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### **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

2011

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

For	cale	ndar year 2011, or tax year beginning		, 2	2011, and end	ling	, 20
_		of foundation				A Employer identif	fication number
		JENKINS FOUNDATIO	N			27-046777	78
N	umbe	er and street (or P.O. box number if mail is	s not delivered to street a	ddress)	Room/suite	B Telephone number	er (see instructions)
		1765 CYPRESS POIN		,		734-663-7	
C	itv or	town, state, and ZIP code	·-··			C If exemption application check here	is pending,
	.,	ANN ARBOR MI 4810	8			check here .	
G	Chec	k all that apply: Initial return	Initial Return of a f	ormer public	charity	D 1 Foreign organization	ns, check here
		Final return	Amended return	, , , , , , , , , , , , , , , , , , ,		Foreign organization test, check here and	ns meeting the 85%
		Address change	Name change			E If private foundation sta	tus was
<del></del>	Chec		(c)(3) exempt private fou	ndation		terminated under section 507(b)(1)(A), check her	
		on 4947(a)(1) nonexempt charitable trust			ın	507 (5)(1)(1), 61.061(1)61	
			Accounting method.		Accrual	F If the foundation is in a	60-month
		arket value of all assets at end of om Part II, col. (c), line 16)	Other (specify)	00311	Accidal .	termination under section 507(b)(1)(B), check her	
<b>▶</b> \$		385.	(Part I, column (d) must	he on cash b	nacie )	SON BY THE P	
		Analysis of Revenue and Expenses	1	De on Cash L	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	L	(d) Dishurasments
		(The total of amounts in columns (b),	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable
		(c), and (d) may not necessarily equal the amounts in column (a) (see instr.).)	expenses per books	inco	me	ıncome	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received	140,007.				(GEGIT GUGIG GITT)
	2	Check ► I if the foundation is not required to attach Sch B	140,007.			The second secon	
	3	<del>-</del> :	340.		340.		The annual control of the control of
	4	Interest on savings and temp cash investments	340.		340.		at at the common number are an design
	l '	Dividends and interest from securities					
		Gross rents				X(X)	- many make a sum
	b	income or (loss)					1
ne ne	6a	Net gain/(loss) from sale of assets not on line 10 Gross sales price for	Miller		3 7 7 3 4		
Revenue	_b	all assets on line 6a				A-	
Se.	7	Capital gain net income (from Part IV, line 2)				«/ s	<u> </u>
	8	Net short-term capital gain	3 va v	2.7.2	<del></del>		
	9	Income modifications		<del></del>			and the second s
	10a	rins & allowances Less Cost of					
	b	goods sold					
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	140 247				
	12	Total. Add lines 1 through 11  Compensation of officers,	140,347.		340.		
	13	directors, trustees, etc					
<b>'</b> 0	14	Other employee salaries and wages				· <del></del> .	
ßes	15	Pension plans, employee benefits					
þer		Legal fees (attach schedule)					
Ä		Accounting fees (attach schedule)					
Vē	С	Other professional fees (attach schedule)				<del></del>	
irat	17	Interest		RECE	IVED		
Operating and Administrative Expens	18	Taxes (attach schedule) (see instructions)				<u>u</u>	
Ē	19	Depreciation (attach sch.) and depletion			A 6027	08	
¥	20	Occupancy	<u>  [8]</u>	SEP 1	0 2012	(A)	
and	21	Travel, conferences, and meetings .	10			8	ļ
, gu	22	Printing and publications		OGDE	TU_M		
atiı	23	Other expenses (attach schedule) .					
je l	24	Total operating and administrative					
0		expenses. Add lines 13 through 23 .					
	25	Contributions, gifts, grants paid	280,000.		i.		280,000.
	26	Total exp & disbursements Add lines 24 and 25	280,000.				280,000.
	27	Subtract line 26 from line 12:		-	· compact		
	a	Excess of revenue over expenses and disbursements	(139,653.)	mar a state and		: 1- <u></u>	
		Net investment income (if neg, enter -0-)			340.		
	С	Adjusted net income (if neg , enter -0-)			B		
		nuarly Raduction Act Notice, and instru					<u> </u>

