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Form

**990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form  
Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

**2009****Open to Public  
Inspection****A** For the 2009 calendar year, or tax year beginning **JANUARY 1**, 2009, and ending **DECEMBER 31**, 20 **09****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

Please  
use IRS  
label or  
print or  
type  
See  
Specific  
Instruc-  
tions**C** Name of organization**DILLON STORES OBEE SCHOOL SCHOLARSHIP TRUST**

Number and street (or P.O. box, if mail is not delivered to street address)

Room/suite

**P.O. BOX 913**

City or town, state or country, and ZIP + 4

**HUTCHINSON, KS 67504-0913****D** Employer identification number**31-1574259****E** Telephone number**620-694-2372****F** Group Exemption

Number ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting Method ☐ Cash ☐ Accrual  
Other (specify) ►**I** Website: ►**J** Tax-exempt status (check only one) — ☒ 501(c) ( **3** ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. **\$ 6,450****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	<b>8,630</b>
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	
	<b>4</b>	Investment income . . . . .	<b>4</b>	<b>-2,180</b>
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	
	<b>c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	
	<b>6</b>	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/> . . . . .		
	<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	<b>6a</b>	
	<b>b</b>	Less: direct expenses other than fundraising expenses . . . . .	<b>6b</b>	
<b>c</b>	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	<b>6c</b>		
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>		
<b>b</b>	Less: cost of goods sold . . . . .	<b>7b</b>		
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>		
<b>8</b>	Other revenue (describe ►) . . . . .	<b>8</b>		
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	<b>9</b>	<b>6,450</b>	
Expenses	<b>10</b>	Grants and similar amounts paid (attach schedule) . . . . .	<b>10</b>	<b>8,930</b>
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	
	<b>16</b>	Other expenses (describe ►) . . . . .	<b>16</b>	
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . .	<b>17</b>	<b>8,930</b>
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	<b>-2,840</b>
	<b>19</b>	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>19</b>	<b>89,417</b>
	<b>20</b>	Other changes in net assets or fund balances (attach explanation) . . . . .	<b>20</b>	
	<b>21</b>	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20 . . . . .	<b>21</b>	<b>86,937</b>

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	<b>89,417</b>	<b>86,937</b>
<b>23</b> Land and buildings . . . . .	<b>23</b>	
<b>24</b> Other assets (describe ►) . . . . .	<b>24</b>	
<b>25</b> <b>Total assets</b> . . . . .	<b>89,417</b>	<b>86,937</b>
<b>26</b> <b>Total liabilities</b> (describe ►) . . . . .	<b>26</b>	
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	<b>89,417</b>	<b>86,937</b>

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No 106421

Form **990-EZ** (2009)

SCANNED JUL 20 2010

RECEIVED

MAY 24 2010

OGDEN, UT

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**Part III Statement of Program Service Accomplishments (See the instructions for Part III.)**

## Expenses

**What is the organization's primary exempt purpose?**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 SEE STATEMENT 3

(Grants \$ ) If this amount includes foreign grants, check here . . . . ☐

28a	8,930
-----	-------

29

(Grants \$ ) If this amount includes foreign grants, check here . . . ☐

29a

30

(Grants \$ ) If this amount includes foreign grants, check here . . . ☐

30a

31

(Grants \$ ) If this amount includes foreign grants, check here ☐

31a

**32 Total program service expenses** (add lines 28a through 31a) . . . . . ▶

32

<b>Part IV</b>		<b>List of Officers, Directors, Trustees, and Key Employees.</b> List each one even if not compensated. (See the instructions for Part IV.)
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[illegible]

**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions ► <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b> N/A	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b> N/A	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b> N/A	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► <u>0</u> ; section 4912 ► <u>0</u> ; section 4955 ► <u>0</u>		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	✓
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . .		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . .		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ► <b>NONE</b>		
<b>42a</b> The organization's books are in care of ► <b>FIRST NATIONAL BANK</b> Telephone no. ► <b>620-694-2372</b> Located at ► <b>P.O. BOX 913, HUTCHINSON, KS</b> ZIP + 4 ► <b>67504-0913</b>		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ► _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ► _____		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here . . . . .		<input type="checkbox"/>
and enter the amount of tax-exempt interest received or accrued during the tax year . . . . .	<b>43</b>	
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>45</b>	✓

