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99.0-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Not

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

OMB No 1545-0052

2009

Fo	r calendar	year 2009, or tax year beg	ginning —————	, ar	nd ending					
G	Check all t	• • • • • • • • • • • • • • • • • • • •	l return nded return	Initial return of a for Address change	·	•	Final re	turn		
U	se the IRS	Name of foundation				A E	mployer identification nu	mber		
_	label.	Seyan Foundation, Inc.					35-1714	714050		
C	Otherwise,	Number and street (or P O box r	number if mail is not de	elivered to street address)	Room/suite	ВТ	elephone number (see pag	e 10 of the instructions)		
	print or type.	Post Office Box 232				<u> </u>				
	e Specific	City or town, state, and ZIP code				C If	exemption application is pe	nding, check here		
ln	structions.	Culver			46511-0232	D 1.	Foreign organizations, che	ck here		
Н	Check type	of organization: X Secti	on 501(c)(3) exe	mpt private foundation	on	2.	Foreign organizations mee	eting the 85% test,		
	Section 49	947(a)(1) nonexempt charit	able trust 🔲 🤇	Other taxable private	foundation] ,	check here and attach cor			
ī	Fair marke	t value of all assets at end	J Accounting	method. X Cash	☐ Accrual		private foundation status water section 507(b)(1)(A), o			
		m Part II. col. (c).	☐ Other (st	pecify)			the foundation is in a 60-m			
	line 16) ►	\$ 58,482	(Part I, column (d) must be on cash basi	s)	ur	nder section 507(b)(1)(B), c	heck here		
Pa	rt I Anal	ysis of Revenue and Exp	enses (The total of	(a) Revenue and				(d) Disbursements		
	amoun	ts ın columns (b), (c), and (d) may ı	not necessarily equal	expenses per	(b) Net investment (b) Net income	ent	(c) Adjusted net income	for charitable purposes		
	the am	ounts in column (a) (see page 11 o	f the instructions))	books	mome		income	(cash basis only)		
	1 Contrib	outions, gifts, grants, etc , received	(attach schedule)	11,330						
	2 Check	If the foundation is not requ	red to attach Sch B							
	3 Intere	st on savings and temporary c	ash investments	702		702				
	4 Divide	ends and interest from securities	es	0		0				
	5 a Gross	rents				0				
a	b Net re	ental income or (loss)	0							
Revenue	6 a Net g	ain or (loss) from sale of asset	s not on line 10	0	<u>. </u>					
Ve.	b Gross	sales price for all assets on line 6a	0							
æ	7 Capita	al gain net income (from Part l'	V, line 2)			0				
⋑	8 Net sl	nort-term capital gain					0			
A U I	9 Incom	e modifications								
>	10 a Gross	sales less returns and allowances	_0							
>	b Less	Cost of goods sold	0	 						
ي		profit or (loss) (attach schedu	le)	0						
))		income (attach schedule)		0		0				
		Add lines 1 through 11		12,032		702	0			
Expenses	13 Comp	ensation of officers, directors,	trustees, etc	0						
ığ.	14 Other	employee salaries and wages								
be	15 Pensi	on plans, employee benefits								
Expenses	16 a Legal	fees (attach schedule) .		235		235		0		
ve v	b Accou	inting fees (attach schedule)		0		0		0		
Administrative	C Other	professional fees (attach sche	edule)	0		0	0	0		
ř	17 Intere		 1					0		
Ë	18 Taxes	(attach schedule) (see page page)		0		0 0				
Έ	19 Depre	ciation (attachtschedule) and	O1	0		0	<u> </u>			
Ad	20 Occup 21 Trave		ŠO .							
ᅙ		Conferences pand meetings								
and		expenses (attach schedule).	IRS IRS	4		0	0	0		
ng		operating and apministrative	a avnenses					_		
ati	1 1	nes 13 through 23		239		235	lo	0		
Operating		ibutions, gifts, grants paid	-	19,633				19,633		
Q	1	expenses and disbursements. Ad	d lines 24 and 25	19,872		235	0	19,633		
_		act line 26 from line 12		19,072		200	† -	19,000		
		s of revenue over expenses and (dichursemente	-7,840						
		s of revenue over expenses and the second of		7,540		467				
		sted net income (if negative, e					0			
		, ,								