1 Cash - non-interest-bearing memors of the control of the contr	D:	art II	Attached schedules and amounts in the Balance Sheets description column should be for	Beginning of year	End	of year
2 Savungs and temporary cash investments  3 Accounts receivable ► Less: allowance for doubtful accts. ►  4 Piedges receivable ► Less: allowance for doubtful accts. ►  5 Grants receivable ← 6 Receivables due from officers, directors, trustees, and other desqualified persons (attach schedule) (see the instructions) receivable (attach orbidate) Less: allowance for doubtful accts. ►  5 Inventiories for sale or use.  9 Piepad expenses and deferred charges.  10 Investments - U.S. and state gout, obligations (attach schedule) c Investments - U.S. and state gout, obligations (attach schedule) c Investments - U.S. and state gout, obligations (attach schedule) c Investments - U.S. and state gout, obligations (attach schedule) c Investments - State (attach schedule) 11 Investments - University of the schedule or			end-of-year amounts only (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable		1	•	110.000		
Accounts receivable ► Less at swarp compared to the compared		3	Savings and temporary cash investments	140,038.		385.
Piedges receivable ► Less: allowance for doubtful acits. ► Grants receivable  8 Receivables due from officers, directors, bustiess, and other disqualified persons (attach schedule) (see the instructions) receivable (abinat senses)  9 Prepard expenses and deferred charges.  10 Investments - Corporate stock (attach schedule)  10 Investments - Corporate stock (attach schedule)  11 Investments - Corporate stock (attach schedule)  12 Investments - Corporate stock (attach schedule)  13 Investments - Corporate stock (attach schedule)  14 Lend, expenses and deferred charges.  15 Investments - Corporate stock (attach schedule)  16 Investments - Corporate stock (attach schedule)  17 Investments - Corporate stock (attach schedule)  18 Investments - Corporate stock (attach schedule)  19 Investments - Corporate stock (attach schedule)  10 Investments - Mortingal forms.  10 Investments - Mortingal forms.  10 Investments - Mortingal forms.  10 Investments - Orber (attach schedule)  14 Lend, exider, and expenses lends.  15 Other assets (descrebe ▶  16 Total assets (to be combelled by all filters - see the instructions Also, see appeal + Item 1)  17 Accounts payable and accrued expenses.  18 Grants (payable)  19 Corporate revenue  20 Loans from officers, directors, fusities, and other disqualified persons.  19 Crafts (payable)  20 Cher labilities (add lines 17 through 22)  21 Total liabilities and lines 24 through 28 and lines 30 and 31.  22 Total liabilities and not assets/fund balances (see instructions)  23 Total liabilities and not assets/fund balances (see instructions)  24 Unrestricted.  25 Temporardy restricted  26 Permanently restricted  27 Total amount from Part I, line 27 and a decipient fund a sease for fund balances (see instructions)  28 Relates administration on repairs fund balances (see instructions)  29 Relates administration on total balances at beginning of year - Part II, column (a), line 30 (must agree with end of-year grant on through 31.  20 Capital surplus, or fand, bldg, and equipment fund a sease for		3	Accounts receivable▶	* * * * * * * * * * * * * * * * * * * *		
Less: allowance for doubtful accts. ►  5 Grants receivable  6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) receivable (fatter) schedule; best allowance for a schedule; best allowance for best accessed to the schedule; best allowance for schedule; best allowance for schedule; best allowance for schedule; best allowance for schedule; best accessed for schedule; best access			Less <sup>-</sup> allowance for doubtful accts. ▶	<u></u>		
Less: allowance for doubtful accis. P  5 Grants receavable 6 Receivables due from officers, directors, trustees, and other discountified persons (attach schedule) (see the instructions) receivable plates desided seconds and save receivable plates desided plates and save receivable plates desided seconds and save receivable plates desided by the save receivable plates and save receivable seconds and save receivable of investments - corporate bonds (attach schedule) c. Investments - corporate bonds (attach schedule) c. Investments - corporate bonds (attach schedule) d. Investments - deriver designents - deriver desig		4	Pledges receivable ▶		* * * * *	( ) ( )
8 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) receivable (fattach schedule) (see the instructions) receivable (fattach schedule) (see the instructions) receivable (fattach schedule) (see the instructions) (see see see seed of the seed of			Less: allowance for doubtful accts. ▶			
disqualified persons (attach schedule) (see the instructions)  7 Other nores and bans; necessate failtable schedule)  8 Inventiories for sale or use.  9 Prepared expenses and deferred charges.  9 Prepared expenses and deferred charges.  10 Investments - U.S. and state govt. obligations (attach schedule)  b Investments - corporate bonds (attach schedule)  10 Investments - corporate bonds (attach schedule)  11 Investments - corporate bonds (attach schedule)  12 Investments - mortgage loans  13 Investments - order (attach schedule)  14 Land buildons, and equipment basis  15 Investments - order (attach schedule)  16 Total assets (to be completed by all filers - see the instructions, Also, see aged 1, item 1)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred reverue  20 Loans from officors, directors, trustees, and other disqualified persons  10 Other labilities (add lines 17 through 22)  21 Total liabilities (add lines 17 through 22)  22 Total promption in the complete lines 24 through 28 and lines 30 and 31.  23 Total liabilities (add lines 17 through 22)  25 Temporative restricted  26 Permanently restricted  27 Permanently restricted  28 Permanently restricted  29 Permanently restricted  20 Permanently restricted  20 Permanently restricted  20 Permanently restricted  21 Mortgages and other occurrent funds  22 Permanently restricted  23 Total liabilities (add lines 17 through 31.  24 Unrestricted.  25 Temporative restricted  26 Permanently restricted  27 Permanently restricted  28 Permanently restricted  29 Permanently restricted  20 Permanently restricted  20 Permanently restricted  21 Mortgages and other occurrent funds  22 Permanently restricted  23 Total liabilities and net assetts/fund balances (see instructions)  30 Total net assets or fund balances (see instructions)  31 Total net assets or fund balances at beginning of year - Part II, column (a), Ine 30 (must agree with end-of-year figure reported on pror years return)  25 Enter amount from Part I, line 27.  26 Decreases not include		5	Grants receivable			
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To Other motes and loans to the complete of t		6	Receivables due from officers, directors, trustees, and other			
Section   Propose   Compose   Propose   Prop		l _	disqualified persons (attach schedule) (see the instructions)			
Less allowencers   Less allowe		7	Other notes and loans receivable (attach schedule)	÷ 1 1 3 1	*	1
Investments - Corporate stock (attach schedule)			Less allowance for			
98 P Prepaid expenses and deferred charges	छ	8			-	
Total lassets (to be completed by all filers - see the instructions. Also, soep page 1, stem 1)   140,038. 385. 385.	Se	9				
b Investments - corporate stock (attach schedule)  (a) Investments - corporate bonds (attach schedule)  (b) Investments - corporate bonds (attach schedule)  (c) Investments - mortgage loans  (d) Investments - other (attach schedule)  (e) In	Ř	1				
c Investments - corporate bonds (attach schedule)  11		1	·			
Investments - Inch. buildings.   Investments - Investments - Inch. buildings.   Investments - Investments		1	F			
12   Investments - orthor(gage loans   12   Investments - orthor(gage loans   13   Investments - orthor(gage loans   14   Loand, butdings, and equipment loans   15   Other assets (describe   16   Total assets (describe   17   Total assets (desc		1		<del>,,!</del>		V. 2 . 30 . 4
13 Investments - other (attach schedule)		١	Less accumulated depreciation			1
13   Investments - other (attach schedule)     14   Land, buildings, and equipment basis   Less accumulated expension   March 2000     15   Other assets (describe   March 2000   March 2		12	(attach schedule)			
14   Land, buildings, and equipment basis		'-				
Less accumulated experication (altitot schedule)  15 Other assets (describe						1 4 1 9
15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item i) 140,038. 385. 385. 385. 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (ded lines 17 through 22)		14	Less accumulated depreciation		, ,	· · · · · ·
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item!)  17 Accounts payable and accrued expenses  18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted. 25 Temporarily restricted 26 Permanently restricted 27 Expensive the stricted 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 29 Retained earnings, accumulated income, endowment, or other funds 31 Total inabilities and net assets of fund balances (see instructions) 31 Total net assets or fund balances (see instructions) 31 Total and assets or fund balances at beginning of year - Part III, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 140,038. 2 Enter amount from Part I, line 27a 2 (139,653.) 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ 5		4.5	(attach schedule)			+
17 Accounts payable and accrued expenses   18 Grants payable   19 Deferred revenue   10 Deferred revenue					<del></del>	<u> </u>
Begin Service		16	Total assets (to be completed by all filers - see the	140.038.	385.	385.
18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here ▶ ☑ and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted. 1440,038. 385.  25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, ck. 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 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 140,038. 385.  1 Total liabilities and net assets/fund balances (see instructions) 385.  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return) 140,038.  2 Enter amount from Part I, line 27a 2 (139,653.)  4 Add lines 1, 2, and 3 4 385.  5 Decreases not included in line 2 (itemize) ▶ 5	_	17				
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Foundations that follow SFAS 117, check here   and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted	Ë					<b>-</b>   × · ′
Foundations that follow SFAS 117, check here		22	Other Rabinues (describe)		<del></del>	
Foundations that follow SFAS 117, check here		22	Total lightilisian (add lines 17 through 22)			
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Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	ă	i .			· •	1
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	Ba	26	· · · · · · · · · · · · · · · · · · ·			
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	5		<u> </u>			
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	Z		-			
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	ģ	1				
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			, » <b>*</b>
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	A SS	29	Retained earnings, accumulated income, endowment, or other funds			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total liabilities and net assets/fund balances (see instructions)  140,038.    140,038.   385	et/					, set ( ' '
instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 140,038.  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5	Z	30	Total net assets or fund balances (see instructions)	140,038.	385.	
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		31	Total liabilities and net assets/fund balances (see			, i
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)			instructions)	140,038.	385.	۶۰
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2 Enter amount from Part I, line 27a 2 (139,653.)  3 Other increases not included in line 2 (itemize) ▶ 3  4 Add lines 1, 2, and 3					· · · · · · · · · · · · · · · · · · ·	140,038.
3 Other increases not included in line 2 (itemize) ▶			• • •			
4 Add lines 1, 2, and 3						<u> </u>
5 Decreases not included in line 2 (itemize) ▶5						385
				• • • • •		1
				art II, column (b), line 30		385.

