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Return of Private Foundation

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

OMB No 1545-0052

	tment of th	e Treasury Service Note. The found		e able to use a copy of this			rting requirements.	2009
		year 2009, or tax year beginning,			and er		· · · · · · · · · · · · · · · · · · ·	l
		hat apply: Initial return		Initial return of a fo	ormer public c	harity	Final return	
-		Amended retu	rn	Address chan	=		Name change	
lise	the IRS	Name of foundation					A Employer identification	number
ŀ	bel.							
Oth	erwise,	NERMAN FAMILY FO			······································		20-8494550	
	print	Number and street (or P O box number if		vered to street address)		Room/suite	B Telephone number	4.4
	type. Specific	11701 NORWOOD DR	IVE				913-491-31	
	uotiono	City or town, state, and ZIP code LEAWOOD, KS 662	11				C If exemption application is p	
				empt private foundation			D 1. Foreign organizations 2. Foreign organizations me check here and attach co	eting the 85% test,
, L		e of organization: X Section 5 1 4947(a)(1) nonexempt charitable tr	· ' <u></u> -	Other taxable private foundation	ation			•
I Fa		value of all assets at end of year J			Accr	ual	E If private foundation state under section 507(b)(1)	tus was terminated (A) check here
		II, col. (c), line 16)		er (specify)			F If the foundation is in a	
•		605,615.		nn (d) must be on cash l	basis)		under section 507(b)(1)	
		atysis of Revenue and Expenses e total of amounts in columns (b), (c), and (c essarily equal the amounts in column (a).)		(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
	nec	e total of amounts in columns (b), (c), and (c cessarily equal the amounts in column (a).)	s) may not	expenses per books	inco		income	for charitable purposes (cash basis only)
	1 Con	tribu <u>tions,</u> gifts, grants, etc., receive	d į	200,000.			N/A	
		ck fithe foundation is not required to att	ach Sch B					
		rest on savings and temporary n investments	-	1,014.		1,014.		STATEMENT 1
		dends and interest from securities	}	4,627.		4,627.		STATEMENT 2
		ss rents	}			·		
		rental income or (loss)		<12,462.				
ine	b Gros	gain or (loss) from sale of assets not on line ss sales price for all 92	593.	<u> </u>		-	-	
Revenue		ital gain net income (from Part IV, line 2)				0.		
Re		short-term capital gain		• •				
	9 Inco	ome modifications	. [
	10a Gros	ss sales less returns allowances						
	b Less	s Cost of goods sold				<u> </u>	-	
- ,	c Gro	ss profit or (loss)						
1107 1		er income	}	2,219.		0.		STATEMENT 3
		al. Add lines 1 through 11		195,398.		<u>5,641.</u>		
9		npensation of officers, directors, trustees, et	tc	0.		0.		0.
3		er employee salaries and wages Ision plans, employee benefits						
ses S	16a Leg		-			 -		
ű	_	counting feesSTM	T-4-	3,105.		1,552.		1,553.
X		er professional fee ECEIV	=D					
inistrative Expe	17 Inte	erest						
rati	18 Tax	es con a contraction	-040 J	5				
Administrative	19 Dep	preciation and depleASSG 0 4 2	2010	2				
Ē		сирапсу		-				
Ă	21 Tra	vel, conferences, and metiline N	UI				<u> </u>	
and		nting and publications	m F					
ging.		er expenses STM	T 5	5.		5.		0.
Operating		al operating and administrative		3,110.		1,557.		1,553
ô	_	enses. Add lines 13 through 23 atributions, gifts, grants paid	- }	19,050.		<u> </u>		19,050
		al expenses and disbursements.	•	το, σοσο				12,000
		at expenses and dispulsements. I lines 24 and 25		22,160.		1,557.		20,603.
		otract line 26 from line 12:			-			20,000
		ess of revenue over expenses and disburse	ments	173,238.				
		investment income (if negative, enter				4,084.		
	c Adj	usted net income (if negative, enter -0-)			-		N/A	
9235 02-02	01 1-10 LF	HA For Privacy Act and Paperwork	Reduction	Act Notice, see the instruc	tions.			Form 990-PF (2009)

