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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2009

For	calen	dar year 2009, or tax year beginning	· ·	, and ending		
G	Check	all that apply: Initial return	Initial return of a fo	ormer public charity	Final return]
		Amended return	Address chang		Name change	
Use	the I	RS Name of foundation			A Employer identification	number
- 1	abel.					
Oth	erwis				26-2480796	
	print	Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
	r type	14200 MIDDEEDOKI DIKEE	T		574-970-11	91
	Spec ructio	LUIV OF TOWN, STATE, AND ZIP CODE			C If exemption application is p	ending, check here
	iuciio	ELKHART, IN 46516			D 1. Foreign organizations	
H_C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eeting the 85% test, proputation
	_] Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	E If private foundation sta	tus was terminated
l Fa	ır ma	rket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	under section 507(b)(1)	
(fr	om F	Part II, col. (c), line 16)	her (specify)		F If the foundation is in a	60-month termination
	-\$	3 , 384 , 469 . (Part I, colu	mn (d) must be on cash b	oasis)	under section 507(b)(1)	
Pa	art I	' (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a)			income	(cash basis only)
		Contributions, gifts, grants, etc., received	1,555,311.	· · · · ·		
	_	Check fithe foundation is not required to attach Sch. B. Interest on savings and temporary	27 075	25 055	25 255	Gm3 mm3 (================================
	3	cash investments	37,875.	37,875.		STATEMENT 1
		Dividends and interest from securities	295.	295.	295.	STATEMENT 2
		Gross rents				
	b	Net rental income or (loss)				
ā		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	TED \			
ē	ט	assets on line 6a	VLD			
Revenue		Capital gain net income (from Part IV, line 2)	1 1071 1	0.		
_	Ì	Net short-term capital gain lincome modifications	4 2010 3			
		Income modifications Gross sales less returns and allowaces	18			
	10a	and allowances	NIT \			'
		Less Cost of goods sold	N, UT			
		dioss profit of (loss)				
		Other income	1 502 404	20.450		
	1	Total Add lines 1 through 11	1,593,481.	38,170.	38,170.	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	i .	Other employee salaries and wages				
Ø	ı	Pension plans, employee benefits				
nses	ŀ	Legal fees	2 0 4 1			
ĝ	l	Accounting fees STMT 3	3,941.	0.	0.	0.
ω ω	ľ	Other professional fees STMT 4	170.	0.	0.	170.
Operating and Administrative Exper	l .	Interest		-	···	
stra	l	Taxes			· · · · · · · · · · · · · · · · · · ·	
Ë	I	Depreciation and depletion	0 410			
PP	ı	Occupancy	9,410.	0.	0.	0.
ō	ı	Travel, conferences, and meetings				
lan	I	Printing and publications	4 706			
ing	I	Other expenses STMT 5	4,786.	22.	0.	0.
əra	I	Total operating and administrative	10 200	22	•	4.50
ď	I	expenses Add lines 13 through 23	18,307.	22.	0.	170.
	ı	Contributions, gifts, grants paid	68,800.			68,800.
	I	Total expenses and disbursements	07 107	00	•	60.070
		Add lines 24 and 25	87,107.	22.	0.	68,970.
		Subtract line 26 from line 12:	1 506 374			
	l .	Excess of revenue over expenses and disbursements	1,506,374.	20 140		
		Net investment income (if negative, enter -0-)		38,148.	20 172	
	ıC	Adjusted net income (if negative, enter -0-)	l		38,170.	l

Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/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	1,861,468.
2 Enter amount from Part I, line-27a	2	1,506,374.
3 Other increases not included in line 2 (Itemize) ► PRIOR PERIOD ADJUSTMENT	3	25,832.
4 Add lines 1, 2, and 3	4	3,393,674.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,393,674.

1,861,468.