P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.	′	<i>(3</i> *)	, \$*,
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)		ر نگه ندوید	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐			7.
	and enter 1% of Part I, line 27b		end i	·` .
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter		,ST	- 3
	4% of Part I, line 12, col. (b).		1 m *	1
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3	Add lines 1 and 2			7.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			7.
6	Credits/Payments.	، څکن	ě-,,,	
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6	M.	, K	100
b	Exempt foreign organizations - tax withheld at source	~ <u>.</u>	Ŝ	
С	Tax paid with application for extension of time to file (Form 8868) 6c	, Š.,	1	
d	Backup withholding erroneously withheld		·	
7	Total credits and payments. Add lines 6a through 6d			
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, enteramount owed			7.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
-	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11			
	art 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 participate or		Yes	No
	Intervene in any political campaign?	1a		Х
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for	41.		v
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	¥*		
_	or distributed by the foundation in connection with the activities	 1c		X
	Did the foundation file Form 1120-POL for this year?	10 20	\$ 47.8	75
u	(1) On the foundation. > \$ (2) On foundation managers. > \$	ž,	<b>&gt;</b>	
Α.	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	ár.		, (4
Ŭ	on foundation managers > \$	U.P. 63.	**	* ]
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	was as as		ر ہے۔ مستسقہ
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
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.		, 666	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	, v.y.	,	
	By language in the governing instrument, or	3,00		.
	By state legislation that effectively amends the governing instrument so that no mandatory directions			لـــ
	that 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 instructions)  MI	•		
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) of each state as required by General Instruction G? If "No," attach explanation	8b		Х
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV in instructions)? If "Yes,"			J
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X

