAN CENTER PERF ARTS 906

KANSAS CITY MO 64106

KANSAS CITY MO 64132

6800 ZOO DRIVE

NONE

GENERAL

501(C)(3)

21,000

A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943

Federal Statements

FYE: 12/31/2010

Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address		į	
Address	Relationship	Status	Purpose	Amount
	4049 CENTRAL			
64111	NONE	501(C)(3)	GENERAL	200
LUNGEVIII FOUNDATION 43	435 N LASALLE STREET NONF	501(0)(3)	SENERAI.	000 6
LYRIC OPERA OF KANSAS CIT 1029	_	(6) (0) +00		1
KANSAS CITY MO 64105		501(C)(3)	GENERAL	2,500
YOUTH ARTS	1522 HOLMES ST			
CITY MO 64108	NONE	501(C)(3)	GENERAL	1,000
MISSOURI LAW SCHOOL FOUND ZO COLIMBIA MO 64211	ZUS HULSTON HALL NONE	501 (C) (3)	GENERAL.	000.1
	PO BOX 876565	()) ())		
KANSAS CITY MO 64187	NONE	501(C)(3)	GENERAL	5,000
	4525 OAK STREET			
111	NONE	501(C)(3)	GENERAL	123,500
~	2020 RIDGE AVENUE			
IL 60208	NONE	501(C)(3)	GENERAL	200
PEMBROKE HILL SCHOOL 400	3			
TY MO 64112	NONE	501(C)(3)	GENERAL	10,000
	1609 NW US HIGHWAY 50			
61	NONE	501(C)(3)	GENERAL	2,000
QUALITY HILL PLAYHOUSE 303	3 W 10TH STREET			
KANSAS CITY MO 64105		501(C)(3)	GENERAL	1,000
RESTART 918	8 E 9TH STREET			
KANSAS CITY MO 64106	NONE	501(C)(3)	GENERAL	5,750
	3637 BROADWAY			
Y MO 64111	NONE	501(C)(3)	GENERAL	200
	6604 EAST 12TH STREET			
KANSAS CITY MO 64126	NONE	501(C)(3)	GENERAL	2,000
SOUTHWEST BLVD HEALTH CTR 340	0 SOUTHWEST BLVD			
KANSAS CITY MO 64103	NONE	501(C)(3)	GENERAL	2,500
-	4600 STARLIGHT ROAD			
54132		501(C)(3)	GENERAL	2,000
	Z310 HOLMES			
TMVC CONSEDVATORY OF MIST 49	NONE 1918 CHEDDY STDEET	501(C)(3)	GENERAL	1,000
_	NONE	501(C)(3)	GENERAL	4,120
		•		

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A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943

Federal Statements

FYE: 12/31/2010

Statement 14 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address			
Address	Relationship	Status	Purpose	Amount
UNIVERSITY ACADEMY 64131	6801 HOLMES ROAD	E01(G)(3)	TKGGNGS	
WASHINGTON UNIVERSITY 1	1 BROOKINGS DRIVE	(6) (0) 100		000
0	NONE	501(C)(3)	GENERAL	500
WAYSIDE WAIFS	PO BOX 9791			
KANSAS CITY MO 64134	NONE	501(C)(3)	GENERAL	500
WILDWOOD OUTDOOR EDUCATIO 7095 WEST 399 ST	095 WEST 399 ST			
LA CYGNE KS 66040	NONE	501(C)(3)	GENERAL	2,000
TOTAL				244,470

A4500 THE ATTERBURY FAMILY FOUNDATION 48-1202943 Federal Statements

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Statement 15 - Form 990-PF, Part XVI-A, Line 11 - Other Revenue

Description					
	Business Code	Unrelated Amount	Exclusion Code	Exclusion Amount	Related Income
ORDINARY INCOME-PARTNERS					
RENTAL INCOME-PARTNERSHI	\$ PS		14 \$	2,439	\$
			14	-9,155	
SEC 1256 GAIN-PARTNERSHI	PS		14		
OTHER INCOME-PARTNERSHIP	s		14		
	-		14	377	
OTHER				•	
PORTFOLIO DEDUCTS-PARTNE	DQU		14	34	
FORTFOLIO DEDOCIS-PARINE	KSII		_ 14 _	-37,043	
TOTAL	\$		2 \$	-43,348	\$0

