

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury
Internal Revenue Service Note: The foundation ma

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending Initial Return of a former public charity Final return G Check all that apply Initial return Amended return Address change Name change Name of foundation Employer identification number Use the IRS label. Robert E. Oliphant Charitable Foundation 31-6652673 Otherwise. Number and street (or P O box number if mail is not delivered to street address) R Telephone number (see the instructions) print c/o Bank of Odessa, P.O. Box 200 (816) 633-5331 or type See Specific City or town State ZIP code С If exemption application is pending, check here Instructions. 64076 Odessa MO 1 Foreign organizations, check here Check type of organization: X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Fair market value of all assets at end of year Accounting method: X Cash J under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► Ś (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necespurposes sarıly equal the amounts ın column (a) (cash basis only) (see the instructions).) 0. Contributions, gifts, grants, etc, received (att sch) Ck ► X if the foundn is **not** reg to att Sch B Interest on savings and temporary 0 O 0, cash investments Dividends and interest from securities 0. Ō. Ō. 5a Gross rents 0 0. Ō. b Net rental income or (loss) REVENUE 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Ö. 9 Income modifications 0. 10a Gross sales less returns and allowances 4 **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 0. 11 Other income (attach schedule) 8 0 SCANNED AAR 12 Total. Add lines 1 through 11 0 0. Ο. Ō. 13 0. 0. Ō. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 0. 0. 0. 0. 15 Pension plans, employee benefits 0. 0. 0. 0. 16a Legal fees (attach schedule) 0. 0. 0. 0. ADMINISTRATIVE Ō. **b** Accounting fees (attach sch) 0. 0. c Other prof fees (attach sch) 0 0. 0. 0. 17 Interest 0 0. 0. 0. 18 Taxes (attach schedule)(see instr.) Depreciation (attach 19 0 0 sch) and depletion 0. 0. Ō. 0. 0. **Occupancy** 0. Ō. Ō. <u>0</u>. and meetings Printing and publications
Other expenses (attach s EXPERSES 0. Ō. 0. 0. 123 Amontization 0 0. 0. 0. Total operating and administrative expenses. Add lines 13 layough 23 n 0 0. 0. 0. 0. rotal expenses and disbursements. 0. 0. 0 . 0. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 0 0 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) 0.

Form	990-	PF (2009) Robert E. Oliphant Charitable For		31-665	52673 Page 2
Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		f year
	1	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	0.	· · · · · · · · · · · · · · · · · · ·	
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	١.,	Less: allowance for doubtful accounts			
	4	Pledges receivable			
	_	Less allowance for doubtful accounts Grants receivable			
	5				
	٥	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7				
A		Less allowance for doubtful accounts			The state of the s
A S S E T	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
S	10 a	Investments – U.S. and state government obligations (attach schedule)			
	t	Investments corporate stock (attach schedule)			
	0	Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis		*	
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)		···	
	14	Land, buildings, and equipment basis ▶		4.4	-
		Less accumulated depreciation (attach schedule)			
		Other assets (describe)			
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)	0.	0.	0.
L	17	Accounts payable and accrued expenses	0.	0.	
I	18	Grants payable	0.	0.	
AB	19	Deferred revenue	0.	0.	
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons	0.	0.	
- 1	21	Mortgages and other notes payable (attach schedule)	0.	0.	
T	22	Other liabilities (describe ►)	0.	0.	•
Ε	22	Total liabilities (add lines 17 through 22)	0.	0.	
<u> </u>	23	Foundations that follow SFAS 117, check here		<u> </u>	
		and complete lines 24 through 26 and lines 30 and 31.			,
N F E U	24	Unrestricted			
T N	25	Temporarily restricted		<u></u>	
A D	26	Permanently restricted			
A B S L L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ΤA	27	Capital stock, trust principal, or current funds			
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund			**
O E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see the instructions)			
	31	Total liabilities and net assets/fund balances (see the instructions)	0.	0.	
Part		Analysis of Changes in Net Assets or Fund Balance		<u> </u>	<u> </u>
-				th	-
ı	otal	l net assets or fund balances at beginning of year – Part II, colum of-year figure reported on prior year's return)	in (a), iine 30 (must agre	e with	
2		r amount from Part I, line 27a		2	0.
3	Other	increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		4	0.
5	Decrea	ases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line	30 6	0.