990-PF (20¢

_		Attached schedules and amounts in the description column	Beginning of year	End o	of year			
Рa	rt II	Balance Sheets should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
-	1	Cash—non-interest-bearing						
	2	Savings and temporary cash investments	38,986	31,054				
	3	Accounts receivable	55,550	01,001				
	•	Less allowance for doubtful accounts		o				
	4	Pledges receivable 0	-					
	-	Less allowance for doubtful accounts	0		0			
	5	Grants receivable			<u> </u>			
	6	Receivables due from officers, directors, trustees, and other						
	"	disqualified persons (attach schedule) (see page 15 of the						
		instructions)	l ol	o	0			
	7	Other notes and loans receivable (attach schedule)						
S]	Less allowance for doubtful accounts	ا م	·· o	0.			
Assets	8	Inventories for sale or use						
155	9	Prepaid expenses and deferred charges						
٩	١	· · · ·	0	0	0			
	l .	Investments—U.S. and state government obligations (attach schedule)	0	0	0			
	1	o Investments—corporate stock (attach schedule)	0	0				
	l	c Investments—corporate bonds (attach schedule)						
	11	Investments—land, buildings, and equipment basis						
	40	Less accumulated depreciation (attach schedule)	0	0	0			
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)	0	0	0			
	14	Land, buildings, and equipment basis						
		Less accumulated depreciation (attach schedule)	0	0	0			
	15	Other assets (describe NW Life Policy)	48,989	58,482	58,482			
	16	Total assets (to be completed by all filers—see the						
		instructions Also, see page 1, item I) .	87,975	89,536	58,482			
	17	Accounts payable and accrued expenses						
Ś	18	Grants payable			1			
ij	19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons							
Liabilities			0	0				
<u>.</u>	21	Mortgages and other notes payable (attach schedule)	0	0				
_	22	Other liabilities (describe	0	0				
	23	Total liabilities (add lines 17 through 22)	0	0				
		Foundations that follow SFAS 117, check here						
S		and complete lines 24 through 26 and lines 30 and 31.						
nces	24	Unrestricted .			•			
<u>a</u>	25	Temporarily restricted						
ã	26	Permanently restricted			,			
ă		Foundations that do not follow SFAS 117, check here						
Ë		and complete lines 27 through 31.						
or Fund Bala	27	Capital stock, trust principal, or current funds	87,975	89,536	1			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			,			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds						
S 8	30	Total net assets or fund balances (see page 17 of the			,			
ĭ	1	instructions) .	87,975	89,536				
ž	31	Total liabilities and net assets/fund balances (see page 17						
		of the instructions)	87,975	89,536				
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	37,070	30,000				
		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with					
•		of-year figure reported on prior year's return)	· /	1	87,975			
2		amount from Part I, line 27a		2	-7,840			
3		increases not included in line 2 (itemize) Increase in CSV of NV	VMI ife ins policy	3	9,401			
		ines 1, 2, and 3 .		4	89,536			
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b) line 30	6	0 89,536			
J	i Ulai	net assets of fund balances at end of year time 4 finds into 5/-r art if, o	(D), IIIIC JU	1 2 1				