Form · **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Internal Revenu		► File	a separate	application for each return.				
		tomatic 3-Month Extension, comple	te only Parl	I and check this box				▶ X
	_			omplete only Part II (on page 2 of this fo	rm).		•	. —
•	•			3-month extension on a previously filed		368.		
20 mg 00mp		granica and an area granica an		,				
Flectronic fili	na (e-file). You	can electronically file Form 8868 if v	ou need a 3	-month automatic extension of time to fi	le (6 mo	nths for		
				nonth extension of time. You can electro				
•	•							
•				Part II with the exception of Form 8870, th must be sent to the IRS in paper form		ion .		
						61-		
				gov/efile and click on e-file for Charities		profits.		
Part I				bmit original (no copies needed				
•	required to file	Form 990-1 and requesting an autom	atic 6-monti	n extension-check this box and complete	•			. —
Part I only							-	▶ ∐
All other corpo	orations (includ	ing 1120-C filers), partnerships, REMI	Cs, and trus	sts must use Form 7004 to request an e	ktension	of time		
to file income						 		
Type or	Name of exe	mpt organization			Emplo	yer identifi	cation nu	ımber
print								
File by the	THE AT	TERBURY FAMILY FOU	NDATIO	N	48-	120294	<u>3</u>	
due date for	Number, stre	et, and room or suite no. If a P.O. box	k, see instru	ctions.				
filing your return See	2001 S	<u>HAWNEE MISSION PAR</u>	KWAY					
instructions	City, town or	post office, state, and ZIP code. For a	a foreign add	dress, see instructions.				
	SHAWNE	E MISSION KS	66205	<u> </u>				
				anticotes for each action.				
Enter the Retu	rn code for the	return that this application is for (file a	a separate a	pplication for each return)				04
Application			Return	Application				Return
Is For			Code	Is For			j	Code
Form 990			01	Form 990-T (corporation)				07
Form 990-BI	_		02	Form 1041-A	, ,,,			08
Form 990-E			03	Form 4720				09
Form 990-PI			04	Form 5227				10
	(sec. 401(a) or	408(a) trust)	05	Form 6069				11
	(trust other tha		06	Form 8870				12
1 01111 330-1	(trast other tra	DAVID L WOODS		1 01111 0070				
		2001 SHAWNEE MISSION	יגשאסגם	7				
• The beeks a	re in the core of l	SHAWNEE MISSION	PAKKWA.	<u>-</u>		KS	6620	=
		3-677-5300	FAX No.				0020.	,
				• • • •				ightharpoonup
_		ot have an office or place of business rn, enter the organization's four digit G						
	· ·	—						
-	roup, check the		trie group, c	and attack	ı			
		s of all members the extension is for.		- F 000 T)				
		3-month (6 months for a corporation re			_			
	•		n for the org	anization named above. The extension i	S			
. —	rganization's re							
	calendar year							
▶ 📙 1	ax year beginn	ing , and ending		•				
2 If this tax	vear entered i	n line 1 is for less than 12 months, cho	eck reason:	Initial return Final return				
	ange in accour		J., 1000011					
		and poriod			_,			
3a If this ap	plication is for i	Form 990-BL, 990-PF, 990-T, 4720, or	r 6069, enter	the tentative tax, less any				
nonrefun	dable credits	See instructions			3a	\$	2	2,106
b If this ap	plication is for l	Form 990-PF, 990-T, 4720, or 6069, e	nter any refu	indable credits and				
		made Include any prior year overpay	-		3b	\$		106
		line 3b from line 3a Include your payn						
		Payment System). See instructions			3с	\$	2	2,000

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

Form 8868 (F	Rev. 1-2011)					Page 2
	filing for an Additional (Not Automatic) 3-Month Ex	xtension, co	implete only Part II and check this box			▶ X
	omplete Part II if you have already been granted an a			orm 886	3.	
	filing for an Automatic 3-Month Extension, comple					
Part II	Additional (Not Automatic) 3-Month E			no cor	oies neede	d).
Type or print	Name of exempt organization			Empl	oyer identific	ation number
File by the	THE ATTERBURY FAMILY FOU	NDATIO	N	48-	1202943	3
extended	Number, street, and room or suite no. If a P.O. bo	x, see instru	ctions			
due date for filing your	2001 SHAWNEE MISSION PAR	KWAY				
return See	City, town or post office, state, and ZIP code For	a foreign add	dress, see instructions.			
instructions	SHAWNEE MISSION KS	66205	5		-	· · · · · · · · · · · · · · · · · · ·
Enter the Ret	urn code for the return that this application is for (file	a separate a	application for each return)			04
Application	ı	Return	Application			Return
Is For		Code	Is For			Code
Form 990		01				
Form 990-B	JL	02	Form 1041-A			08
Form 990-E	Z	03	Form 4720			09
Form 990-P	'F	04	Form 5227			10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	06	Form 8870	:		12
STOP! Do not	t complete Part II if you were not already granted a	in automatic	3-month extension on a previously f	iled For	n 8868.	
	DAVID L WOODS	D 3 D 1/1/13 3	17			
	2001 SHAWNEE MISSION	PARKWA	Y		7/0	66205
	are in the care of ► SHAWNEE MISSION	FAVAL I			KS	66205
-	e No ▶ 913-677-5300 .	FAX No	•			⊾ □
_	inization does not have an office or place of business or a Group Return, enter the organization's four digit (•		
				attach a		
-	imes and EINs of all members the extension is for	t or the group	p, check this box	allacii a		
	an additional 3-month extension of time until 11,	/15/11	·····			
	endar year 2010, or other tax year beginning		, and ending			
	x year entered in line 5 is for less than 12 months, ch			•		
	hange in accounting period					
	detail why you need the extension					
	TIONAL TIME IS REQUESTED !	TO GATI	HER INFORMATION TO 1	PREPA	ARE A C	OMPLETE
	ACCURATE RETURN.		·			
	•		•			· ·
8a If this ap	oplication is for Form 990-BL, 990-PF, 990-T, 4720, o	r 6069, ente	r the tentative tax, less any			
nonrefur	ndable credits. See instructions.			8a	\$	<u>1,576</u>
b If this ap	plication is for Form 990-PF, 990-T, 4720, or 6069, e	enter any refu	undable credits and	- [
estimate	ed tax payments made Include any prior year overpa	yment allowe	ed as a credit and any]	
amount	paid previously with Form 8868.			8b	\$	2,106
c Balance	Due. Subtract line 8b from line 8a. Include your pay	ment with thi	s form, if required, by using EFTPS			
(Electror	nic Federal Tax Payment System) See instructions.			8c	\$	0
			d Verification			
	of perjury, I declare that I have examined this form, including	accompanying	schedules and statements, and to the best of	my knowl	edge and belief,	ıt ıs
ue, correct, and	i complete, and that I am authorized to prepare this form					
Signature		Title	e ▶		Date -	

Form **8868** (Rev 1-2011)