Page 2

BAA

Part VI instructions

Enter qualifying distributions from Part XII, line 4

Form 990-PF (2009)

0.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

		552673		P	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	e instructio	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
t		1			0.
	check here ► X and enter 1% 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, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				_
•	foundations only Others enter -0-)	2			<u>0.</u>
3	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3 4			<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0.
6	Credits/Payments.	-			
a	2009 estimated tax pmts and 2008 overpayment credited to 2009				
	Exempt foreign organizations — tax withheld at source 6b				
	: Tax paid with application for extension of time to file (Form 8868) 6c				
	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d .	7			
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0.
11		1			
Par	t VII-A Statements Regarding Activities		—-		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	_	Yes	No
	participate or intervene in any political campaign?	F	1 a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	L	1 b		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publish or distributed by the foundation in connection with the activities	ed			
	Did the foundation file Form 1120-POL for this year?		1 c		_X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ► \$ (2) On foundation managers ► \$				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	foundation managers >\$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If 'Yes,' attach a detailed description of the activities.		İ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		-		
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	_	3		<u>X</u> _
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	4a		<u>X</u>
_	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	-	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T.	_	5		<u> </u>
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? 	it	6	Х	7.5
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7		Х
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions)				
	MO - Missouri		ł		
t	o 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 <i>General Instruction G? If 'No,' attach explanation</i>		8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Pa	2(j)(5) rt XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	s	Ī		
	and addresses		10		X
BAA		For	n 99	0-PF (2009)

	n 990-PF (2009) Robert E. Oliphant Charitable Foundation t VII-A Statements Regarding Activities Continued	31-665267	3	F	Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address	application?	13	Х	
14	The books are in care of ► Robert E. Oliphant Telephon Located at ► c/o Bank of Odessa, P.O. Box 200, Odessa, MO ZIP + 4	ne no ► <u>(816)</u> ► 64076	633	- <u>53</u> 3	31
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	<u>□□□□□□□</u> □□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 13			
<u> </u>	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Τ.	Yes	No
1:	During the year did the foundation (either directly or indirectly):			163	140
.,	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	į		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	i		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
l	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction	ons)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			,
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).				
í	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years ► 20 , 20 , 20				1
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(all years listed, answer 'No' and attach statement — see the instructions)	(a)(2) (a)(2) to	2b		1
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years to	nere			_
	► 20, 20, 20				
3	a 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			
1	o If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)	d	3b		
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		х
I	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		X

BAA

Form **990-PF** (2009)