**Part VI** **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
<b>46</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>46</b>	<input checked="" type="checkbox"/>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input checked="" type="checkbox"/>
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input checked="" type="checkbox"/>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input type="checkbox"/>

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

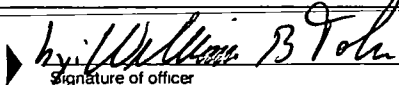
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				

**f** Total number of other employees paid over \$100,000 . . . . .

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		

**d** Total number of other independent contractors each receiving over \$100,000 . . . . .

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
<b>Sign Here</b>	 Signature of officer		5-14-10 Date	
	Vice President & Trust Officer Type or print name and title			
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no	
	May the IRS discuss this return with the preparer shown above? See instructions . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No			

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization

**DILLON STORES OBEE ELEMENTARY SCHOOL SCHOLARSHIP TRUST**

Employer identification number

**31 1574259**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a ☒ Type I      b ☐ Type II      c ☐ Type III—Functionally integrated      d ☐ Type III—Other
  - e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
    - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? ☐
    - (ii) A family member of a person described in (i) above? ☐
    - (iii) A 35% controlled entity of a person described in (i) or (ii) above? ☐

	Yes	No
11g(i) <input type="checkbox"/>		
11g(ii) <input type="checkbox"/>		
11g(iii) <input type="checkbox"/>		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Obsee School of Buhler Unified	48-0720473		✓		✓		✓		-0-
<b>Total</b>									

**Part II** **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	
<b>13</b> <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a</b> <b>33 1/3% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>33 1/3% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a</b> <b>10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b</b> <b>10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18</b> <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%
<b>19a 33 1/3 % support tests—2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3 % support tests—2008.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions <input type="checkbox"/>		



**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Area for supplemental information with horizontal dashed lines.

**DILLON STORES OBEE ELEMENTARY SCHOOL SCHOLARSHIP TRUST**

**31-1574259**

**FORM 990-EZ**

**INFORMATION REGARDING TRANSFERS  
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS**

**STATEMENT 7**

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE AND FUNDS,  
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL  
BENEFIT CONTRACT? ..... ☐ YES ☒ NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,  
DIRECTLY OR INDIRECTLY,  
ON A PERSONAL BENEFIT CONTRACT? ..... ☐ YES ☒ NO

**DILLON STORES OBEE ELEMENTARY SCHOOL SCHOLARSHIP TRUST**

**31-1574259**

**SCHEDULE A**

**EXPLANATION OF QUALIFICATIONS TO RECEIVE  
PAYMENTS PART III, LINE 3A**

**STATEMENT 8**

SEE COPY OF DILLON STORES / OBEE GRADE SCHOOL SUPERSTARS SCHOLARSHIP  
PROGRAM ADMINISTRATIVE RULES AND BY-LAYS ATTACHED.

## **EXHIBIT A**

### **THE DILLON COMPANIES-OBEE ELEMENTARY SCHOOL EDUCATION SCHOLARSHIP FUND (Grades K-6)**

**GOAL:** To award \$300.00 each 9 weeks (first 9 weeks is for qualifying) to 7 superstars based on the following criteria:

1. Perfect Attendance and participation in school program (Death of immediate family member or friend is an exception);
2. Academic Achievement which includes P.E., Band and Music (Kindergarten is excluded);
3. Exemplary Behavior (When inappropriate behavior occurs, the student will be referred to the office. The principal will have a conference with the student and the parents may be notified. During the conference with the principal, specific disciplinary action may be imposed in connection with notification of parents. When action is taken by the building administrator, this determines termination of qualification for the quarter.);
4. Parent Participation (Must be a parent, or any mentoring adult, initiated and educational in nature);
5. Special Project which research project shall be completed at home on the topic assigned by the Scholarship Committee (Projects will be judged by a committee).

**ANY STUDENT WHO ACHIEVES SUPERSTAR CREDIT THREE TIMES IN ONE YEAR WILL BE AWARDED A BONUS OF \$100.00 BRINGING THE GRANT TO \$1000.00 FOR THE YEAR.**

#### **SCHOLARSHIP COMMITTEE:**

The Obee Principal

- 1 Primary teacher
- 1 Intermediate teacher
- 1 Counselor
- 2 Parents
- 1 Dillon's representative

Recommendation will be given to Mrs. Sims for final decision. Announcement will be made as soon as possible after selection at an appropriate time in order to include parents.

fees by the institution attended. No refund of tuition and fees shall be paid to Awardee, but shall be returned to the trust and held for future awards to other qualifying students.