Page 2

П	rt II Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	f year
Pa	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-Interest-bearing			
٠	2 Savings and temporary cash investments	215,213.	438,103.	438,103.
- 1	3 Accounts receivable ►		_	,
	Less: allowance for doubtful accounts	105.		
	4 Pledges receivable ►			5_
	Less: allowance for doubtful accounts			
- 1	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
- 1	7 Other notes and loans receivable			-
ı	Less: allowance for doubtful accounts			
ध	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
₹ ₁	IOa Investments - U.S. and state government obligations			
l	b Investments - corporate stock STMT 7	253,272.	200,701.	167,512.
	c Investments - corporate bonds			
1	1 Investments - land, buildings, and equipment, basis	_		
	Less accumulated depreciation			
1	12 Investments - mortgage loans			
1	13 Investments - other			
1	I4 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation			
1	15 Other assets (describe ►)			
	6 Total assets (to be completed by all filers)	468,590.	638,804.	605,615.
1	17 Accounts payable and accrued expenses	750.	750.	
1	18 Grants payable			
မှ ၂ 1	19 Deferred revenue			7
Liabilities	20 Loans from officers, directors, trustees, and other disqualified persons			- **
<u> 흥</u> 2	21 Mortgages and other notes payable			e e
ء ا ت	22 Other liabilities (describe >)			`.
1				
12	23 Total liabilities (add lines 17 through 22)	750.	750.	-
	Foundations that follow SFAS 117, check here			-
_ص ا	and complete lines 24 through 26 and lines 30 and 31.			
ဦ 2	24 Unrestricted			-
	25 Temporarily restricted			
80 2	Permanently restricted			
<u> </u>	Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances	and complete lines 27 through 31.	465 040	620 254	-
\$ 2	27 Capital stock, trust principal, or current funds	467,840.	638,054.	1
388	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	•
¥ 2	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ž	30 Total net assets or fund balances	467,840.	638,054.	
ر ا	NA TAALUANIA A A A	460 500	630 004	
	31 Total liabilities and net assets/fund balances	468,590.	638,804.	
Pa	rt III Analysis of Changes in Net Assets or Fund B	alances		
1 T	otal net assets or fund balances at beginning of year - Part II, column (a), line	30		
	nust agree with end-of-year figure reported on prior year's return)		1.	467,840.
	nter amount from Part I, line 27a	• • • • • • • • • • • • • • • • • • • •		173,238.
	ther increases not included in line 2 (itemize)			1/3,238.
	dd lines 1, 2, and 3	· - · · · · · · · · · · · · · · · · · ·	3	641,078.
	ecreases not included in line 2 (itemize)		TEMENT 6 5	3,024.
	otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		TEMENT 6 5	638,054.
	The state of the s	Tay mio oo		Form 990-PF (2009)

Part IV Capital Gains	and Lo	osses for Tax on In	vestment					
		ind(s) of property sold (e.g. or common stock, 200 shs			(b) How P - Pui D - Do	acquired rchase nation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CALAMOS MARKET	NEU	TRAL FD CL C					VARIOUS	08/12/09
b TCW FDS INC TO				SHS			VARIOUS	12/07/09
c CALAMOS MARKET					·		VARIOUS	06/02/09
d KINETICS PARAD		·····					07/16/07	06/02/09
e SOUND SHORE FD	INC			1			07/16/07	06/02/09
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss (e) plus (f) minus	
a 2,923.				2,71				204.
b 40,241.	ļ			39,08				1,157.
c 39,429.				46,42				<6,999.
d 5,000.				8,17				<3,175.
e 5,000.				8,649	9.			<3,649.
Complete only for assets showing	ng gain in	column (h) and owned by	the foundation	on 12/31/69			Gains (Col. (h) gair	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		col.	(k), but not less that Losses (from col.	ın -0-) or (h))
2								204.
b								1,157.
C	l							<6,999.
d								<3,175.
	 				-		···	<3,649.
<u>e</u>	1	Current	L		<u> </u>	T		<u> </u>
2 Capital gain net income or (net ca	apıtal loss	If gain, also enter If (loss), enter -0			} 2			<12,462.
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8,	column (id (6):		}		N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U		Section 4940(e) for	Peduced	Tay on Net	Invest	ment Inc		<u> </u>
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not qua	tion 4942 lify under	2 tax on the distributable am section 4940(e). Do not co	mplete this pa	ırt.				Yes X No
1 Enter the appropriate amount in	each colu	imn for each year; see instri	uctions defore	making any entries				· (4)
(a) Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dis		Net value of non			(cot (b) di	(d) bution ratio vided by col. (c))
2008			3,314.		2	<u>62,619</u>	•	.050697
2007			1,291.		2	90,218	•	.004448
2006								
2005								
2004								
2 Total of line 1, column (d)							2	.055145
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number of	of years		3	.027573
4 Enter the net value of noncharital	ble-use as	ssets for 2009 from Part X, i	line 5				4	482,211.
5 Multiply line 4 by line 3							5	13,296.
6 Enter 1% of net investment incor	 ne / 1% ni						6	41.
							7	13,337.
8 Enter qualifying distributions from							8	20,603.
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, c		•	elete that part using				
923521 02-02-10	· —	 -						orm 990-PF (2009)