# Yes' to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 9	Form 990-PF (2009) Robert E. Oliphan			31-665	52673	Page 6
(2) Influence the outcome of any specific published selection (see section 4945(e))?			1 4/20 May Be Req	uirea (continuea)	r	
(2) Influence the automa of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an includual for travel, study, or other similar purposes? (4) Provide a grant to an includual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, scientific, literary, or electronian purposes, or for the prevention of cruely to chiterion or animals? (5) Provide for any purpose other than religious, charitable, scientific, literary, or electronian purposes, or for the prevention of cruely to chiterion or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or electronian purposes, or for the prevention of cruely to chiterion or animals? (6) Provide for any purpose of the transactions fail to qualify under the exceptions electronian purposes, or for the prevention of cruely to chiterion or animals? (8) Provide for any purpose of the framework of the prevention of says for in a current notice regarding disaster assistance check here (9) Trees, attach the statement required by fregulations section 33 4945-5(d) (9) Trees, attach the statement required by fregulations section 33 4945-5(d) (1) Press, attach the statement required by fregulations section 33 4945-5(d) (1) Press, attach the statement required by fregulations section 34 4945-5(d) (2) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? (2) At any time during the tax year, was the foundation managers and their compensation (see instructions). (3) Name and address (b) Title and average devoted to position (4) Name and address of each employee and order than 130,000 (5) Title and average devoted to position (6) Compensation (7) Compensation (1) Innoise, enter None. (9) Expense account other allowed on time 1—see instructions). If none, enter None. (9) Expense account other allowed on the party of the party of the party of the par		•	(section 4945(e))?	☐ Yes X	No	
(3) Provide a grant to an incindual for travel, study, or other smillar purposes? (4) Provide a grant to an organization other than a charitable, etc. organization described in section \$90(0)** (20, or 0.5) or section \$490(0)(2)** (dee instructions)** (5) Provide for any purpose other than religious, charitable, spenthfic, literary, or educational purposes, or for the prevention of cruelly to children or animals? (6) Provide for any purpose other than religious, charitable, spenthfic, literary, or educational purposes, or for the prevention of cruelly to children or animals? (7) Provide for any purpose other than religious, charitable, spenthfic, literary, or education or described in Regulations section \$3.498.5 or in a current notice regarding disaster assistance (see instructions)? (8) Organizations relying on a current notice regarding disaster assistance check here (9) Fith enswer is "es' to question \$3.498.5 or in a current notice regarding disaster assistance (see instructions)? (9) Organizations relying on a current notice regarding disaster assistance check here (9) Fith enswer is "es' to question \$3.498.5 or in a current notice regarding disaster assistance (see instructions)? (9) Fith enswer is "es' to question \$3.498.5 or in a current notice regarding disaster assistance (see instructions). (9) But the foundation control of Pregulations section \$3.498.5 or in a current notice regarding disaster assistance (etc. here (9) But the animal regulation of Pregulations section \$3.498.5 or in a current notice regarding disaster assistance (etc. here (9) But the animal regulation of Pregulations section \$3.498.5 or in a current notice regarding disaster assistance (etc. here (9) But the animal regulation of Pregulations section \$3.498.5 or in a current notice regarding disaster assistance (etc. here (9) But the animal regulation of the foundation animal regulation of the foundation regarding disaster assistance (etc. here (9) Pregulation of the foundation regarding disaster assistance etc. here	(2) Influence the outcome of any specific publ	ic election (see section	` ' ' '			
in section 50(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)			ourposes?	H 🗎	1 1	
(5) Provide for any purposes, or for the prevention of cruelty to children or animals? b If any answer is 'Yes' to 63/105, did any of the transactions fall to quality under the exceptions desirble in Regulations section 53/945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is 'Wes' to a Question 53/94, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Organizations relying on a current notice regarding disaster assistance check here c If the answer is 'Wes' to a Question 54/94. Jodes the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Organizations relying the sear, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract required by Regulations section 53/4945-5(g) For the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract required by Regulations section 53/4945-5(g) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract required by Regulations section 53/9495-5(g) Fart VIII information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address Di) Title and average flow the foundation for the flow of the grant of the properties of the foundation for the flow of the grant of the grant of the grant of the flow of the grant of the g	(4) Provide a grant to an organization other the	nan a charitable, etc, org 4940(d)(2)? (see instru	ganization described		No	
bif any answer is Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ——————————————————————————————————	(5) Provide for any purpose other than religiou	us, charitable, scientific,	literary, or			
described in Requilations section 53.4945 or in a current notice regarding disaster assistance (see instructions) Organizations relying on a current notice regarding disaster assistance check here of If the answer is ''es' to dijection 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If 'Yes' attach the statemant required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 85/0 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? The yes, did the foundation receive any proceeds or have any net income attributable to the transaction? The yes, did the foundation receive any proceeds or have any net income attributable to the transaction? The yes, did the foundation receive any proceeds or have any net income attributable to the transaction? The yes, did the foundation receive any proceeds or have any net income attributable to the transaction? The yes in the year, pay premiums, directly or indirectly, on a personal benefit contract? The yes in the year, pay premiums, directly or indirectly, on a personal benefit contract? The yes in the year, pay premiums, directly or indirectly, on a personal benefit contract? The yes in the year, pay premiums, directly or indirectly, on a personal benefit contract? The yes in the year, pay premiums, directly or indirectly, on a personal benefit contract? The year year year year year year year yea		•			NO	