(a) List and describe the	e kind(s) of property sold (e.g., real esta se, or common stock, 200 shs MLC Co	te,	(b) How acquired P—Purchase D—Donation	(c) Date ac	·				
1a			B Bollation						
b									
C									
d									
е									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
a 0	0		0		0				
<u>b</u> 0	0	-	0		0				
<u>c</u> 0	0		0		0				
<u>d</u> 0	0		0	<u> </u>	0				
<u>e</u> 0	0		0		0				
Complete only for assets show	ving gain in column (h) and owned	by the foundati	on on 12/31/69		Gains (Col. (h) gain minus				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any	-	k), but not less than -0-) or Losses (from col (h))				
_a0	0		0		0				
b 0	0		0		0				
<u>c</u> 0	0		0		0				
d 0	0		0 0		0				
e 0	0	 -	0						
2 Capital gain net income or		lso enter in Pa enter -0- in Pa		2	0				
3 Net short-term capital gain	or (loss) as defined in sections			-					
, ,	line 8, column (c) (see pages								
instructions). If (loss), ente			ſ	3	0				
Part V Qualification Und	ler Section 4940(e) for Re	duced Tax o	n Net Investme	ent Incom	le				
Was the foundation liable for the If "Yes," the foundation does not be appropriate amount of the International Int		e) Do not com	plete this part.						
(a)	The state of the s	T T	10 01 110 11101100	10110 001010	(d)				
Base period years Calendar year (or tax year beginning i	(b) Adjusted qualifying distribution	s Net value	(c) of nonchantable-use as	ssets	Distribution ratio (col (b) divided by col (c))				
2008	14	,561	81	,605	0 178433				
2007	7	,300	21	,920	0 333029				
2006		,300		,073	0 110484				
2005		,900		,073	0 043891				
2004		,307	57	,024	0.057993				
2 Total of line 1, column (d)				2	0 723830				
	or the 5-year base period—div undation has been in existence			3_	0 144766				
4 Enter the net value of nonc	haritable-use assets for 2009	from Part X, III	ne 5	4	29,057				
5 Multiply line 4 by line 3 .				5	4,206				
6 Enter 1% of net investment	t income (1% of Part I, line 27t	o)		. 6	5				
7 Add lines 5 and 6				7	4,211				
8 Enter qualifying distribution	se from Part XII line 4			. 8	19,633				
	er than line 7, check the box ir	n Part VI, line	b, and complete						

Ρ	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see pa	ge 1	8 of th	e ins	ructi	ions)
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 ☐					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			5	-
	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, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0	
3		3			5	
4		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			5	
6	1 . 1					
	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 0					
	b Exempt foreign organizations—tax withheld at source					
	c Tax paid with application for extension of time to file (Form 8868)					
_	d Backup withholding erroneously withheld			-		j
7		7			0	
8		8			0	
9	· · · · · · · · · · · · · · · · · · ·	9			5	
10		10 11			0	
11		!!!			0	
L C	art 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	
	participate or intervene in any political campaign?			1a		Х
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the					
	instructions for definition)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
	c Did the foundation file Form 1120-POL for this year?			1c		Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$					
	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_		<u> </u>
•	If "Yes," attach a detailed description of the activities					
3				3		- 🗸 :
A	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	
5				5	14//	
J	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
Ŭ	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions					i
	that conflict with the state law remain in the governing instrument?			6	Х	
7		d Pa	nt XV	7	Х	
	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) ► IN					
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation			8b		
9						
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?	•			-	
	If "Yes," complete Part XIV .			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing				-	
	their names and addresses			10	Х	
_						

Part	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	L
	Website address The back are at a Pichard Dugger Tolophore Dugger Tolophore Dugger	770		 -
14	The books are in care of Richard Dugger Located at PO Box 232 Culver IN ZIP+4 46511-0232			
15	Located at PO Box 232 Culver IN 2IP+4 40511-0232 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		•	ر ا
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			!
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	į		,
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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			
b	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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	1	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))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? Yes X No			
	If "Yes," list the years > 20			
b				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	٠.		
_	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
b				1
_	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine		_	
	if the foundation had excess business holdings in 2009)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	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		<u> </u>