3,393,674

2-Story Drick W		od(s) of property sold (or common stock, 200			(b)	How ac - Purcl - Dona	quired hase ation	(c) Date (mo., c	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
a										
-	ONE		 _	·	↓					
					+					
<u> </u>				-	+					
(e) Gross sales price	(f) D	epreciation allowed (or allowable)	1 10,	st or other basis expense of sale					iain or (loss s (f) minus	
<u>-</u>										
		, , , , , , , , , , , , , , , , , , , ,							••••	
Complete only for assets show			y the foundation	n on 12/31/69			(I) Gains ((Col. (h) gain	minus
(i) F.M.V as of 12/31/69		i) Adjusted basis as of 12/31/69		xcess of col. (1) r col. (1), if any			со	l. (k), but Losses	not less tha (from col. (1 -0-) or h))
							-			
	ļ									
;	 							•		
<u> </u>	 	-		<u></u>						
	1	C 14	Annua Daut I Iunu							
Capital gain net income or (net o	capital loss)	If (loss), enter	ter in Part I, line -0- in Part I, line	, e 7	}	2				
Net short-term capital gain or (Io	oss) as defin	ied in sections 1222(5)	and (6):							
If gain, also enter in Part I, line 8	, column (c		, ,)					
If (loss), enter -0- in Part I, line 8	3				- [I	3				
or optional use by domestic priva	te foundatio	,					ent Ind	come	-	
or optional use by domestic priva section 4940(d)(2) applies, leave as the foundation liable for the se 'Yes," the foundation does not qui	te foundatio this part bla ction 4942 t alify under s	ns subject to the sectionk. ax on the distributable ection 4940(e). Do not	n 4940(a) tax or amount of any y complete this pa	n net investment ii ear in the base pe art.	ncome		nent Ind	come		Yes X N
or optional use by domestic prival section 4940(d)(2) applies, leave as the foundation liable for the series," the foundation does not quite the appropriate amount in (a)	te foundatio this part bla ction 4942 t alify under s	ns subject to the sectionk. ax on the distributable section 4940(e). Do not the for each year; see institute the section that section the section the section the section that section the sectio	n 4940(a) tax or amount of any y complete this pa	n net investment ii ear in the base pe art.	riod?	9.)	nent Ind	come		
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_			<u> 2480</u>			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	- see ir	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter *N/A* on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	_1_			3	<u>81.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			3	81.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			3	81.
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 200.					
đ	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7			2	00.
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, enter amount owed SEE STATEMENT 7	9			1	81.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11		-		
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?		Ī	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		Ī	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or	ſ			
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			1c		X
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 .		İ			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		į	5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	● By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MI, IN					
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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	ĺ			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		<u>X</u>
10		ጥΜጥ	R	10	X	

rm 990-PF (2009) BILL DEPUTY FOUNDATION Part VII-A Statements Regarding Activities (continued)	26-248	<u>0796</u>	Pag
	·	\top	
1 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		14	_ 2
section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	
2 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		10	│
August 17, 2008?		12	v :
3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X_
Website address N/A	F74 O	70 11	0.1
	phone no. $\triangleright 574-9$		<u>.91</u>
Located at > 4200 MIDDLEBURY STREET, ELKHART, IN	ZIP+4 ▶ <u>4</u>	0210	
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N I ar I	3T /	·»►∟
and enter the amount of tax-exempt interest received or accrued during the year Part VII-B Statements Regarding Activities for Which Form 4720 May Be Require	<u>▶ 15 </u>	N/	A
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	,u		es l
1a During the year did the foundation (either directly or indirectly):			-
	Yes X No		
(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)	162 [A2_] NO		
a disqualified person?	Yes X No		-
	Yes X No	1	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		1
(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	res La_ No	1	
for the benefit or use of a disqualified person)?	Yes X No		
· · · · · · · · · · · · · · · · · · ·	L Tes LA_ NO		
(6) Agree to pay money or property to a government official? (Exception. Check "No"		1 1	
if the foundation agreed to make a grant to or to employ the official for a period after	Yes X No		
termination of government service, if terminating within 90 days.)	Yes LA NO	}	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	NT / 7	1	
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b	
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 co	rrooted.		
	rrected	.	İ
before the first day of the tax year beginning in 2009? Taxes on fallure to distribute process (continue 4042) (does not apply for years the foundation was a private operation of	ioundation	10	
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating f	ounuation		
defined in section 4942(j)(3) or 4942(j)(5)):	a) haginaiaa		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year	Yes X No		
before 2009?	L TES LAL NO		
If "Yes," list the years ▶ ,, ,, ,, ,, b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating	to incorrect		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No"	N/A	25	
statement - see instructions)	N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	Yes X No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943			ľ
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use S			
Form 4720, to determine if the foundation had excess business holdings in 2009)	cneaule C, N/A	26	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	N/A	3b	
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charita	hla nurnoca that	4a	-+
had not been removed from jeopardy before the first day of the tax year beginning in 2009?	יחיב אחו אספב ווועו	46	:

Form **990-PF** (2009)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	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))?	Y∈	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	3?	Y(es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y(es X No	[[
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or i			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	27/2	_
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check to				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f expenditure responsibility for the grant?		_		
		I/A L Y	es L No	
If "Yes," attach the statement required by Regulations section 53 494 6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay premiums on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal henefit contract?		i	Sb X
If "Yes" to 6b, file Form 8870	oci sonai benent contract.			,0 A
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut				'b
Port VIII Information About Officers, Directors, Trust		nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
· ·	to position	enter -0-)	and deterred compensation	allowances
ROBERT J DEPUTY	PRESIDENT & T	REASURER		
4200 MIDDLEBURY STREET	_			
ELKHART, IN 46516	0.00	0.	0.	0.
LAWRENCE P. DEPUTY	VICE PRESIDEN	T & SECRE	TARY	
4200 MIDDLEBURY STREET			.	
ELKHART, IN 46516	0.00	0.	0.	0.
	-			
	_			
	_		ļ	
	_		İ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE "		
	(b) Title, and average	l l	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	devoted to position		compensation	allowarices
110110	į		1	
	1			
	1			
	<u></u>			
Total number of other employees paid over \$50,000			•	0

FORM 990-PF (2009) · BILL DEPUTY FOUNDATION	26-2	480796 Pag	e 7
Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none			—
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensat	ion
NONE	(73)		_
			—
· · · · · · · · · · · · · · · · · · ·			
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	nt statistical information such as the	Expenses	
number of organizations and other beneficiaries served, conferences convened, research pap	ers produced, etc.		
1 <u>N/A</u>			
2			
3			
			—
4			
Part IX-B Summary of Program-Related Investments			_
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2.	Amount	_
1N/A			
2			
All other program-related investments See instructions.			
3			

Form **990-PF** (2009)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see 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	166,444.
	Average of monthly cash balances	1b	133,149.
	Fair market value of all other assets	1c	1,970,000.
d	Total (add lines 1a, b, and c)	1d	2,269,593.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) le l 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	_ 0.
3	Subtract line 2 from line 1d	3	2,269,593.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	34,044.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,235,549.
6	Minimum investment return. Enter 5% of line 5	6	111,777.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	d certair	1
1	Minimum investment return from Part X, line 6	1	111,777.
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	381.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	111,396.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	111,396.
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	111,396.
Р	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		50 0-0
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	68,970.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	68,970.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		224
	income. Enter 1% of Part I, line 27b	5	381.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	68,589.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies	for the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				111,396.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			64,134.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:		0.		
a From 2004				
b From 2005				
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: ► \$ 68,970.		•		
a Applied to 2008, but not more than line 2a			64,134.	
			04,134.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			4 026
d Applied to 2009 distributable amount				4,836.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as 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' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 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				106,560.
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	-			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
-a Excess-from-2005		·		
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Part XV Supplementary Information (continued)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year LOVEWAY, INC. NONE 501(C)(3) 28,000. CHARITABLE 54151 CR 33 MIDDLEBURY, IN 46540-9526 WELLFIELD BOTANIC NONE 501(C)(3) CHARITABLE 40,800. GARDENS, INC. 1000 N MAIN ST ELKHART, IN 46514-3205 Total 68,800. ➤ 3a **b** Approved for future payment NONE Total 0.