c if the answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction? 7 a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 Listall officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit pairs and deferred compensation. (e) Expense account other allowances are weeked evoted to position. (a) Name and address of each employee hours per week devoted to position. (b) Title and average hours per week devoted to position. (c) Compensation (d) Contributions to employee benefit plant and deferred compensation. (d) Contributions to employee benefit plant and deferred compensation. (d) Contributions to employee benefit plant and deferred compensation. (d) Contributions to employee benefit plant and deferred compensation. (d) Contributions to employee benefit plant and deferred compensation. (d) Contributions to employee benefit plant and average hours per week devoted to position. (e) Title and average hours per week devoted to position. (f) Compensation (d) Contributions to employee benefit plant and addres	described in Regulations section 53.4945 or in	a current notice regardi	ing disaster assistance	oriz.	5b	
tax because it maintained expenditure responsibility for the grant? If Yes, attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes' to 6b, the Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, 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 to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation Ocessa, MO 64076 Trustee 1 Trustee 1 Depart E. Oliphant Trustee Trustee Trustee 1 Depart E. Oliphant Trustee 1 Depart E. Oliph	Organizations relying on a current notice regard	rding disaster assistance	e check here	▶ 🗌		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 1 List all officers, directors, furstees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (see instructions). (d) Contributions to employee benefit plans and deferred compensation (see instructions). (e) Expense account of the highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE' (a) Name and address of each employee hours paid more than \$50,000 hours per week devoted to position 2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE' (a) Name and address of each employee hours paid more than \$50,000 hours per week devoted to position None (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (other allowances) (e) Expense account of the instructions, If none, enter 'NONE' (b) Title and average hours per week devoted to position None O None None	tax because it maintained expenditure respons	sibility for the grant?		Yes	No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes' to 60, file Form 8870 7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At a time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At a time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7 By None 1 List all officers, directors, trustees, foundation managers and their compensations. (a) Name and address (a) Name and address (b) Title and average hours per week devoted to position (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (d) Expense account other allowances of the analysis of the party of the pa	6a Did the foundation, during the year, receive an		• •	□ves [v]	No.	
7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		ums, directly or indirectl	y, on a personal benefit		i i	х
Description	•	lation a north, to a number	utad tay abaltar transact		N-	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours per week devoted to position (c) Compensation (finot paid, enter-0-) (p) Trustee 2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.' (a) Name and address of each employee hours per week devoted to position None (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and their compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.' (a) Name and address of each employee hours per week devoted to position (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and the properties of the properties of the allowances of the allowanc	, , , , , , , , , , , , , , , , , , , ,					
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average devoted to position (c) Compensation (d) Contributions to employee element plans and deferred compensation other allowances of the allowance of the allowances of the allowances of the allowances of the allowances of the allowance of the allowances of the allowances of the allowance of the allowances of the allow	Part VIII Information About Officers, D					5,
(a) Name and address (b) Title and average devoted to position (c) Compensation (find paid, enter-0-) (find pa						
Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.' Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.'	1 List all officers, directors, trustees, foundation					
P.O. Box 200, Odessa, MO 64076 0.00 0. 0. 0. 0 2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation other allowances of the address of each employee benefit plans and deferred compensation of the allowances of the address of each employees paid over \$50,000 (c) Total number of other employees paid over \$50,000 (c) None	(a) Name and address	hours per week		employee benefit plans and deferred		
Odessa, Mo 64076 0.00 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	Robert E. Oliphant					
2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter 'NONE.' (a) Name and address of each employee hours per week devoted to position (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions of employee benefit plans and deferred compensation (b) Expense account other allowances of employee benefit plans and deferred compensation (c) Compensation (d) Contributions of employee benefit plans and deferred compensation (a) None (b) Expense account other allowances of employee benefit plans and deferred compensation (b) Title and average hours average hours average hours per week devoted to position (c) Compensation (d) Contributions of the rallowances of the r	P.O. Box 200,	Trustee				
(a) Name and address of each employee paid more than \$50,000 None (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation O O Total number of other employees paid over \$50,000	Odessa, MO 64076	0.00	0.	0.		0.
(a) Name and address of each employee paid more than \$50,000 None (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation O O Total number of other employees paid over \$50,000						
(a) Name and address of each employee paid more than \$50,000 None (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation O O Total number of other employees paid over \$50,000						
(a) Name and address of each employee paid more than \$50,000 None (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation O O Total number of other employees paid over \$50,000		_				
(a) Name and address of each employee paid more than \$50,000 None (b) Title and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation O O Total number of other employees paid over \$50,000	2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions) If none ente	r 'NONE '	
paid more than \$50,000 hours per week devoted to position None O O Total number of other employees paid over \$50,000 hours per week devoted to position hours per week devoted to position other allowances other allowances other allowances		T	(T .	e account
0 0 0 0 Total number of other employees paid over \$50,000	paid more than \$50,000	`hours per week `	(•, •••••	employee benefit plans and deferred		
O	None	-				· -
O	0					
O	0					<u> </u>
O	0					
Total number of other employees paid over \$50,000 ► Non	_	-				
	0					
RAA TEE 40306 07/06/09 Form 990-PF (200	Total number of other employees paid over \$50,000]	<u> </u>	Farr. 00	None

