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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

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

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning						, 2	2009, and end	ding	, 20
G Check all that apply: Initial return Amended return		n	Initial return of a former public charity Address change Name			Final return			
Use	the IR	S Name of foundation					11	A Employer Identifi	cation number
	label.	Paul Family	Founda	tion				20-4100160	
Oth	erwise				ot delivered to sta	reet address)	Room/suite	B Telephone number	r (see instructions)
	print	201 S Kansa			0. 00	, , , , , , , , , , , , , , , , , , , ,	1 1007117 00110	(785)232-0	-
	r type.				· · · · · · · · · · · · · · · · · · ·			C If exempt, application	
	Specification	s. Topeka KS 6						D 1. Foreign organiz	· · · · · · · · · · · · · · · · · · ·
				c)(3) ovon	npt private four	ndation		2. Foreign organizati	ons meeting the 85%
		مرر 4947(a)(1) nonexempt ch		_	er taxable priva		n	E If private foundation	nd attach computation
			•					terminated under	section
		et value of all assets at er	10 01		g method: X	Cash _	Accrual	507(b)(1)(A), chec	
•	ar (tron	n Part II, col (c), line 16)		_	(specify)			termination under	section —
▶\$	- +1 A			irt I, colun	nn (d) must be	on cash bas	SIS.)	507(b)(1)(B), chec	k here
Ра		nalysis of Revenue and he total of amounts in col		(a) Re	venue and	(b) Netur	vestment	(c) Adjusted net	(d) Disbursements for charitable
), & (d) may not necessar			enses per	' '	ome	income	purposes
		nounts in column (a) (see i		t	ooks				(cash basis only)
	• (a	ontributions, gifts, grants, etc. ittach schedule)			16,000				
	2 0	theck ► if the foundation in to attach Sch. B	s not required	ļ					
9 9		iterest on savings and temp. ca	sh investments	<u> </u>	4		4		
,	4 D	ovidends and interest fron	n securities						
2	5 a G	iross rents			_				
•		let rental ncome or (loss)							
5 R		et gain/(loss) from sale of asse	ts not on line 10						
S E		ross sales price for li assets on line 6a							
È		apital gain net income (from Pa	rt IV, line 2),				0		
N		let short-term capital gain						0	<u> </u>
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		ncome modifications						0	
E	10 a G	iross sales less	0						
7	b∟	tns. & allowancesess Cost of							
3	-	oods sold · · · <u> </u>	h schedule)			<u> </u>			
		Other income (attach sche	•			<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	1	Fotal. Add lines 1 through	•		16,004		4	0	
0	40 0	compensation of officers,			0				
P		rectors, trustees, etc							
E. R	14	ther employee salaries al ension plans, employee	wayes						
Ä	15 F	ension plans, employee	Serienis						
Ţ		.egal fees (attach schedui ուժիՍիկութ ieeՁ (attach sc				<u> </u>	-		
I N	122 P	Cogounting tees tattach so	nedule)						
Ĝ	l L-		mch schedule)						
&	17 1	BEDEN, UT	•			ļ			
Α	18	2XOS (attach schedule) (see i							<u> </u>
D	l .	Depreciation (attach sch.) at		<u> </u>		ļ. —			<u> </u>
M	20 (Occupancy				ļ			<u> </u>
Ņ	21	Fravel, conferences, and r	meetings						
E	22 F	Printing and publications.							
X	23 (Other expenses (attach sc	hedule)						
P E	24	Total operating and admi	Inistrative						
N		expenses. Add lines 13 th			0		0	0	0
S		Contributions, gifts, grants	_		16,000				16,000
E	1	otal exp. & disbursements. Ad	•		16,000		0	0	16,000
		Subtract line 26 from line			······································		1		
	l a F	Excess of revenue over (expenses		4			•	
		and disbursements Net investment income (i					4	***************************************	1
		Adjusted net Income (if no	= -			1		0	\\

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions.