		1 (2000) Seyan Foundation, inc								<u> </u>	4030		age u
Pa	rt VI	-B Statements Regarding Activiti	es f	or Which Form	1 47	720 May Be R	equired	(continued)					
ā	Durin	g the year did the foundation pay or incur any	amo	ount to									
	(1)	Carry on propaganda, or otherwise attempt to	o infli	uence legislation (s	sect	ion 4945(e))?		Yes	X	No			
	(2)	Influence the outcome of any specific public	elect	ion (see section 49	955)	, or to carry						l	
	` '	on, directly or indirectly, any voter registration	n driv	re?				Yes	\square	No		ŀ	
	(2)	Drawdo a great to an industrial for traval atua	d., a	r ather amuler auer		202		\equiv				Ì	
		Provide a grant to an individual for travel, stu	-					Yes	\Box	No			
	(4)	Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 49-						Yes	X	No			
	(5)	Provide for any purpose other than religious, educational purposes, or for the prevention of						Yes	X	No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the except				nder the exceptio	ns descri	bed in						
	Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22										5b	N/A	
	-	nizations relying on a current notice regarding						•	. [
С		answer is "Yes" to question 5a(4), does the fi											
	tax b	ecause it maintained expenditure responsibilit	y for	for the grant?				Yes		No		İ	,
		es," attach the statement required by Regulation											
à		ne foundation, during the year, receive any fur	nds,	directly or indirectly	y, to	pay							
	prem	emiums on a personal benefit contract?				Yes		No					
b	Did tl	ne foundation, during the year, pay premiums,	dıre,	ctly or indirectly, or	na	personal benefit o	contract?				6b		Х
	If "Ye	s" to 6b, file Form 8870											
'a	At an	y time during the tax year, was the foundation	apa	irty to a prohibited	tax	shelter transaction	n?	Yes		No			
		, did the foundation receive any proceeds or h						٠٠٠ بـــا	ш		7b		X
								ore Highly	Dais	1 Em			^
	art V	·	ווט	ectors, muste	C 5,	Foundation	wanay	ers, migniy	rait	3 EIII	pioye	:es,	
4	1:-4	and Contractors	-4:		46		ion (oos				-4:	-1	
1	LIST	all officers, directors, trustees, found		Title, and average) Compensation		Contributions to	ine i	nstru	Cuon	s)	
		(a) Name and address	' '	hours per week		not paid, enter -0-)	emplo	erred compensate			Expens ther allo		
Ric	nard	Dugger	Pre	3									
PO	Box :	232 Culver IN 46511		2 00		o			ol				0
							•						
				00		o			ol				0
				00		ol			ol				0
				00		ام			ام				0
2		pensation of five highest-paid employ	/ees		se	included on li	ne 1—se	ee page 23 o	f the	inst	ructio	ns).	
	-			(b) Title and over-	<u></u>		1 (d) Contributions to	0		_		
(a)	Name	and address of each employee paid more than \$50,0	000	(b) Title, and average hours per week devoted to position	_]	(c) Compensation		employee benefit plans and deferred compensation			Expens ther allo		
no/	ne				T								
101	<u>'``</u>				_			·					
		-		-	\dashv		-+						
					_		\perp						
	- 1	mber of other employees paid over \$50 (200								_	1	

2

All other program-related investments. See page 24 of the instructions

Total. Add lines 1 through 3

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign the second state of the instructions.)	in toundation	15,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	- 4-	
a	Average monthly fair market value of securities	1a	29,500
b	Average of monthly cash balances	1b	29,500
C	Fair market value of all other assets (see page 24 of the instructions)	1c	00.500
d	Total (add lines 1a, b, and c)	1d	29,500
е	Reduction claimed for blockage or other factors reported on lines 1a and		
^	1c (attach detailed explanation)	\dashv \downarrow	
2	Acquisition indebtedness applicable to line 1 assets	2	20.500
3	Subtract line 2 from line 1d	3	29,500
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		440
_	of the instructions)	4	443
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	29,057
6	Minimum investment return. Enter 5% of line 5	6	1,453
Pai	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private		
	foundations and certain foreign organizations check here L and do not complete this part		
1	Minimum investment return from Part X, line 6	_ 1	1,453
2a	Tax on investment income for 2009 from Part VI, line 5	5	
b	Income tax for 2009 (This does not include the tax from Part VI)	<u> </u>	_
С	Add lines 2a and 2b	2c	5
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,448
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,448
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,448
Par	t XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	19,633
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	19,633
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 page 26 of the instructions)	5	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	19,628
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	ــــــــــــــــــــــــــــــــــــــ	,520
	qualifies for the section 4940(e) reduction of tax in those years	-andution	