Form 990-PF (2011)

Form 990-PF (2011)

Х

X

3b

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

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 2011? ........

Form **990-PF** (2011)

Total number of other employees paid over \$50,000.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see the instructions). If none, enter "NONE." (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 List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info such Expenses as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 DONATION TO FUND BRAIN TUMOR RESEARCH AT UNIVERSITY OF MICHIGAN 280,000. Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions 

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign found	dations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	134,379.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	134,379.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	1	
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	134,379.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,		
	see instructions)	4	2,016.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	132,363.
6	Minimum investment return. Enter 5% of line 5	6	6,618.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ns	- <del>-</del> ·
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	6,618.
2 8	a Tax on investment income for 2011 from Part VI, line 5	] ]	
ı	Income tax for 2011. (This does not include the tax from Part VI.)		
(	Add lines 2a and 2b	2c	7.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,611.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,611.
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	6,611.
E	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Ti	
٠,	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	280,000.
	p Program-related investments-total from Part IX-B	1b	· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
-	a Suitability test (prior IRS approval required)	3a	
	co Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	280,000.
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	280,000.
_	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	oundati	
	musified for the parties (OANA) adjustion of the in these years		

Form 990-PF (2011)

Page 9

Undistributed Income (see instructions) Part XIII (b) (c) (d) (a) Corpus Years prior to 2010 2010 2011 1 Distributable amount for 2011 from Part XI. 6,611 line 7 Undistributed income, if any, as of the end of 2011 1,148. a Enter amount for 2010 only **b** Total for prior yrs.: 20 \_\_\_\_, 20\_\_\_\_, 20 Excess distribs. carryover, if any, to 2011. a From 2006 .... **b** From 2007 ... c From 2008 . ... **d** From 2009 . . . . e From 2010 . . . f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, 280,000. line 4. ▶ \$ 1,148. a Applied to 2010, but not more than line 2a. **b** Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) ... 6,611 d Applied to 2011 distributable amount ... 272,241. e Remaining amt distributed out of corpus . Excess distribs, carryover applied to 2011 (If an amount appears in column (d), the . . . same amount must be shown in col. (a).) . 6 Enter the net total of each column as indicated below: 272,241. a Corpus Add lines 3f, 4c, & 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 É amount - see instructions e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount see instructions . . f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) ...... 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) .... Excess distributions carryover to 2012. 272,241. Subtract lines 7 and 8 from line 6a...... 10 Analysis of line 9. a Excess from 2007 b Excess from 2008 c Excess from 2009 d Excess from 2010

e Excess from 2011.