Form **990-PF** (2009)

Form	990	-PF(2009) Paul Family Foundation	20-4100160		Page 2
	a tř	Attached schedules and amounts in the	Beginning of year	End o	of year
Pa	rt H	Balance Sheets description column should be for end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing			
	2	Savings and temporary cash investments	989	993	
	3	Accounts receivable ►			
		Less: allowance for doubtful accts. ▶			
	4	Pledges 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)			
A	7	Other notes and loans receivable (attach schedule)			
S		Less allowance for doubtful accounts	_		
S E	8	Inventories for sale or use			
Ŧ	9	Prepaid expenses and deferred charges			
S	10a	Investments U.S and state govt. obligations (attach sch)			
	b	Investments corporate stock (attach schedule)			
		Investments corporate bonds (attach schedule)			
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments mortgage loans			
	13	Investments other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers see the			
		ınstructions. Also, see page 1, item l)	989	993	0
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable]
A B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, and other disqualified persons			
÷	21	Mortgages and other notes payable (attach schedule)]
Ī	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ▶			7
_		and complete lines 24 through 26 and lines 30 and 31.			
NF EU	24	Unrestricted			
ŢΝ	25	Temporarily restricted			
ח	1	Permanently restricted			
A B		Foundations that do not follow SFAS 117, ck. here > X			
EL		and complete lines 27 through 31.			
ТΑ		Capital stock, trust principal, or current funds			_]
s N	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	989	993	
5	30	Total net assets or fund balances (see the instructions)	989	993	
	31	Total liabilities and net assets/fund balances (see the inst.)	989	993	
P		Analysis of Changes in Net Assets or Fund Ba	lances		
1		al net assets or fund balances at beginning of year Part II, colur		e with	
		d-of-year figure reported on prior year's return)			989
2		ter amount from Part I, line 27a			4
3		ner increases not included in line 2 (itemize) ▶			
4		d lines 1, 2, and 3			993
5		creases not included in line 2 (itemize) ▶		5	
-	T-4	tel not accept or fund balances at end of year (line 4 minus line 5) -	- Part II column (b) line	30 6	993

	2007					
_	2006	-				·
	2005					
_	2004					
	Total of line 1, column (d)					0.00000
3	Average distribution ratio for the solution of years the foundation has been					0.000000
4	Enter the net value of noncharitat	ole-use assets for 2009 fr	om Part X, line 5		4	976
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distributions from	ı Part XII, lıne 4			8	16,000
	If line 8 is equal to or greater than instructions.	line 7, check the box in	Part VI, line 1b, and	d complete that part using	g a 1% tax rate. S	See the Part VI

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see the I	nstructio	ns)				
1 a	Exempt operating foundations described in section 4940(d)(2), check here ► X and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of ruling letter if necessary see instructions)			ī/A			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ▶ X and enter 1% of Part I, line 27b						
С	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-) 2						
3	Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4						
5	Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter -0						
6	Credits/Payments:						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
ь	Exempt foreign organizations tax withheld at source						
С	Tax paid with application for extension of time to file (Form 8868) 6c						
d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d			0			
8	Enter any penalty for underpayment of estimated tax. Check here from 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						
11	Enter amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11						
Pai	rt VIIA Statements Regarding Activities						
1 a	Dunng 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		X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for						
	definition)?						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	Į.					
	or distributed by the foundation in connection with the activities.						
¢	c Did the foundation file Form 1120-POL for this year?						
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			Ī			
	on foundation managers ▶ \$0			ŧ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2	<u> </u>	X			
	If "Yes," attach a detailed description of the activities.	1		1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		↓	X			
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a	1	X			
þ	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	-			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	ļ	X			
	If "Yes," attach the statement required by General Instruction T.			I			
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 			Ī			
	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 yr.? If "Yes," complete Part II, col. (c), & Part XV.	7	X	ļ			
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			1			
	▶KS	_ [1	•			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	ŀ	l '	ŧ			
	designate) of each state as required by General Instruction G? If "No," attach explanation	. 8b	X	<u> </u>			
9	ls the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete	1					
	Part XIV	. 9	 	X			
10	Did any persons become substantial contributors during tax year? If "Yes," attach a schedule listing their names						
	and addresses	. 10	<u></u> _	X			
JVA	09 990PF4 TWF 33162 Copyright Forms (Software Only) - 2009 TW	orm 990 -	-PF	(2009)			