Form 9	990-PF (2009) Seyan Founda	ition, Inc			35-1	714050	Page 9
· Part	XIII Undistributed Incom	ne (see page 26 of the	instructions)				
1	. Distributable amount for 2009 fro	om Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d 200	
•	line 7	<u> </u>					1,448
2	Undistributed income, if any, as	of the end of 2009					
а	Enter amount for 2008 only				0		
	Total for prior years 20,			0			
3	Excess distributions carryover, i	f any, to 2009					
	From 2004						
b	From 2005	<u> </u>					
C	From 2006 .	6,442					
d	From 2007 From 2008	10,495					
e f	Total of lines 3a through e	10,433	16,937				
4	Qualifying distributions for 2009	from Part	10,007				
•	XII, line 4 > \$	19,633					
а	Applied to 2008, but not more th			-	o		
	Applied to undistributed income						
	(Election required—see page 26			0			
С	Treated as distributions out of co			* * "			
	required—see page 26 of the ins	structions)	0				
d	Applied to 2009 distributable am	ount					1,448
е	Remaining amount distributed o	ut of corpus	18,185				
5	Excess distributions carryover a	pplied to 2009	0				0
	(If an amount appears in column same amount must be shown in						
6	Enter the net total of each coll indicated below:	umn as					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	35,122				
	Prior years' undistributed income						
	line 4b from line 2b			0		·	
С	Enter the amount of prior years'	undistributed					
	income for which a notice of def	iciency has					
	been issued, or on which the se	ction 4942(a)					
	tax has been previously assesse	ed					
d							
	amount—see page 27 of the ins			0			
е	Undistributed income for 2008						
	4a from line 2a Taxable amoun	t—see page 27 of the					
_	instructions	<i> </i>			0		
f	Undistributed income for 2009						
	lines 4d and 5 from line 1. This a	amount must					C
7	be distributed in 2010 Amounts treated as distributions	cout of					
•	corpus to satisfy requirements in						
	section 170(b)(1)(F) or 4942(g)(
	the instructions)	5) (See page 27 of		ı			
8	Excess distributions carryover fi	rom 2004					
•	not applied on line 5 or line 7 (se						
	instructions)		0				
9	Excess distributions carryove	er to 2010.					
=	Subtract lines 7 and 8 from line	i	35,122				
10	Analysis of line 9						
а	Excess from 2005	0					
b	Excess from 2006	0					
С	Excess from 2007	6,442					
d	Excess from 2008 .	10,495					
۰	Excess from 2009	18,185					

Form	990-PF (2009) Seyan Foundation, Inc				35-1714	
Pai	t XIV Private Operating Foundations (s	ee page 27 of th	ne instructions a	nd Part VII-A, qu	iestion 9)	N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2009, entitled			•		
b	Check box to indicate whether the foundation is a	private operating fou	indation described i	n section	4942(j)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed .	0	0	0	0	0
b	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed	0	0	0	0	0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					
u	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0	0	0	0	0
c	"Support" alternative test—enter				0	
-	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income		·			0
1	rt XV Supplementary Information (Cor assets at any time during the year Information Regarding Foundation Manag List any managers of the foundation who have con	ar—see page 20 ers: tributed more than 2	B of the instruc	tions.)		
	before the close of any tax year (but only if they ha	ive contributed more	than \$5,000) (See	section 507(d)(2))		
Ricl b	hard P Dugger List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
2	Information Regarding Contribution, Gran Check here ► X if the foundation only makes unsolicited requests for funds. If the foundation maunder other conditions, complete items 2a, b, c, and	contributions to presides gifts, grants, etc ad d	selected charitable of see page 28 of the	organizations and do ne instructions) to ind		ions
а	The name, address, and telephone number of the	person to whom app	lications should be	addressed		
b	The form in which applications should be submitted	d and information an	d materials they sh	ould include		
c	Any submission deadlines					
d	Any restrictions or limitations on awards, such as t	by geographical area	ıs, charıtable fields,	kınds of institutions,	or other	