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

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
	- 5555		 		
a			 		
ь					
C	 				
d		 .			
e					
f					
g Fees and contracts from government agencies	l T				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	37,875.	
4 Dividends and interest from securities			14	295.	
	-	·=	14	233.	
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property					
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal	1 1		ļ		
property					
7 Other investment income					<u> </u>
8 Gain or (loss) from sales of assets other					
than inventory	l				•
9 Net income or (loss) from special events				· · · · · ·	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.			ł		
a			 		
b			ļ		
c			ļ		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		_38,170.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations)				_	
				. n	
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	æmp	t Purposes	
Line No Explain below how each activity for which inco			contril	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than	by providing fur	nds for such purposes).			
A\M					
					·
					
					
					· · · · · · · · · · · · · · · · · · ·
	-	 			
					
					
					
					· · · · · · · · · · · · · · · · · · ·
					
					

			DEPUTY F						-2480796		ge 13
P	art X			nsfers To a	and Transactions	an	d Relations	ships With N	oncharitable	•	
_	Did #	Exempt Organ		. of the fellows						Yes	No
1		ne organization directly or indi ode (other than section 501(c			-			ction 50 I(c) of		162	INO
		ifers from the reporting found				jarriza	uona,				
ľ	(1) (· •	auton to a noncham	ubio oxompt or	gumzanon or.				1a(1)		<u>x</u>
		Other assets							1a(2)		X
ļ		transactions:							1		
	(1) 5	Sales of assets to a noncharita	able exempt organiz	ation					15(1)		<u>X</u>
	(2) F	Purchases of assets from a no	oncharitable exempt	organization					1b(2)		X
	(3) F	Rental of facilities, equipment,	, or other assets						1b(3)		<u>X</u>
		Reimbursement arrangements	3						1b(4)		<u>_X</u> _
		oans or loan guarantees							1b(5)		X X X X
		Performance of services or me		=					1b(6)		<u>X</u>
		ng of facilities, equipment, ma	* '						<u> 1c </u>		<u>X</u>
•		answer to any of the above is vices given by the reporting f								ets,	
		nn (d) the value of the goods,			eu iess man ian market v	aluc II	ii any nansaono	in or snaring arrain	gement, snow in		
(a)	Line no	(b) Amount involved			e exempt organization		(d) Description	on of transfers, transac	ctions, and sharing an	angeme	nts
				N/A							
				-							
							<u></u>				
_	-										
			-								
											
				=							
									· ···		
2		foundation directly or indirect		•		anızatı	ions described				
		tion 501(c) of the Code (othe		c)(3)) or in sect	ion 527?				Yes	X] No
	o If Ye	s," complete the following sch			(h.) T			(18)			
		(a) Name of org	ganization		(b) Type of organizatio			(c) Description of	relationship		
		N/A				_					
						+					
						\top					
										,	
		enalties of perjury, I declare that I I						of my knowledge and	belief, it is true, corre	ct,	
	anu con	nplete Declaration of preparer (oth	man payer or fidu	ciary) is based on :	an information of which prepa	uer nas					
m	ہے 🛦	1 01/47/	May ary	1	1/27/10	2		STEE			
Ţ	▼ Sı	gnature of officer or trustee			<u> </u>	le:	Title	de a al cof	10	_	
Sign Here	< ° ا	Preparer's	lugh L. Eas	h '-		Date 4	soul . Si	heck if elf-	Preparer's identify	•	ber
์ดี	Paid Preparer's Use Only					1/2	× // 10 e	mployed 🕨 🕍] Poo19	6/4/	
	Pa epa se (MCGLADRE	Y, INC.				EIN >			
	ᇫ	_	BOX 99 HART, IN-	1-6-5-1-5 <u>0</u>	∙0•0 			Uboss	·/~E~7- //~\ ~~^		7·0·0~
		EUKI.	יטעד דוא י		<u> </u>			Phone no	(574) 29	<u>6 – 3 </u>	<u> </u>