01111	535 (1 (2303) Faul Family Foundation 20-4100160		Pa	ge 5
Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶See attachment #1 Telephone no. ▶			
	Located at ► ZIP+4 ►		•	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here			▶
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			_
Par	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	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days.)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b	1	X
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2009?	1c		х
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 2009, did the foundation have any undistributed income (lines 6d			
_	and 6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years ▶ 20 , 20 , 20			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement see the instructions.)	2b	1	х
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 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?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			
_	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2009.)	3ь		х
Δa	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		$\frac{\lambda}{X}$
ъ b	Did the foundation make any investment in a pnor year (but after December 31, 1969) that could jeopardize its charitable			_^_
3	nurnose that had not been removed from jeonardy before the first day of the tay year beginning in 2009?	a _b	1	v

Form **990-PF** (2009)

		-PF (2009)Paul Family Foundat. I-B Statements Regarding Activ			Peguired (continued)	· · · · · · · · · · · · · · · · · · ·	Page 6	
	_			TOTTI 4720 Way be	nequirea (continuea)) ————————————————————————————————————	T T	
ъa	(1)	ring the year did the foundation pay or incur Carry on propaganda, or otherwise attemp Influence the outcome of any specific publ	ot to influence legislation		Yes X N	0		
	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 described							
	In section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)							
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?							
_			•			•		
Þ		ny answer is "Yes" to 5a(1)-(5), did any of t						
		gulations section 53.4945 or in a current not		•	· -	_	X	
		ganizations relying on a current notice regard			▶	╛	1 1	
C		ne answer is "Yes" to question 5a(4), does the		-				
	bed	cause it maintained expenditure responsibilit	ty for the grant?		. N/A Yes N	0	1	
	If "	Yes," attach the statement required by Regu	lations section 53.494	5-5(d).				
6a	Dic	I the foundation, during the year, receive an	y funds, directly or ind	irectly, to pay premiums				
	on	a personal benefit contract?			Yes X N	o		
b		the foundation, during the year, pay premit				6b	1 x	
		Yes" to 6b, file Form 8870.	,,	-,, ,			 	
7a		any time during the tax year, was the founda	ation a party to a proh	bited tax shelter transact	ion? Ves 🕅 N	lo		
		es, did the foundation receive any proceeds	· · · · · · · · · · · · · · · · · · ·			į.	x	
	rt V							
		and Contractors	Directors, Traste	es, i oundation me	anagers, inginy Fai	id Lilipio	yees,	
_	Lic	at all officers, directors, trustees, foundation		dr componente /coc ti	ha Inatoretiana)			
	LIS	st all officers, directors, trustees, foundati	-	1	· · · · · · · · · · · · · · · · · · ·			
		(a) Name and address	(b) Title, and avg. hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expens		
<u> </u>			devoted to position	(II not paid, enter -0-)	and deferred comp.	other all	owances	
see	= 6	attachment #2						
					ļ			
	Cr	empensation of five highest-paid employe	es (other than those	Included on line 1 e	ee the instructions)			
_		none, enter "NONE."	(•		oo alo mon acachaj.			
			(b) Title and our		(d) Contributions to			
(a) N	ame and address of each employee paid	(b) Title, and avg. hours per week	(c) Compensation	employee benefit	(e) Expens	se account,	
		more than \$50,000	devoted to position	(c) Compensation	plans and deferred	other al	lowances	
NO	NTE				compensation			
MO.	NC		İ	1				
			1					
				1				
Tota	ıl nı	umber of other employees paid over \$50,000	<u>1</u>		1			
106	וו וונ	imber of other employees paid over \$50,000	, , , , , , , , , , , , , , , , , , , 				<u></u>	

and Contractors (continued) 3 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		
THE DE MAN CONTRACT OF THE CON		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sof organizations and other beneficiaries served, conferences convened, research papers product		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see the	e instructions)	
Describe the two largest program-related investments made by the foundation d	· · · · · · · · · · · · · · · · · · ·	Amount

Part IX-B Summary of Program-Related Investments (see the instructions)					
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount				
1					
2					
All other program-related investments. See the instructions.					
Total. Add lines 1 through 3	Form 990–PF (2009)				