Form **990-PF** (2009)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Y		r Future Pa	yment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year	or substantial contributor			
ECHO			religous	5,500
17391 Durrance Rd N Fort Myers FL 33917				
Culver Boys & Girls Club PO Box 44 Culver IN 46511			Educational	500
Africa University Development Office			Educational	5,933
PO Box 340007 Nashville TN 37203				
Shiloh Wesleyan Church 10532 4B Road Plymouth IN 46563			Religous	1,000
Wesley United Methodist Church			Religous	2,200
511 School St Culver IN 46511			Charitable	4 000
Lake Max Film Festival, Inc 612 E Shore Dr Culver IN 46511			Chantable	1,000
Compatible Technology International			Educational	1,000
800 Transfer Road St Paul MN 55114 New Missions Systems Internaltional			Religoous	1,000
PO Box 547 Ft Myers FL 33902			Religious	1,000
Culver Academy		•	Educational	1,000
1300 Academy Road Culver IN 46511 Friend of the World Mission			Religous	500
5101 N Francisco Av Chicago IL 60625			l teligous	300
·				
			į	
			,	
		<u> </u>		40.000
Total	, 	····	▶ 3a	19,633
2 Approved for factors payment		:		
i			1	

Part XV	I-A Analysis of Income-Producing Acti	vities						
Enter are	oss amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section 512, 513, or 514 (e)				
	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)		
_			0		0	 		
. —		·	0	<u> </u>	0	 		
° –			0		0	 		
			0		0			
e —			0		0			
f —		-	0		0	 		
· · —	es and contracts from government agencies		•		<u>_</u>	<u>-</u>		
-	pership dues and assessments							
	st on savings and temporary cash investments			01	702			
	ends and interest from securities				702			
	ental income or (loss) from real estate					_		
	ebt-financed property							
	ot debt-financed property	· · ·		——————————————————————————————————————				
			,					
	ental income or (loss) from personal property		··· — ·- ·			-		
	investment income				0	-		
	or (loss) from sales of assets other than inventory					+		
	come or (loss) from special events					 		
	profit or (loss) from sales of inventory							
	revenue a		0		0	 		
			0		0	+		
_			0		0	 		
d		·	0		0	 		
e	1-1 Add ashreas (b) (d) and (a)		0		702			
	tal Add columns (b), (d), and (e)				13	702		
	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calc	ulations)			13	102		
			of Everent D					
	Relationship of Activities to the Ac Explain below how each activity for which income				4. 41. 1			
Line No. ▼	the accomplishment of the foundation's exempt page 28 of the instructions)							
3	CAsh held for distributions							
						<u>,</u>		
					 			