B. No Payments to Awardee. No part of any Awardee's account shall be paid directly or indirectly to the Awardee. All funds shall be paid to a qualifying educational institution, as herein identified, for tuition, fees, books, supplies, equipment, room, board, and similar expenses reasonably related to assisting the Awardee in his or her educational pursuit. The determination of the types of expenses to which the grant shall apply shall be made by the Awardee with the concurrence of the Committee, provided that the Committee shall counsel the Awardee upon the income and related tax consequences of the choices of expenses to be paid. (By example, certain of the foregoing expenses can be paid and be excluded from the income of the Awardee, e.g. tuition and fees; whereas payments for room and board cannot be so excluded.)

C. Claiming a Scholarship Award. Each Awardee shall apply to the Committee for payment of his or her Award. The application shall identify the Awardee, the college, university or technical school to receive payment of the Award, the amount claimed, an invoice from the educational institution, and such other information as shall enable the Committee to provide the Trustee with appropriate disbursement instructions.

D. Additional Responsibilities. Each Awardee shall be responsible for keeping the Committee informed with respect to the Awardee's address, educational status, and such other pertinent information as the Committee deems necessary to enable it to carry out its duties hereunder.

always consist of objectively measurable components, the accomplishment of which shall contribute to the educational enhancement of a primary and intermediate grade student. Such criteria may include such factors as academic achievement, attendance, behavior, parental participation in the student's education and in Obee, and successful completion of a home research project (student and parent) assigned by the Committee.

D. Announcements, Accounting. The Committee members shall determine and identify each student who qualifies for an Award ("Awardee"); provided, however, that the representative of Dillons and the parent members of the Committee who have a student attending Obee shall be excluded from the selection process. Within a reasonable time after the Committee selects the recipient(s) of an Award, each Awardee shall be notified of his or her Award and the Trustee shall be directed to establish an account for the Awardee's benefit, or to increase his or her account. Upon request any Awardee or Awardee's parent, guardian or responsible adult may, at reasonable intervals, receive a report setting forth the status of Awardee's scholarship account.

E. Award Account Limitations. Each Award shall be limited to Three Hundred Dollars (\$300.00) per student in any "Quarter." As used herein a Quarter shall be one grading period of nine (9) weeks at Obee. A student earning three (3) consecutive Quarter awards shall be awarded an additional One Hundred Dollars (\$100.00). The maximum scholarship award that each student may earn in one school year shall be One Thousand Dollars (\$1,000.00). There shall be no limit upon the number of Quarters within which a student may earn a scholarship award. The number of scholarship awards will be limited by the funds available in the trust. The entire amount of trust funds available in any year shall be awarded by the Committee, provided that a sufficient number of students qualify under the criteria for a Superstar Scholarship Award. If a sufficient number of students do not qualify, then any unused funds shall be retained in the trust for future scholarship use.

### ARTICLE III THE AWARDEE'S RESPONSIBILITIES

A. College Entrance, Attendance, Achievement. Each Awardee shall be entitled to receive the benefit of his or her Award only upon satisfying the Committee that he or she has successfully matriculated at a college, university or technical school recognized by the United States Internal Revenue Service as a "qualifying educational institution" which also qualifies as such under the then existing Internal Revenue Code of the United States, including any successor provision of the Code providing exemption from taxation of scholarship grants for educational purposes.

In addition each Awardee shall continue in his or her educational pursuits until the Award has been earned as tuition and

DILLON STORES/OBEE GRADE SCHOOL  
SUPERSTARS SCHOLARSHIP PROGRAM  
ADMINISTRATIVE RULES AND BY-LAWS

Preamble

1. The Scholarship Committee of the Dillon Stores/Obee Elementary School "Superstars Scholarship Program" has been established under a trust agreement dated May <sup>June</sup> ~~23~~, 1997, and executed by and between Dillon Stores, A Division of Dillon Companies, Inc. ("Dillons") and First National Bank, Hutchinson, Kansas.

2. These Administrative Rules and By-Laws are promulgated pursuant to the foregoing trust agreement and shall govern the activities of the Scholarship Committee established therein.