272,241.

Pá	art XIV Private Operating Found	lations (see instr	ructions and Part VII	I-A, question 9)		
1a	If the foundation has received a ruling or d	etermination letter t	hat it is a private op	erating		
	foundation, and the ruling is effective for 2	011, enter the date	of the ruling	▶		
b	Check box to indicate whether the foundat	ion is a private oper	rating foundation des	scribed in section	4942(j)(	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
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			
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					11
b	"Endowment" alternative test - enter					
	2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"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) · · · · · · · · · · · · · · · · · · ·		1			
	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					<del> </del>
P	art XV Supplementary Informat	ion (Complete	this part only if	f the foundation	had \$5 000 or n	nore in
	assets at any time during			i ilic rounduion	40,000 01 11	
1	Information Regarding Foundation Man					
	List any managers of the foundation who hof any tax year (but only if they have contr	nave contributed mo			ved by the foundation	on before the close
b	List any managers of the foundation who c partnership or other entity) of which the foundation			oration (or an equally l	arge portion of the c	ownership of a
2	Information Regarding Contribution, Gr Check here ▶ ☐ If the foundation only requests for funds. If the foundation makes complete items 2a, b, c, and d.	y makes contributio	ns to preselected ch	naritable organizations		
а	The name, address, and telephone number	er of the person to w	hom applications sh	nould be addressed:		
	-					
Ρŀ	HIL JENKINS 6589 JACK	SON RD AND	N ARBOR MI	48103		
b	The form in which applications should be s	submitted and inform	nation and materials	s they should include:		
c	Any submission deadlines:					
NC	ONE					
_	Any restrictions or limitations on awards, s	uch as hy geograph	ncal areas charitable	le fields, kinds of insti	tutions or other foot	Ore
	NE	out as by geograpi	noon areas, Grantabl	io neius, kinus oi insu	tauono, or outer fact	O13.

Form 990-PF (2011) JENKINS FOUNDATION

Part XV Supplementary Information (continued)

Grants and Contributions Paid Dur	ring the Year or Ap	proved fo	or Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of		Amount
	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  UNIVERSI 4260 PLY 48109	or substantial contributor	501C3	MEDICAL RESEARC	280,000.
Total			▶ 3a	280,000.
b Approved for future payment  Total			▶ 3b	

iter gross am	ounts unless otherwise indicated.		d business income	Excluded by s	section 512, 513, or 514	(e)
•		(a) Business	(b) Amount	(c) Excl	(d) Amount	Related or exempt function income (See instructions.)
_	service revenue:	code		code		
				+-+		
e						
g Fees and	contracts from government agencies			<del>                                     </del>		
•	hip dues and assessments		_	<del>  -  </del>		
	avings and temporary cash investments			14	340.	
Dividends	and interest from securities					
Net renta	I income or (loss) from real estate:	2, 4			77.8	** · · · ·
a Debt-finar	nced property			<u> </u>		
	financed property		- · · · · -			
	l income or (loss) from personal property					<del>-</del> · · · · · · · · · · · · · · · · · · ·
	estment income			+		-
•	) from sales of assets other than inventory		<del> </del>	+ +-		
	ne or (loss) from special events .		<del></del>	<del> </del>		
	ofit or (loss) from sales of inventory enue. a	-		<del> </del>		
L				<del>                                     </del>		
				1 1		
	i					
d						
d e				1		
е	Add columns (b), (d), and (e)			**	340.	
e Subtotal Total. Ad	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e)			36.4		340.
Subtotal Total. Addee worksheet	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation	ns)			13	340.
Subtotal Total. Addee worksheet	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t	ns ) <b>he Accom</b>	plishment of Exe	empt Purp	13	
Subtotal Total. Added worksheet art XVI-B	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t Explain below how each activity for wh	he Accom nch income is	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad the worksheet art XVI-B tine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom nch income is	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
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Subtotal Total. Ad e worksheet art XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom nch income is	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet art XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom nch income is	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet art XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet art XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
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Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
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Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
Subtotal Total. Ad e worksheet Irt XVI-B ine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the
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Subtotal Total. Ad the worksheet art XVI-B tine No.	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) in line 13 instructions to verify calculation Relationship of Activities to t  Explain below how each activity for wh accomplishment of the foundation's ex	he Accom	plishment of Exc reported in column (e	empt Purp	DOSES I-A contributed importa	antly to the