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

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		,		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	L_1114	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire			
any voter registration drive?			s X No	-
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	L	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		_	1 1
509(a)(1), (2), or (3), or section 4940(d)(2)?		. L_1\Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?	•		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere .		. ▶□	=
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			_	-
expenditure responsibility for the grant?		I/A L_IY	s No	1 1
If "Yes," attach the statement required by Regulations section 53 494.			1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	سنا فنسبط فسن		_
a personal benefit contract?		L. Ye	as X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?	•		6b X
If "Yes" to 6b, file Form 8870.			_,	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	• • • • • • • • • • • • • • • • • • • •		s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut		· · · · · · · · · · · · · · · · · · ·		7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.	·		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
JEROME S. NERMAN	TRUSTEE		,	
11701 NORWOOD				
LEAWOOD, KS 66211	0.00	0.	0.	0.
	TRUSTEE			***************************************
11701 NORWOOD	1			
LEAWOOD, KS 66211	0.00	0.	0.	0.
LEWIS E. NERMAN	TRUSTEE			
27150 OAK KNOLL ROAD]		
BONITA SPRINGS, FL 74134	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(4)0	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				-
	1			
	1			:
	1			
		<u>L</u>		
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. 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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the uced, etc.	Expenses
1 <u>N/A</u>		
2		
3		· · · · · · · · · · · · · · · · · · ·
4		
Part IX-B Summary of Program-Related Investments	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		

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0.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
· a	Average monthly fair market value of securities	1a	163,030.
ь	Average of monthly cash balances	1b	326,524.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	489,554.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	489,554.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,343.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	482,211.
6	Minimum investment return. Enter 5% of line 5	6	24,111.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	24,111.
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.)]	
C	Add lines 2a and 2b	2c	41.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	24,070.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	24,070.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	24,070.
P	art XII Qualifying Distributions (see 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	20,603.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Surtability 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	20,603.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	41.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,562.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies for t	he section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI,	001700	1 0 a 10 10 10 10 10 10 10 10 10 10 10 10 10		2003
line 7				24,070.
2 Undistributed income, if any, as of the end of 2009				22,070.
a Enter amount for 2008 only			10,922.	
b Total for prior years:			20/3881	
	-	0.	-	
3 Excess distributions carryover, if any, to 2009:				-
a From 2004	-	-	-	-
b From 2005			in I	
c From 2006		_		
d From 2007		'		
e From 2008				•
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 20,603.	-		• .	
a Applied to 2008, but not more than line 2a	·		10,922.	
b Applied to undistributed income of prior	-		1 1 1	
years (Election required - see instructions)	•	0.		
c Treated as distributions out of corpus	,			
(Election required - see instructions)	0.	-		-
d Applied to 2009 distributable amount			·····	9,681.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	0.		_ ~	0.
(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		<u>-</u>	-	•
indicated below:			*	" · · ·
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				5
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously	_		1	
assessed	-	0.		 -
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				-
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must	** .	* * * * *		
be distributed in 2010		-	- 1	14,389.
7 Amounts treated as distributions out of		-	,	
corpus to satisfy requirements imposed by		*		
section 170(b)(1)(F) or 4942(g)(3)	0.	-		-
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.	· · · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·	
9 Excess distributions carryover to 2010.			1	-
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		<u>.</u>		-
a Excess from 2005		-		
b Excess from 2006 .		~	-	-
c Excess from 2007				
d Excess from 2008				-
e Excess from 2009				3

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Young Recipient	If recipient is an individual,		Durance of grapt or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year REVIEW, INC. 1708 CAMPBELL KANSAS CITY, MO 64108	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	1,000.
THE ARTS COUNCIL OF JOHNSON COUNTY 15301 W. 87TH STREET PARKWAY LENEXA, KS 66219	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	1,000.
JOHNSON COUNTY COMMUNITY COLLEGE FOUNDATION 12345 COLLEGE BOULEVARD OVERLAND PARK, KS	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	2,000
KANSAS CITY ART INSTITUTE 4415 WARWICK BLVD. KANSAS CITY, MO 64111	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	25.
HYMAN BRAND HEBREW ACADEMY 5801 W. 115TH STREET OVERLAND PARK, KS 66211	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	25
VILLAGE SHALOM 5500 W. 123RD STREET OVERLAND PARK, KS 66209	NONE	501(C)(3)	CHARITABLE CONTRIBUTION	15,000
				10000
b Approved for future payment		<u> </u>	. ► 3a	19,050
, pp. 5-55 to total pay				
NONE				
			:	
Total			▶ 3b	0 .