<u>(574)</u> <u>296-3780</u> Form **990-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							
ВІ	26-2480796							
Organization type (check of	one).							
Filers of:	Section:							
Form 990 or 990-EZ 501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Specia	Rule See instructions.						
General Rule								
X For an organization contributor Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (il lete Parts I and II.	n money or property) from any one						
Special Rules								
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II	=						
aggregate contribu	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 lf 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								
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedul Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	, , , , , , , , , , , , , , , , , , , ,						
LHA For Privacy Act and	Paperwork Reduction Act Notice, see the Instructions Schedu	le B (Form 990, 990-EZ, or 990-PF) (2009)						
for Form 990, 990-E	Z, or 990-PF.							

	4		-	
age	- 1	of	- 1	of Part I

ı	a ma	of a		nizat	ion	
	ame	OT I	nrna	nizai	เกท	

Employer identification number

BILL DEPUTY FOUNDATION

26-2480796

Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	WILLIAM J. DEPUTY CHARITABLE LEAD ANNUITY TRUST 4200 MIDDLEBURY ST ELKHART, IN 46516	- \$\frac{1,555,311.}{-	Person Payroll Noncash X (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 Noncash (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 Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions - \$	Person Payroll Noncash (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 Noncash (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)

Name of organization

BILL DEPUTY FOUNDATION

26-2480796

Part II	Noncash Property (see instructions)		
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(coo mos some)	
	NEW BUFFALO CONDO AND EQUIPMENT,	<u> </u>	
1	FIDELITY INVESTMENT	<u> </u>	
-			00/00/00
		\$1,555,311.	09/02/09
(a)			
No.	(b)	(c)	/d\
from	Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	bescription of noncestr property given	(see instructions)	Date received
			<u>-</u>
	, at at		
		-	
		_{\$}	
			· · · · · ·
(a)		(2)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(see instructions)	
Ĭ			
		\$	
(a) No.	/h-X	(c)	4.8
from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
			
		-	
		—	
		_{\$}	
		-	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I		(See mouddins)	
		\$	
<u></u>			
(a) No.	<i>n</i> .	(c)	4.10
from	(b) Description of noncash property given	FMV (or estimate)	(d)
Part I	bescription of noncasti property given	(see instructions)	Date received
-			
		 \$	
453 02-0°	140		0, 990-EZ, or 990-PF) (2

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
ETRADE IRA FIDELITY HORIZON IRA JPM SAVINGS 9572 WD CLAT					,	1 37,6	3. 1. 99. 38. 34.
TOTAL TO FORM 990-PF, PART I,	LINE	3, CO	LUMN A			37,8	75.
FORM 990-PF DIVIDEND	S AND	INTER	EST FRO	M SEC	URITIES	STATEMENT	2
SOURCE		GROSS	LUOMA		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	.)
JP MORGAN			295	5.	0.	2	95.
TOTAL TO FM 990-PF, PART I, L	N 4		295	5.	0.	2	95.
FORM 990-PF	AC	COUNTI	NG FEES	5		STATEMENT	3
DESCRIPTION	EXPE	A) INSES BOOKS	(P NET IN MENT I				
BOOKKEEPING ACCOUNTING		961. 2,980.		0		0.	0.
TO FORM 990-PF, PG 1, LN 16B		3,941.		0	•	0.	0.
FORM 990-PF C	THER	PROFES	SIONAL	FEES		STATEMENT	4
DESCRIPTION	EXPE	A) INSES BOOKS	NET IN				
CONTRACT SERVICES		170.		0	•	0. 1	70.
TO FORM 990-PF, PG 1, LN 16C		170.		0	•	0. 1	70.