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign found	lations,	
	see the 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	991
С	Fair market value of all other assets (see the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	991
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	991
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	the instructions)	4	15_
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	976
6	Minimum Investment return. Enter 5% of line 5	6	49
Pa	Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	49
2a	Tax on investment income for 2009 from Part VI, line 5	-	
b	Income tax for 2009. (This does not include the tax from Part VI.)	4 1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	49
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	49
6	Deduction from distributable amount (see the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	49
Pa	rt XII Qualifying Distributions (see the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	16,000
b	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 chantable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	····
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8. and Part XIII, line 4	4	16,000
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 the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,000
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether to	\Box	
	qualifies for the section 4940(e) reduction of tax in those years.		
	quantities for the occuping respect of tax in those years.		000 DE

art	XIII Undistributed Income (see th	e instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				49
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
	Total for prior years 20 , 20 , 20			-	
3	Excess distributions carryover, if any, to 2009				
	From 2004				
	From 2005				
					
	From 2007				
	From 2008	120 651			
	Total of lines 3a through e	138,651			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 16,000				
	Applied to 2008, but not more than line 2a		<u> </u>		
D	Applied to undistributed income of prior years			,	
	(Election required see the instructions)				
С	Treated as distributions out of corpus				
	(Election required see the instructions)				
	Applied to 2009 distributable amount				
	Remaining amount distributed out of corpus,	15,951			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	Indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	154,602			
Ь	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount see the instructions				
е	Undistributed income for 2008. Subtract				
	line 4a from line 2a Taxable amount				
	see the instructions	·····			
f	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2010				49
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2004				
	not applied on line 5 or line 7 (see the				
	instructions)	·			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	154,602			
10	Analysis of line 9:				
a	Excess from 2005				
t	Excess from 2006 60,900				
•	Excess from 2007 61,096				
c	Excess from 2008 16,655				
	Excess from 2009 15, 951		1	{	1

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2009) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid Dur			or ruture rayment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
	any foundation manager	status of	contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
 Paid during the year 				
See attachment #3				
		}		
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	<u> </u>	<u></u>		
Total	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		▶ 3a	16,000
b Approved for future payment		ļ		
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		1		
			1	
	1			
Total				

Form 990-PF (2009) Paul Family Foundation 20-4100160

Page 12

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income	Excluded by	section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Excl.	(d) Amount	Related or exempt function income (See the
1 Program service revenue:	code	- -	code		instructions.)
a			<u> </u>		
b					
c	_		1		
d					
e					
f	7			.,	
g Fees & contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	4	
4 Dividends and interest from securities		· · ·			
5 Net rental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·		·	······································
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other than inventory					· ·
9 Net income or (loss) from special events		-	1 1		
10 Gross profit or (loss) from sales of inventory					*
11 Other revenue: a					
b					
с				- "	
d		-			
e					
12 Subtotal. Add columns (b), (d), and (e)		0		4	0
13 Total. Add line 12, columns (b), (d), and (e)					4
(See worksheet in line 13 instructions to verify calcula					
Part XVI-B Relationship of Activities t		plishment of E	xempt Pu	Irposes	
Line No. Explain below how each activity for waccomplishment of the foundation's €	hich income is r	eported in column (e	e) of Part XV	I-A contributed import	antly to the