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		led by section 512, 513, or 514	(e)
1 Program service revenue:	Business Amount s		(c) Exclu- sion code Amount		Related or exempt function income
•	coue		1000		
a			 		
b			 		
c					····
d			 		
e			ļ	· · · · · · · · · · · · · · · · · · ·	
f			ļl		
g Fees and contracts from government agencies		·			
2 Membership dues and assessments			li		
3 Interest on savings and temporary cash			li		
investments	L		14	1,014.	
4 Dividends and interest from securities			14	4,627.	
5 Net rental income or (loss) from real estate:	77 7 7				
a Debt-financed property			1	· · · · · · · · · · · · · · · · · · ·	······································
b Not debt-financed property			1		
6 Net rental income or (loss) from personal			 		
property 7. Other investment income			 		
7 Other investment income			┼		
8 Gain or (loss) from sales of assets other			1.0	.12 462	
than inventory	1		18	<12,462.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			ļ		····
11 Other revenue:					
a FEDERAL TAX REFUND			01	2,219.	
b	 				
c	L				
d		·			
e					
12 Subtotal. Add columns (b), (d), and (e)	25 - 7	0.		<4,602.	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Acco	omplishment of Fo	cempt	Purnoses	
Line No. Explain below how each activity for which inco			contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than	by providing fu	nds for such purposes).			
			_		
			•		
					··
					
					
			·····		
	·				
	·				
923821 02-02-10				· · · · · · · · · · · · · · · · · · ·	Corm 000 DE (0000)
02-02-10					Form 990-PF (2009)

Unrelated business income

	· Exempt Organizations					
1	Did the organization directly or indirectly engage in any of the following	g with any other organization	described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 52	7, relating to political organiz	zations?	-		
a Transfers from the reporting foundation to a noncharitable exempt organization of:						
	(1) Cash			1a(1)		X
	(2) Other assets			1a(2)		X
b	b Other transactions:					
(1) Sales of assets to a noncharitable exempt organization						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
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising solicitation	ns		15(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid emp			1c		X
d	If the answer to any of the above is "Yes," complete the following sche		ays show the fair market value of the goods, o	ther ass	sets,	
	or services given by the reporting foundation. If the foundation receive					
	column (d) the value of the goods, other assets, or services received.					
(a)	Line no (b) Amount involved (c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and s	haring ar	rangeme	mts
	N/A					
2.0	Is the foundation directly or indirectly affiliated with, or related to, one	or more tay-eyempt organiza	ations described			
2 a	in section 501(c) of the Code (other than section 501(c)(3)) or in sect			Yes	ΓX	∏ No
	If "Yes," complete the following schedule.					טאו ב
0	(a) Name of organization	(b) Type of organization	(c) Description of relationsh			
	N/A	(4) () (4)	(4) 000014			
	N/A					
	Under penalties of perjury, I declare that have examined this return, including acco	mpanying schedules and stateme	ents, and to the best of my knowledge and belief, it is t	rue, corre	act,	
	and complete. Declaration of preparer (other than expayer or fiduciary) is based on			·	·	
		7-30-10	N N O V O C O D			
ا ق	Signature of office or trustee	Date	Title			
Sign Here	Described A G	Date	Ta: 1.7	's identif	ying nur	nber
5	Preparer's Oonne Handen		727/12 self-			
ଊ	TO STANDARD PROPERTY OF THE PR		7 7 employed			
1	Fum's name (or yours RSM MCGLADREY, INC.	TITME 400	EIN ►			
	d seif-employed). 4801 MAIN STREET, S		016	152	200	
	address, and ZIP code KANSAS CITY, MO 641	14	Phone no. 816-7			(2009)
			Lor	111 7 7 7	rrr	/() 141

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number

20-8494550 NERMAN FAMILY FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

	_	_
ne '	l of	1 of Pa

Name of organization

Employer identification number

NERMAN FAMILY FOUNDATION

20-8494550

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JEROME S. NERMAN 11701 NORWOOD LEAWOOD, KS 66211	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ \(\ldots \)	Person Payroll Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroll Omnicash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution)