### Form 990-PF (2011) JENKINS FOUNDATION 27-0467778 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of. Х 1a(1) X (2) Other assets 1a(2) **b** Other transactions. Х (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets .......... 1b(3) X (4) Reimbursement arrangements . . . . 1b(4) X 1b(5) (5) Loans or loan guarantees ... X (6) Performance of services or membership or fundraising solicitations ..... 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees ... d If the answer to any of the above is "Yes," complete the following schedule. Column(b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Desc. of transfers, transactions, and sharing arrangements (a) Line no Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in Yes X No section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ...... If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship

Sign/	Under penalties of perjury, I declare that I have example belief, it is true, correct, and complete Declaration of						dge and
Here	Famul Co	w	09/01/2012	DIRECTO	R	1	e IRS discuss this return e preparer shown below
_/\	Signature of officer or trustee		Date	Title		(see in:	structions)? X Yes No
Paid	Print/Type preparer's name	Pr	eparer's signature	Date	Check	ıf	PTIN

**Preparer Use Only** 

SANDRA D HENNESSEY||

BRIGHTON MI 48114

09/01/2012 self-employed P0037246

▶PROFESSIONAL MANAGEMENT SERVIC Firm's name Firm's address ▶1229 S OLD US 23

Firm's EIN ▶ 27 - 0273165 Phone no. 810-225-9955

Form 990-PF (2011)

# Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No. 1545-0047

2011

Name of the organization JENKINS FOUNDAT	ION	Employer identification number 27-0467778
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	Solution 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	ered by the <b>General Rule</b> or a <b>Special Rule.</b> s), or (10) organization can check boxes for both the General Rule and a Special Ri	ule. See instructions.
General Rule		
For an organization filing For from any one contributor. C	orm 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mon omplete Parts I and II.	ey or property)
Special Rules		
sections 509(a)(1) and 170(	anization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regular (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution opent on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts	of the greater of(1)
total contributions of more t	or (10) organization filing Form 990 or 990-EZ that received from any one contribution \$1,000 for use exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III.	- ·
contributions for use exclus  If this box is checked, enter purpose. Do not complete a	or (10) organization filing Form 990 or 990-EZ that received from any one contributions for religious, charitable, etc., purposes, but these contributions did not total to here the total contributions that were received during the year for an exclusively read of the parts unless the <b>General Rule</b> applies to this organization because it receives of \$5,000 or more during the year	more than \$1,000. eligious, charitable, etc.,
but it must answer "No" on Part I'	not covered by the General Rule and/or the Special Rules do not file Schedule B (IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	• • • • • • • • • • • • • • • • • • • •
or Paperwork Reduction Act No	tice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (F	orm 990, 990-EZ, or 990-PF) (2011

Employer identification number 27-0467778

Part I	Contributors (see instructions) Use duplicate copies of	Part I if additional space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	JENKINS CHARITABLE TRUST PO BOX 75000 MC3302		Person X Payroll Noncash
	DETROIT MI 48275-3302		(Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a
(a)	(b)	(c)	noncash contribution.) (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person Payroll Noncash
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II  If there is a  noncash contribution.)