Pan	XVII	Information H Exempt Orgai	-	nsters to and tra	ansactions a	ing Helation	snips with	Noncharit	abie	
1 1	Did the			ge in any of the followin	g with any other	organization de	escribed in sect	ion	Yes	No
				B) organizations) or in s						
	٠,		`	oncharitable exempt org		υ,	J		1 1	
					•			1a(1)	1 1	X
	• •							1a(2)		X
		ansactions:								
			charitable exempt	organization				1b(1)	1 1	X
				exempt organization .						X
	• •			sets						X
	• •									X
										X
	` '	-		or fundraising solicitatio				— · ·	 	X
				ther assets, or paid em						X
	_			nplete the following sch					e of the	
(a) Lir		ng arrangement, sho		ne value of the goods, on the control of the contro				nd sharing arran	gements	5
	section If "Yes		other than section ving schedule.	d with, or related to, one in 501(c)(3)) or in sectio	n 527?			🛚 Y		ΩNo
	Underp	enalties of perjury, I decla	re that have examin	ed this return, including acc her than taxpayer or fiducia	ompanying schedul	es and statements,	and to the best o	i my knowledge	and beli	ief, it is
	true, cór	rect, and complete. Decla	ration of preparer (ot	her than taxpayer or fiducia	ry) is based on all in	tormation of which	preparer has any	knowledge.		
S					رق ا	20/10	Preside	ent		
G	Sigi	nature of officer or tru	stee		Date		Title			
N					Date		_ Pr	eparer's iden	tifying	
	Paid					I Chock if		gnatur	e in	
Н	Pre-	Preparer's			1	33.1 3.11.51		e instructions)	
Ē	par- er's	signature			<u> </u>					
E	Use	Firm's name (or you	Irs A				EIN ►			
_	Only	If self-employed), Phone no.								
	1	address, and ZIP co	ode /		- ,					
JVA	09	990PF13 TWF 33	159 Copyright F	orms (Software Only) - 2009	TW			Form 990	0-PF	(2009)

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

Department of the Treasury internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2009

Name of the organization			Employer Identification number					
Paul Family For	20-4100160							
Organization type (check or	e):	·						
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (ente	501(c)() (enter number) organization						
	4947(a)(1) nonex	exempt charitable trust not treated as a private for	undation					
	527 political orga	527 political organization						
Form 990-PF	X 501(c)(3) exempt	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonex	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable	e private foundation						
	=	or 990-PF that received, during the year, \$5,000 o	or more (in money or property)					
from any one contribu	tor. Complete Parts i and	d II.						
For a section 501(c)(3	(1) and 170(b)(1)(A)(vi), a	m 990 or 990-EZ that met the 33 1/3% support te and received from any one contributor, during th Form 990, Part VIII, line 1h or (ii) Form 990-EZ, lir	he year, a contribution of the greater					
during the year, aggr	egate contributions of mo	on filing Form 990 or 990-EZ that received from a ore than \$1,000 for use exclusively for religious, o ention of cruelty to children or animals. Complete	chantable, scientific,					
the year, contribution to more than \$1,000. religious, chantable, it received nonexclus	s for use exclusively for re if this box is checked, ent etc., purpose. Do not com vely religious, charitable, at is not covered by the G	on filing Form 990 or 990-EZ that received from a religious, charitable, etc., purposes, but these conter here the total contributions that were receive implete any of the parts unless the General Rule etc., contributions of \$5,000 or more during the General Rule and/or the Special Rules does not a 2 of its Form 990, or check the box on line H of i	intributions did not aggregate and during the year for an exclusively applies to this organization because a year					
Form 990-PF, to certify that	t does not meet the filing	g requirements of Schedule B (Form 990, 990-E2	Z, or 990-PF).					

BOOKS ARE IN CARE OF

<u> Attachment</u>	1 - 990-PF Page 5, Part VII-	A, Line 14	
Open to Public			
Inspection	For calendar year 2009, or tax period beginning		<u>:</u>
Name of Organizati Paul Famil	y Foundation	20	ployer Identification Number -4100160
Part VII-A - Line 14	4		
Individual Name .		Nancy A Paul	
or			
Business Name:			
Street Address		201 S Kansas Aven	ue
			
U.S. Address:			
Zıp code	66603 city Topeka	State	<u>KS</u>
Or Farana Address			
Foreign Address			
City			
Province or	State		
Postal code			
1 03121 0000			
Phone Num	ber		(785)232-0747
Fax Numbe	r		(785)232-3613

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 2: page 1 - 990-PF Page 6, Part VIII Open to Public For calendar year 2009, or tax period beginning , and ending Inspection Name of Organization **Employer Identification Number** 20-4100160 Paul Family Foundation (E) Expense Account (C) Compensation (If (D) Cont. to Employee (A) Name and Address (B) Title and Average Hrs. per Week not paid, enter 0) Ben. Plans & Def Comp. & Other Allowances Howard T Paul President 100 Lakeshore Dr PH55 North Palm Beach, FL 0 0 33408 0 Nancy A Paul Secretary 100 Lakeshore Dr PH55 North Palm Beach, FL 0 0 33408 0 Director Jeff Berkley 3001 SW Wanamaker Road Topeka, KS 66614 0 0 0 Director Steven J Knoll 12512 Horse Creek Dr Perry, KS 66073 0 0 0