Form 990-PF (2009) Robert E. Oliphant Charitable Foundation 31-66 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total number of others receiving over \$50,000 for professional services	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 None	- - 0.
2	-
3	-
4	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	-
2	-
All other program-related investments See instructions 3	-
Total Trico T through o	•
BAA	Form 990-PF (2009)

Form 990-PF (2009) Robert E. Oliphant Charitable Foundation 31	-6652673	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign foundat	
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	
b Average of monthly cash balances	1b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) . 1e		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	0.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► and do not complete this part XI	•	ons
1 Minimum investment return from Part X, line 6	1	0.
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	0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	0.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	0.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required)	3a	
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	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2009)

0.

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				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		i	0.	
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2009				
a From 2004 0.				
b From 2005 0.		,		
c From 2006 0 . d From 2007 0 .				
d From 2007 0. e From 2008 0.	,	`	*	
f Total of lines 3a through e	0.		*	
4 Qualifying distributions for 2009 from Part	, ,	*		·
XII, line 4 ► \$ 0.	•	*		
a Applied to 2008, but not more than line 2a	*			
b Applied to undistributed income of prior years (Election required – see instructions)	<			
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2009 distributable amount	. ,	<u>* </u>		
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))				
Same amount must be shown in column (a)			,	
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.	3	
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section			**	
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions	* * : .	0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.	,			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				* *
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	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 0.				
b Excess from 2006 0.				
c Excess from 2007 0.				
d Excess from 2008 0.				
e Excess from 2009 0.	<u></u>			

Form 990-PF (2009) Robert E. Olipha				31-6652673	Page 10
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or do is effective for 2009, enter the date of the r	uling		-	_ ` >	
b Check box to indicate whether the foundation		ating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	ad \$5,000 or more	in
assets at any time during th Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have	ers: ave contributed mor	re than 2% of the to	otal contributions rec section 507(d)(2))	eived by the foundation	on before the
b List any managers of the foundation who or a partnership or other entity) of which the f	wn 10% or more of oundation has a 10	the stock of a corp % or greater intere	oration (or an equall st	y large portion of the	ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions	to preselected char	itable organizations	and does not accept i	insolicited onditions,
a The name, address, and telephone number	of the person to wi	hom applications s	hould be addressed		
b The form in which applications should be s	ubmitted and inform	nation and material	s they should include	5,	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	uch as by geograph	iical areas, charital	ole fields, kinds of in	stitutions, or other fac	tors

Form 990-PF (2009) Robert E. Oliphant Charitable Foundation

31-6652673

Page 11

Part XV Supplementary In	ıform	ation (c	ontinued)			
3 Grants and Contributions Paid	l Durir	ng the Yea	r or Approved for Futu	re Payment	<u> </u>	
Recipient			If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
			substantial contributor	recipient	CONTRIBUTION	
a Paid during the year						
None				İ		
N/A						
N/A	MO	64076		N/A	N/A	0.
				:		
				Ì		
				1		
				1		
				1		
]		
				!		
Total			<u> </u>	<u> </u>	► 3a	0.
b Approved for future payment						·
Approximately and the second s						
				ļ		
Total			<u>. </u>	·	► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter o	ross amounts unless otherwise indicated	Unrelated	business income	Excluded b	y section 512, 513, or 514	
•	rogram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
	lone	N/A	0.	code		(see the instructions)
_	lone -	11,71	<u> </u>	 		
			-			
f						
g F	ees and contracts from government agencies					
2 N	lembership dues and assessments					
3 Ir	terest on savings and temporary cash investments					
4 D	ividends and interest from securities					
5 N	et rental income or (loss) from real estate		<u> </u>			
	ebt-financed property					
	ot debt-financed property	ļ.				
	et rental income or (loss) from personal property					
	ther investment income					
	ain or (loss) from sales of assets other than inventory				<u> </u>	
	et income or (loss) from special events			<u> </u>		
10 G	ross profit or (loss) from sales of inventory					
11 C	ther revenue		······································			
a _						
b						
d_						
		l .		L I		
е_					· ····	
12 S	ubtotal Add columns (b), (d), and (e)		0.			
12 S	otal. Add line 12, columns (b), (d), and (e)		0.		13	0.
12 S 13 T (See w	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca					0.
12 S 13 T (See w	otal. Add line 12, columns (b), (d), and (e)			t Purpos		0.
12 S 13 T (See w	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	
12 S 13 T (See w Part)	otal. Add line 12, columns (b), (d), and (e) orksheet in the instructions for line 13 to verify ca	Accomplish	nment of Exemp		ses	