### 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

	e Service 7 1110 C		<u> </u>			
<ul><li>If you ar</li></ul>	e filing for an Automatic 3-Month Extension, cor	mplete only	Part land check this box			▶ 🛚
<ul><li>If you ar</li></ul>	e filing for an Additional (Not Automatic) 3-Mont	th Extension	, complete only Part II (on page 2 of this for	orm).		
Do not com	iplete Part II unless you have already been grante	ed an automa	itic 3-month extension on a previously filed	Form 8868.		
Electronic f	filing (e-file). You can electronically file Form 8868	3 if you need	a 3-month automatic extension of time to fil	e (6 months	for a co	rporation
required to fi	ile Form 990-T), or an additional (not automatic) 3	-month exten	sion of time. You can electronically file Forr	n 8868 to re	quest ar	extension
of time to file	e any of the forms listed in Part I or Part II with the	exception of	Form 8870, Information Return for Transfer	rs Associate	d With C	Certain
Personal Be	nefit Contracts, which must be sent to the IRS in p	paper format	(see instructions). For more details on the e	lectronic fili	ng of this	6
form, visit w	ww irs gov/efile and click on e-file for Charities & N	lonprofits.				
Part I	Automatic 3-Month Extension of Tin	<b>1e.</b> Only s	submit original (no copies needed).			
A corporatio	n required to file Form 990-T and requesting an au	utomatic 6-me	onth extension - check this box and complete	te Part I only	<i>,</i>	▶ 📙
All other cor	porations (including 1120-C filers), partnerships, R	EMICs, and	trusts must use Form 7004 to request an ex	ctension of t	ime	
to file incom	e tax returns					
Type or	Name of exempt organization		E	Employer ic	lentifica	tion number
print	JENKINS FOUNDATION		2	27-046	7778	
File by the due date for	Number, street, and room or suite no. If a P.O.		ructions.			
filing your return See	1765 CYPRESS POINTE COU		· · · · · · · · · · · · · · · · · · ·			
instructions	City, town or post office, state, and ZIP code. F	or a foreign a	address, see instructions.			
	ANN ARBOR MI 48108					
Enter the Re	eturn code for the return that this application is for	(file a separa	te application for each return)			04
			r			T-=
Application	1	Return	Application			Return
Is For		Code	ls For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-BI	· · · · · · · · · · · · · · · · · · ·	02	Form 1041-A			08
Form 990-E	<del> </del>	03	Form 4720			09
Form 990-P		04	Form 5227			10
	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
<ul><li>Telepho</li><li>If the org</li><li>If this is</li></ul>	oks are in the care of ▶ PHIL JENKINS one No. ▶ F ganization does not have an office or place of busi for a Group Return, enter the organization's four do ox ▶  If it is for part of the group, check this bo	ligit Group Ex	cemption Number (GEN) If the	 his is for the ill members	_	
	<del></del>		file Form 990-T) extension of time until inization return for the organization named a	above. The	extensio	on is for the
	ation's return for:					
_ ^ ₽	calendar year 20 <u>11</u> or					
► ∐ t	calendar year 2011 or tax year beginning	, <sup>20</sup>	, and ending		—— , <i>'</i>	20
	x year entered in line 1 is for less than 12 months, inge in accounting period	check reasor	n 📗 Initial return 📗 Final return			
3a If this ap	oplication is for Form 990-BL, 990-PF, 990-T, 4720	, or 6069, en	ter the tentative tax, less any nonrefundable	•		
	See instructions.			3a	\$	7.
•	oplication is for Form 990-PF or 990-T, 4720, or 60	-	refundable credits and estimated tax paym	nents		_
made. Ir	nclude any prior year overpayment allowed as a cr	edit		3b	\$	
c Balance	due. Subtract line 3b from line 3a. Include your	payment with	this form, if required,			
by using	EFTPS (Electronic Federal Tax Payment System	). See instru	ctions	3c	\$	7.
Caution. If v	you are going to make an electronic fund withdraw	al with this F	orm 8868, see Form 8453-FO and Form 88	79-EO for n	avment i	