								
	2.2							
								
					<u>-</u>			
				·				
				_		<u> </u>		

Fori	m 990-PF	⁽²⁰⁰⁹⁾ Seyan Foun	dation, Inc				35-1714	050	Pag	e 13
Pa	rt XVII		arding Trans	fers To and Transac	tions and	Relationships Wit	h Noncharit	able		
1	Did the			gage in any of the follow	wing with an	v other organization of	described	Т	Yes	No
•		•	•	ection 501(c)(3) organiza	-					
		zations?	`	(/ ()	,	, ,				ĺ
а	_		foundation to a	noncharitable exempt	organization	n of				
a	(1) Ca		iodildation to t	monoriamable exempt	organization	101		1a(1)	-	Х
		her assets .			·			1a(2)		X
b		ransactions			• •		•	14(2)		
	(1) Sa	les of assets to a non	charitable exer	npt organization .				1b(1)		X
				ole exempt organization	٠.	•		1b(2)		Х
		ntal of facilities, equip				•		1b(3)		Х
	(4) Re	imbursement arrange	ments	•				1b(4)		Х
	(5) Lo	ans or loan guarantee	s				•	1b(5)		Х
				p or fundraising solicitat				1b(6)		Х
С	Sharin	g of facilities, equipme	ent, mailing list	s, other assets, or paid	employees			1c		Х
d	value o	of the goods, other as:	sets, or service	complete the following s s given by the reporting ment, show in column (foundation	If the foundation rece	eived less tha	n fair m	narket	: L
(a)	Line no	(b) Amount involved	(c) Name of	nonchantable exempt organiza	ation (d)	Description of transfers, tra	insactions, and sh	naring arr	angem	ents
		.0								
		0								
		0								
		0								
		0				·				
		0								
		0								
		0		······						
		<u>0</u>								
		0								
		0								
		0								
		0			ì					
		0				 				
		0								
	describ	oundation directly or i bed in section 501(c) on " complete the following."	of the Code (otl	ed with, or related to, or ner than section 501(c)(ne or more t 3)) or in sec	ax-exempt organizate tion 527?		Yes 🗌	No	
		(a) Name of organization		(b) Type of organi	zation	(c) Descri	ption of relations	nip		
				ined this return, including acco preparer (other than taxpayer			•	-		

Date

315 W Jefferson Street, Plymouth, IN 46563-0122

6/14/2010

Sign Here

Paid Preparer's Use Only

Signature of officer or trustee

Preparer's signature

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

Roy Michael Roush

June 20,2010

Check if

self-employed ►X

Preparer's identifying

Phone no (574) 936-6217

EIN ▶

number (see Signature on

page 30 of the instructions)

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization Seyan Foundation, Inc. 35-1714050 Organization type (check one). Filers of: Section:) (enter number) organization Form 990 or 990-EZ 501(c)(4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

age	_1_	of _	1_	of Part	١

Employer identification number Name of organization Seyan Foundation, Inc. 35-1714050 Part I Contributors (see instructions) (c) (d) (a) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person __1__ Richard Dugger Payroll 7,270 Noncash (Complete Part II if there is a noncash contribution) Foreign State or Province Foreign Country (b) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. __2 Person Payroll Noncash (Complete Part II if there is a noncash contribution) Foreign State or Province Foreign Country (d) (b) (c) (a) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person __3__ Payroll Noncash (Complete Part II if there is Foreign State or Province a noncash contribution) Foreign Country (d) (b) (c) (a) Aggregate contributions Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) Foreign State or Province Foreign Country (b) (c) (d) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. __5__ Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) Foreign State or Province Foreign Country (b) (c) (d) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Person 6 Payroll Noncash (Complete Part II if there is a noncash contribution.) Foreign State or Province Foreign Country

Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)			Page 1 of 1 of Part I			
	organization			Employer identification number			
Part III	Exclusively religious, charitable, etc., i aggregating more than \$1,000 for the y For organizations completing Part III, enter	ear. Complete cer the total of exc	olumns (a) through (e) a clusively religious, charit	nd the following line entry able, etc,			
(a) No. from	contributions of \$1,000 or less for the year (b) Purpose of gift	T	ormation once See instr	uctions) ► \$ (d) Description of how gift is held			
Part I	Religous	Religous					
1							
		(e) T	ransfer of gift				
	Transferee's name, address, and	I ZIP + 4		hip of transferor to transferee			
	ECHO & Africa Univ		NONE				
	For Prov Country						
(a) No. from <u>Part</u> I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Transferee's name, address, and	1 ZIP + 4	Relationsi	nip of transferor to transferee			
(a) No.	For Prov Country	Т					
from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationsl	nip of transferor to transferee			
(a) No.	For Prov Country	T					
from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held			
		(e) T	ransfer of gift	· · · · · · · · · · · · · · · · · · ·			
	Transferee's name, address, and	ZIP + 4	Relations	hip of transferor to transferee			

For Prov.