ARTICLE I  
SCHOLARSHIP COMMITTEE

A. Membership. The Scholarship Committee ("Committee") shall be composed of:

1. The acting principal of Obee;
2. One teacher engaged in teaching in the primary grades of Obee;
3. One teacher engaged in teaching in the intermediate grades of Obee;
4. One school counselor assigned to Obee, if any;
5. Two parents of students attending Obee;
6. One representative selected by Dillons.

B. Duties. The Committee shall perform the duties assigned it pursuant to the terms and conditions of the aforesaid trust agreement.

C. Organization, Quorum, Meetings, Notice.

1. Organization. The Committee shall meet no less frequently than annually. An Annual Meeting shall be held on or before May 15 each year. It shall conduct its business as a committee. The principal of Obee shall serve as chairperson of the Committee, and one of its members shall be designated as Secretary for the purposes of recording the actions of the Committee, and keeping the records of the accounts of the Awardees. The chairperson shall give the Committee two weeks written notice of the annual meeting.

FORM 990-EZ

CASH GRANTS AND ALLOCATIONS

STATEMENT 3

CLASS OF ACTIVITY / DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
SCHOLARSHIP TO KANSAS STATE UNIVERSITY PAIGE KAUTZER 502 Barnes Lake Rd Hutchinson, KS 67501	NONE	832.15
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE DANNY RAY ELAM 210 W 19th Ave. Hutchinson, KS 67502	NONE	205.00
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE RYAN LYNN 15 South Carlo Hutchinson, KS 67501	NONE	363.29
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE KYLE ALLAN SEVERIN 15 South Carlo Hutchinson, KS 67501	NONE	275.00
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE JESSICA GEE 8912 E 4th Ave. Hutchinson, KS 67501	NONE	1898.58
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE JEAN GILES 5318 Frank Rd Hutchinson, KS 67502	NONE	355.00
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE SHELBY KELLEY 5907 E 17th Ave. Hutchinson, KS 67501	NONE	1507.97
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE CALLEY M EVENSON 7402 N Medora Rd Hutchinson, KS 67502	NONE	890.86
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE DAYTON ARMER 918 N Willison Rd Hutchinson, KS 67501	NONE	899.91
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE COURTNEY BEASLEY 4203 Brigadune Drive Hutchinson, KS 67502	NONE	620.48
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE ALYSE CALEY 16 North Berwyn Hutchinson, KS 67501	NONE	420.62
SCHOLARSHIP TO HUTCHINSON COMM COLLEGE JORDAN DAVID POWELL 205 E Mourn Lane Hutchinson, KS 67501	NONE	661.25

TOTAL INCLUDED ON FORM 990-EZ, LINE 10

8930.11

## FORM 990-EZ STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 4

## STATEMENT

THE TRUST'S ONLY PROGRAM SERVICE ACCOMPLISHMENT IS THE PAYMENT OF SCHOLARSHIPS AS DIRECTED BY SCHOLARSHIP COMMITTEE TO OBEE ELEMENTARY SCHOOL GRADUATES.  
SEE STATEMENT 3

TO FORM 990-EZ, LINE 28

GRANTS	EXPENSES
8930	8930

## FORM 990-EZ PART III - STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 5

## EXPLANATION

TO PROVIDE COLLEGE SCHOLARSHIPS FOR OBEE ELEMENTARY SCHOOL STUDENTS PURSUANT TO THE "SUPERSTARS SCHOLARSHIP PROGRAM".

## FORM 990-EZ PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 6

NAME AND ADDRESS	TITLE AND AVG HRS/WK	COMPEN- SATION	EMP BEN PLAN CON	EXPENSE ACCOUNT
FIRST NATIONAL BANK P.O. BOX 913 - HUTCHINSON, KS 67504-0913	TRUSTEE	0.	0.	0.
MIKE BRYAN 4712 E. 4TH - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
ANGELA WILKINSON 4712 E. 4TH - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
MARCIA HUDSON 4712 E. 4TH - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
WILLIE REDMAN 4712 E. 4TH - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
LAURIE MOODY 3215 N. KENT ROAD - HUTCHINSON, KS 67502	SCHOLARSHIP COMMITTEE	0.	0.	0.
RACHEAL SINGLETON 502 N. KENT ROAD - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
JAMES GEHLING 2700 E. 4TH - HUTCHINSON, KS 67501	SCHOLARSHIP COMMITTEE	0.	0.	0.
TOTAL INCLUDED ON FORM 990-EZ, PART IV		0.	0.	0.