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 3: page 1 990-PF Page 11, Part XV Line 3a						
Open to Pu Inspection For calendar year 2009, or tax	r period beginning		, and ending			
Name of Organization	k period beginning			entification Number		
Paul Family Foundation			20-4100			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor None		Care of Animals in			
McCarthy's Wildlife Santuary, Inc. 12943 61st St North		1	Santuary			
West Palm Beach, FL 33412 Palm Beach County Fishing Foundatio P O Box 468	None	Public	Youth Education	5,000		
West Palm Beach, FL 33402 Justin Corbet Memorial Shooting Fnd	None	Public	Youth Education	10,000		
5735 SW Urish Road Topeka, KS 66610				1,000		
			!			
			•			

Form 8868

(Rev April 2009)

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

		filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (o					• 		
		plete Part II unless you have already been granted an automatic 3-month extension on a p		file	d Form	8868.			
Part		Automatic 3-Month Extension of Time. Only submit original (no copies need	ded).						
	ooratio only .	n required to file Form 990-T and requesting an automatic 6-month extension—check	this box	and	d com	plete	- 🗆		
		porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7 acome tax returns.	004 to re	qu	est an	extens	sion of		
Electrone o electrone returni	onic F f the r onically s, or a	illing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month aut eturns noted below (6 months for a corporation required to file Form 990-T). However, if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms composite or consolidated Form 990-T. Instead, you must submit the fully completed and or editalls on the electronic filing of this form, visit www.irs.gov/efile and click on e-file form.	er, you o 990-BL, d signed	ean 60 pag	not file 69, or se 2 (P	e Form 8870, art II) o	8868 group		
Туре	or	Name of Exempt Organization	Employe	r id	entifica	ation n	umber		
print	•	1				4100160			
File by	the	Number, street, and room or suite no. If a P.O. box, see instructions.							
due dat		Attn: Nancy Paul 201 S. Kansas Avenue							
return.	See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
ii isa act	10/13	Topeka, KS 66603							
Chec	k type	of return to be filed (file a separate application for each return):							
	rm 99	· · · · · · · · · · · · · · · · · · ·	Г	J 1	Form 4	1720			
	m 99		Ē	☐ Form 5227					
_	orm 99		Ī	☐ Form 6069					
=	orm 99	<u> </u>		J 1	Form 8	3870			
Tele If the lifth of the lifth the l	ephone he orga nis is fo ie who	s are in the care of ▶Nancy Paul No. ▶ 785-232-0747 FAX No. ▶ 785-232-3613 anization does not have an office or place of business in the United States, check this or a Group Return, enter the organization's four digit Group Exemption Number (GEN) the group, check this box ▶ □ . If it is for part of the group, check this box the names and EINs of all members the extension will cover.							
	until _ for the ► 🔯	west an automatic 3-month (6 months for a corporation required to file For August 15 , 2010 , to file the exempt organization return for the organization organization's return for: calendar year 2009 or	named a	bov	e. The	e exten	ision is		
	▶ □	tax year beginning, 20, and ending				, 20			
2	If this	tax year is for less than 12 months, check reason: Initial return Final return [] Chang	je i	n acco	unting	period		
		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax ny nonrefundable credits. See instructions.	. 1	а	\$	·			
		application is for Form 990-PF or 990-T, enter any refundable credits and estimated ta							
		ents made. Include any prior year overpayment allowed as a credit.		ь	\$		0		
	Baian depos	ce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required it with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymern). See instructions.	it	<u>ت</u> .	\$		0.00		
	ion. If	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 t instructions.				879-E	0		
For P	rivacy	Act and Paperwork Reduction Act Notice, see Instructions.		Fo	m 886	6 8 (Rev	4-2009)		