			E. Oliph							552673		age 1 3
ar	t XVII	Information Re	egarding Tr iizations	ransters	To and	Transaction	ons an	d Relations	hips With No	ncharitable	;	
1	Did th	e organization directly	or indirectly e	ngage in a	ny of the f	ollowing with	any oth	er organization			Yes	No
	descri relatir	ibed in section 501(c) o ng to political organizati	of the Code (ot Jons?	her than s	ection 501	(c)(3) organı	zations)	or in section 5	27,			
а		fers from the reporting	foundation to	a nonchar	ıtable exen	npt organizat	ion of			4 - 49		
	(1) C	ther assets								1 a (1) 1 a (2)		X
Ŀ		transactions [,]								(2)		
	(1) S	ales of assets to a none	charitable exe	mpt organ	ızatıon					1 b (1)		х
	• •	urchases of assets from		•	ot organiza	tion				1 b (2)		X
	• •	ental of facilities, equip eimbursement arranger	•	r assets						1 b (3) 1 b (4)		X
	• •	oans or loan guarantees								1 b (5)		X
	(6) P	erformance of services	or membershi	ıp or fundr	aising solid	citations				1 b (6)		Х
c	Sharıı	ng of facilities, equipme	ent, mailing lis	ts, other a	ssets, or p	aid employe	es			1c		Х
c	the ac	answer to any of the ab oods, other assets, or stansaction or sharing ar	ervices aiven l	by the rep	ortına foun	dation. If the	foundat	ion received le	ss than fair mark	et value in	of	
(a) l	ine no	(b) Amount involved	T		ible exempt o		T		insfers, transactions,		ngement	:s
_		'				· · · · · ·	ļ					
								 				
									-			
		-			-							
												
												
		-										
				-								
	··				_							
	descr	foundation directly or in the section 501(c) or section 501(c) or s,' complete the following	of the Code (ot	ated with, other than s	or related t ection 501	to, one or mo (c)(3)) or in t	re tax-e section 5	xempt organiza 327?	ations	Yes	X	No
		(a) Name of organizati	on		b) Type of	organization			(c) Description of	relationship		
										<u> </u>		
					•							
								_				
Ūr	nder pena	alties of perjury. I declare that	I have examined the	his return, inc	luding accomi	panving schedule	s and state	ements, and to the	best of my knowledge	and belief it is tri	e corre	ct. and
co	mplete (Declaration of preparer (other t	than taxpayer or fi	duciary) is ba	sed on all info	ormátion of which	preparer l	nas any knowledge			,	
. ▶	•	/	7	<u>م ۱</u>			2	1/13/10	► Trustee	•		
	Signa	ature of officer or trustee	lugt.	Chal	eat		Date	· <u>, · · · · · · · · · · · · · · · · · · </u>	Title	·		
:[Preparer's	0-0	C/	_ (/		Date)	Check if	Preparer's Identify (See Signature in	ing num	iber
	aid re-	signature V	1 charl	$\sqrt{\alpha}$	wz v		03	/02/10	self- employed ► X			-,
- p	arer's	vours if self.	e & Heckr		.c.				EIN +43	-177 132	4	
	Jse yours if self- employed), address, and address, and								-l	016) 505	7.6	

BAA

Firm's name (or yours if self-employed), address, and ZIP code

Lee's Summit

Form 990-PF (2009)

(816) 525-7900

MO 64064