TOTAL AMOUNT DUE

FORM 990-PF	OTHER E	XPENSES		STATEMENT	
DESCRIPTION	(A) (B) EXPENSES NET INVE PER BOOKS MENT INC				ABLE
BANK SERVICE CHARGES OFFICE SUPPLIES PROPERTY TAXES INVESTMENT FEES	48. 146. 4,570. 22.		0. 0. 0. 22.	0. 0. 0.	0.
TO FORM 990-PF, PG 1, LN 23	4,786.		22.	0.	0.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	' 6
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARK VALUE	ET
ETRADE IRA MCM FIDELITY #1900 MARISICO FOCUS ISHARES TR MSCI EAFT INDEX FI HARBOR INTRNL INVSTR SH CAMBIAR OPP INV CL JP MORGAN INVEST OTHER	ND	COST COST COST COST COST COST COST	11,225. 1,206,646. 19,506. 7,581. 7,509. 13,319.	1,206, 16, 5, 5,	225. 646. 061. 528. 868. 253. 118.
TOTAL TO FORM 990-PF, PART II	I, LINE 13	=	1,265,904.	1,256,	699.
FORM 990-PF INT	TEREST AND P	ENALTIES		STATEMENT	7
TAX DUE FROM FORM 990-PF, PALATE PAYMENT INTEREST LATE PAYMENT PENALTY	ART VI	,			181. 2. 4.

187.

	STANTIAL CONTRIBUTORS /II-A, LINE 10	STATEMENT	
NAME OF CONTRIBUTOR	ADDRESS		
WILLIAM J. DEPUTY CHARITABLE LEAD ANNUITY TRUST	4200 MIDDLEBURY ST		
ANNUTTI TRUST	ELKHART, IN 46516		

FORM 990-PF	LAT	E PAYMENT I	PENALTY		STAT	PEMENT	9
DESCRIPTION	DATE	: AMOUR	1T	BALANCE	MONTHS	PENALT	Y
TAX DUE EXTENSION PAYMENT DATE FILED	05/15/ 05/15/ 09/15/	10	381. <200.>	381. 181. 181.	4		4.
TOTAL LATE PAYMENT I	PENALTY						4.
EODY 000 DE							
FORM 990-PF	LAI	E PAYMENT	NTEREST	<u> </u>	STAT	TEMENT 1	10
DESCRIPTION	DATE	AMOUNT	INTEREST BALAN			INTERES	
			BALAN		E DAYS	INTERES	