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CA	SH	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
CENTRAL BANK OF KANSAS CITY	1,014.					
TOTAL TO FORM 990-PF, PART I,						
FORM 990-PF DIVIDEND	S AND INTE	REST FROM	SEC	URITIES	STATEMENT	2
SOURCE	GROS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
PRAIRIE BROKERAGE		4,627.		0.	4,6	27.
TOTAL TO FM 990-PF, PART I, L	N 4	4,627.		0.	4,6	27.
FORM 990-PF	OTHER	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
FEDERAL TAX REFUND		2,2	19.	0	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11	2,2	19.	0	•	
FORM 990-PF		STATEMENT	4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
ACCOUNTING FEES	3,105	. 1,	552	•	1,5	53.
TO FORM 990-PF, PG 1, LN 16B	3,105	. 1,	552	•	1,5	53.

FORM 990-PF	OTHER EXPENSES				STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B NET IN MENT II	VEST-	(C) ADJUSTEI NET INCOM		
INVESTMENT FEES	5.		5.		······································	0.
TO FORM 990-PF, PG 1, LN 23	5.		5.			0.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR	FUND 1	BALANCES	STATEMENT	6
DESCRIPTION					AMOUNT	
PRIOR YEAR ADJUSTMENT DUE TO	RETURN OF C	APITAL			3,0	24.
TOTAL TO FORM 990-PF, PART II	II, LINE 5				3,0	24.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			во	OK VALUE	FAIR MARKE VALUE	T
AQUILA THREE PEAKS CL Y				15,561.	16,4	18.
BLAIR WILLIAMS FDS INTL GROWTH FD CL I 25,			25,639.	15,5		
			16,596.	10,9		
CALAMOS MARKET NEUTRAL FD CL FAIRHOLME FUND	C			0. 12,054.	17,3	0.
KINETICS MUT FDS INC				13,343.		08.
•				26,979.	35,5	
MARSICO GROWTH FUND				31,222.	23,1	
SOUND SHORE FD INC				24,749.	17,0	
TCW FDS INC TOTAL RETURN BD F				0.		0.
KAYNE ANDERSON MLP INVESTMENT	COMPANY			7,334.	10,0	
TORTOISE CAPITAL RESRCS				27,224.	12,3	50.
TOTAL TO FORM 990-PF, PART II	LINE 10B			200,701.	167,5	12.

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

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ X				
•	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).					
•	complete Part II unless you have already been granted an automatic 3-month extension on a previously file		m 8868.				
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)						
A corpor	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete					
Part I on	· ·	•	▶ □				
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an come tax returns.	exten	sion of time				
noted be (not auto you mus	tic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronismatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cot submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filegov/efile and click on e-file for Chanties & Nonprofits.	cally if nsolida	(1) you want the additional ated Form 990-T. Instead,				
Type or	Name of Exempt Organization	Employer identification number					
print	NERMAN FAMILY FOUNDATION	2	0-8494550				
File by the due date fo filing your return See	tue date for Number, street, and room or suite no. If a P.O. box, see instructions. Ing your 11701 NORWOOD DRIVE						
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LEAWOOD, KS 66211						
Check t	ype of return to be filed (file a separate application for each return).						
☐ Fo	rm 990 Form 990-T (corporation) Form 47	'20					
☐ Fo	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52	27					
☐ Fo	rm 990-EZ Form 990-T (trust other than above) Form 60	69					
X Fo	rm 990-PF	370					
	JEROME NERMAN	· · · · · · · · · · · · · · · · · · ·					
• The b	ooks are in the care of > 11701 NORWOOD - LEAWOOD, KS 66211						
	hone No. ▶ 913-491-3141 FAX No. ▶						
	organization does not have an office or place of business in the United States, check this box		▶ □				
• If this	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the	s is fo	r the whole group, check this				
box 🕨	. If it is for part of the group, check this box and attach a list with the names and EINs of all	memb	ers the extension will cover.				
	equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt ${ m AUGUST}$ 15, 2010 , to file the exempt organization return for the organization named a		The extension				
	for the organization's return for:						
	Calendar year 2009 or						
•	tax year beginning, and ending		_ ·				
2 lf t	his tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period				
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		120				
_	nrefundable credits. See instructions.	3a	\$ 120.				
	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated or payments made. Include any prior year overpayment allowed as a credit.	3b	s 40.				
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	30	100				
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		:				
	e instructions.	3c	\$ 80.				
0	. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8870	EO for payment instructions				