	e filing for an Additional (Not Automatic) 3-Mor					
Note. Only o			n, complete only Part II and check this box			▶ 🛚
	complete Part II if you have already been granted	an automatic	3-month extension on a previously filed For	m 8868.		
If you ar	e filing for an Automatic 3-Month Extension, co	mplete only	Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month			pies neede	d).	
Type or print	Name of exempt organization JENKINS FOUNDATION			Employer i 27 - 046		tion number
File by the extended	Number, street, and room or suite no. If a P.O. 1765 CYPRESS POINTE COU		tructions.			
due date for iling your	City, town or post office, state, and ZIP code.		addrass, san instructions			
return See nstructions	ANN ARBOR MI 48108	-or a foreign a				
Enter the Re	eturn code for the return that this application is for	(file a separa	ate application for each return):			04
Application		Return	Application			Return
s For		Code	Is For			Code
Form 990		01		· · · · · · · · · · · · · · · · · · ·		
orm 990-B	L	02	Form 1041-A		A & - CO A - A - C/-	08
orm 990-E		03	Form 4720	<del> </del>		09
orm 990-P	F	04	Form 5227			10
orm 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11
orm 990-T	(trust other than above)	06	Form 8870			12
TOP! Do r	not complete Part II if you were not already gra	inted an auto	matic 3-month extension on a previously	filed Forn	n 8868.	·
	ks are in the care of ▶ PHIL JENKINS					
		FAX No.▶				
•	ganization does not have an office or place of bus	siness in the U	Jnited States, check this box			▶ [
	for a Group Return, enter the organization's four					_
	ox ▶ . If it is for part of the group, check this		nd attach a list with the names and EINs of			
	t an additional 3-month extension of time until		NOV 15,20	12		
•	ndar year 2011, or other tax year beginning		, 20 , and ending	-	, 2	Ο.
6 If the tax	x year entered in line 5 is for less than 12 months nge in accounting period	, check reaso	n: Initial return Final return			
i i Uild						
	detail why you need the extension ADDITI	ONAL TI	ME NEEDED TO OBTAIN			
7 State in			ME NEEDED TO OBTAIN			
7 State in	detail why you need the extension ADDITION A NECESSARY TO PREPARE CO					
7 State in						
7 State in DAT	A NECESSARY TO PREPARE C	OMPLETE	RETURN	9		
7 State in DAT	A NECESSARY TO PREPARE Consideration is for Form 990-BL, 990-PF, 990-T, 472	OMPLETE	RETURN	II	\$	7.
7 State in DAT  Ba If this apprendicts.	A NECESSARY TO PREPARE Consideration is for Form 990-BL, 990-PF, 990-T, 472 See instructions.	OMPLETE 0, or 6069, er	RETURN	8a	\$	7.
7 State in DAT  Ba If this ap credits. b If this ap	A NECESSARY TO PREPARE Consideration is for Form 990-BL, 990-PF, 990-T, 472 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606	OMPLETE  0, or 6069, er  9, enter any r	nter the tentative tax, less any nonrefundable refundable credits and estimated tax payme	8a nts		7.
7 State in DAT  Ba If this ap credits. b If this ap made. In	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 472 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complex of the prior year overpayment allowed as a complex of the prior year overpayment allowed as a complex overpayment allowed a	OMPLETE  0, or 6069, er  9, enter any redit and any	nter the tentative tax, less any nonrefundable refundable credits and estimated tax payme amount paid previously with Form 8868.	8a		7.
7 State in DAT  Ba If this ap credits. b If this ap made. Ir c Balance	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 472 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 600 include any prior year overpayment allowed as a complete due. Subtract line 8b from line 8a. Include you	OMPLETE  0, or 6069, er  9, enter any recedit and any repayment with	nter the tentative tax, less any nonrefundable refundable credits and estimated tax payme amount paid previously with Form 8868.	nts 8b	\$	
7 State in DAT  Ba If this ap credits. b If this ap made. Ir c Balance	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 4720 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complete of the complete of	OMPLETE  0, or 6069, er  69, enter any redit and any repayment with n) See instru	refundable credits and estimated tax payme amount paid previously with Form 8868. In this form, if required, actions.	8a nts	\$	
7 State in DAT  Ba If this ap credits. b If this ap made. In Balance by using	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 4720 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complete of the complete of	OMPLETE  0, or 6069, er  69, enter any recedit and any repayment with n) See instru	nter the tentative tax, less any nonrefundable refundable credits and estimated tax payme amount paid previously with Form 8868. In this form, if required, actions .	nts 8b	\$	7.
7 State in DAT  Ba If this ap credits. b If this ap made. In c Balance by using	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 472 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complete of the subtract line 8b from line 8a. Include you get EFTPS (Electronic Federal Tax Payment System Signal Street of perjury, I declare that I have examined this	OMPLETE  0, or 6069, er  69, enter any recedit and any repayment with n) See instruction acture and a form, including	refundable credits and estimated tax payme amount paid previously with Form 8868. In this form, if required, juctions .  Verification  ng accompanying schedules and statement	nts 8b	\$	7.
7 State in DAT  Ba If this ap credits. b If this ap made. In c Balance by using	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 4720 See instructions.  Oplication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complete of the complete of	OMPLETE  0, or 6069, er  69, enter any recedit and any repayment with n) See instruction acture and a form, including	refundable credits and estimated tax payme amount paid previously with Form 8868. In this form, if required, juctions .  Verification  ng accompanying schedules and statement	nts 8b	\$	7.
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7 State in DAT  Ba If this ap credits. b If this ap made. In Balance by using	A NECESSARY TO PREPARE Complication is for Form 990-BL, 990-PF, 990-T, 4720 See instructions.  Optication is for Form 990-PF, 990-T, 4720, or 606 include any prior year overpayment allowed as a complete and the second s	OMPLETE  0, or 6069, er  9, enter any recedit and any repayment with n) See instruction acture and second form, including the prepayment of the prepayment o	refundable credits and estimated tax payme amount paid previously with Form 8868. In this form, if required, juctions .  Verification  ng accompanying schedules and statement	nts 8b	\$ e best of	7. my knowledg

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US 990PF			Substantial Contributors						2011
			Address						
	Name				(Enter street,	zip code, state	e, and city, in that 3302 MIDE	order)	
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