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

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoons X
•	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	•	
	complete Part II unless you have already been granted an automatic 3-month extension on a previously t	iled Fo	orm 8868.
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corpo	ration required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nplete	
Part I or	nly	•	▶ □
All othe	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request a	n exter	nsion of time
	come tax returns.		
noted b (not auto you mus	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi elow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron omatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cost submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic for a goviefile and click on e-file for Chanties & Nonprofits	ically i	f (1) you want the additional ated Form 990-T. Instead.
Type or	Name of Exempt Organization	Emp	loyer identification number
print	DILL DEDUMY DOUNDAMION		6 0400706
File by the	BILL DEPUTY FOUNDATION	2	6-2480796
due date for filing your return See	4200 MIDDLEBURY STREET		
instruction			
Check 1	ype of return to be filed (file a separate application for each return):		
☐ Fo	orm 990 Form 990-T (corporation) Form 4	720	
F	orm 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5		
Fo	orm 990-EZ Form 990-T (trust other than above) Form 6	069	
X Fo	orm 990-PF	370	
	THE TOWNS AT ON		
. . .	THE FOUNDATION	E 1 6	
	books are in the care of \blacktriangleright 4200 MIDDLEBURY STREET - ELKHART, IN 46 whone No. \blacktriangleright 574-970-1191 FAX No. \blacktriangleright	210	
•	organization does not have an office or place of business in the United States, check this box		
		ıs ıs 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		
1 Ir	equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt		
	AUGUST 15, 2010 , to file the exempt organization return for the organization named a		The access of the control of the con
	· · · · · · · · · · · · · · · · · · ·	bove.	The extension
	for the organization's return for:	ibove.	The extension
	for the organization's return for: \boxed{X} calendar year 2009 or	bove.	The extension
	for the organization's return for:	bove.	ne extension
>	for the organization's return for: \boxed{X} calendar year 2009 or		— Change in accounting period
2 if t	for the organization's return for: X calendar year 2009 or tax year beginning, and ending this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		Change in accounting period
2 If 1	for the organization's return for: X calendar year 2009 or tax year beginning, and ending this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any inrefundable credits. See instructions.		
2 if i 3a if i b if i	for the organization's return for: X calendar year 2009 or tax year beginning , and ending this tax year is for less than 12 months, check reason: Initial return This application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any inrefundable credits. See instructions. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	Change in accounting period \$ 200.
2	for the organization's return for: X calendar year 2009 or tax year beginning , and ending this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any enrefundable credits. See instructions. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated is payments made. Include any prior year overpayment allowed as a credit.		Change in accounting period
2 If 1 3a If 1 b If 1 c Ba	for the organization's return for: X calendar year 2009 or tax year beginning , and ending this tax year is for less than 12 months, check reason: Initial return This application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any inrefundable credits. See instructions. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated application is for Form 990-PF or 990-T, enter any refundable credits and estimated applications. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated applications made. Include any prior year overpayment allowed as a credit.	3a	Change in accounting period \$ 200.
2 If 1 3a If 1 no b If 1 c Ba de	for the organization's return for: X calendar year 2009 or tax year beginning , and ending this tax year is for less than 12 months, check reason: Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any enrefundable credits. See instructions. This application is for Form 990-PF or 990-T, enter any refundable credits and estimated is payments made. Include any prior year overpayment allowed as a credit.	3a	Change in accounting period \$ 200.

Form	8868 (Rev. 4-2009)			Page 2
• If v	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check the	ns box		▶ X
_	only complete Part II if you have already been granted an automatic 3-month extension on a previously	•		
• If y	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Pa	Additional (Not Automatic) 3-Month Extension of Time. Only file the original	(no copie	s needed).	
	Name of Exempt Organization	En En	nployer ide	entification number
Туре	1 " ";			-
print	BILL DEPUTY FOUNDATION		26-24	80796
File by extend		Fo	r IRS use o	
due da	***** 4200 MIDDLEBURY STREET	,,,		•
filing th	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.	5 - 15 - 148	克爾拉斯	をおりの調整におり
instruc	ELKHART, IN 46516	4		(1) X 7 3 4 7 7 7 7 7 10 10 10 10 10 10 10 10 10 10 10 10 10
Chec	k type of return to be filed (File a separate application for each return).			7
	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A		Form 5227	Form 8870
	Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720		Form 6069	•
STO	Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a pre	viously f	iled Form	8868.
	THE FOUNDATION			
● Th		4651	6	
	le books are in the care of 4200 FIDDBEBOKT STREET - EHRHART, IN FAX No. ▶	#02T	0	
	the organization does not have an office or place of business in the United States, check this box			
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is	for the who	lo group, shock this
box				
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010.	Ji air IIIeII	ibers trie e	Xterision is for.
5	For calendar year 2009, or other tax year beginning and ending	na		
6	If this tax year is for less than 12 months, check reason: Initial return Final return	'' [']	Change	n accounting period
7	State in detail why you need the extension		_ Change i	in accounting pendo
•	ADDITIONAL TIME IS REQUIRED TO PREPARE A COMPLETE AN	ID AC	CURATI	RETURN.
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	82	\$	200.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	E	E)	
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868.	8b	\$	200.
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instruction	ons. 8c	\$	0.
	Signature and Verification			
Under it is tri	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and is, correct, and complete, and that I am authorized to prepare this form.	to the best	of my know	ledge and belief,
	ure Meuld. Eakino Title CPA	Па	te > 8	1/13/10
				rm 8868 (Rev. 4-2009)