Country

Line 16a (990-PF) - Legal Fees

Line 23 (990-PF) - Other Expenses

		4	0	0	0
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
-	Amortization See attached statement	0	0	0	0
2	Fund Raising				3
က	Tax penalty				
4	Bank Charges	4			
2					
9					
7					
8					
6					
9					

Seyan Foundation, Inc

Part II, Line 15 (990-PF) - Other Assets

		48,989	58,48	58,482
		Beginning	Ending	Fair Market
	Description	Balance	Balance	Value
1	NW Life Policy	48,989	58,482	58,482
2				
3				
4				
5				
6				
7				
8				
9				
10				

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Code -	tate Zip Code	Ity State Zip Code		
1.7			-	(10)
	465,		Culver	PO Box 232 Culver

١	ļ	•

	0	0	0	
			Expense	
	Compensation	Benefits	Account	Explanation
-				
2				
က				
4				
2				
9				
7				
8				
6				
7				

Part XVI-B (990-PF) - Relationship of Activities

Line	Evalenction
Number	· Explanation
3	CAsh held for distributions
-	
-	
l	

Attachment to Form 990-PF

2009

<u>EIN</u>: **35-1714050**

Name of Organization:
Seyan Foundation, Inc.

Part I, Line 1. Schedule of Donors.

<u>Name</u>	Address	<u>Amount</u>
Robert Dugger	Manson, Iowa 50563	\$ 110.00
Richard Dugger	PO Box 232, Culver, Indiana 46511	7,270.00
John Huie	23 Flourmound Drive, West Lafayette, IN 47906	2,100.00
Gary Schaffer	19405 19th Road, Plymouth, Indiana 46563	1,150.00
Northern Indiana Uni	ted Methodist Fdn.	
	1001 North Western Avenue, Suite D	
	Marion, Indiana 46952	200.00
Wesley United Methodist Men's Group		
	511 School Street, culver, IN 46511	500.00
	Total Contributions	<u>\$11,330.00</u> .

Date:

Seyan Foundation	To: The Culver Citizen	
Marshall County, Indiana	Culver, Indiana	
	PUBLISHER'S CLAIM	
• •	exceed two actual lines, neither of which shall total more than four solid lines of the type in which the body of the advertisement is set) number of equivalent lines	
Head number of lines Body number of lines Tail number of lines	Total number of lines in notice	
Column Width	Inch Length Total number of column inches	
total column in Additional charges for no Charge for extra proofs of	1 column(s) wide equals 10 equivalent lines at cents per line \$	3.56 7.00
DATA FOR COMPUTING CO Width of single column in Size of type	DST	
•	ions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is ount claimed is legally due, after allowing all just credits, and that no part of the same	
I also certify that the p which was duly published in	rinted matter attached hereto is a true copy, of the same column width and type size, said paper	
1/14/2010		
ne Seyan Foundation are avail- ble upon request for the period f Jan. 2009 - Dec. 2009 If inter- sted, please include a self-ad- ressed, stamped envelope and end request to Seyan Founda- on, PO Box 232, Culver, IN ha	the checked below is true and correct: Does not have a Web site. Does not have a Web site and this public notice was posted on the same day as it was in the newspaper. Does not have a Web site and this public notice was posted on the newspaper. Does not have a Web site and this public notice was posted on the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was in the newspaper. Does not have a Web site was posted on the same day as it was it was it was it was it was an experience was posted on the same day as it was it was it was a way as it was it was it was it was a way as it was it	

2010

Jan. 14

Title_

General Manager

Form 8868

(Rev. April 2009) Separtment of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part I unless you have already been granted an automatic 3-month extension. 	art II (on page 2 of th		► X 368
Part I Automatic 3-Month Extension of Time. Only submit original (no copies	needed).		
A corporation required to file Form 990-T and requesting an automatic 6-month extension—ch	eck this box and coi	nplete	▶ 🗌
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Follower to file income tax returns.	rm 7004 to request a	an extension (of
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-mor of the returns noted below (6 months for a corporation required to file Form 990-T). However, yelectronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Foreturns, or a composite or consolidated Form 990-T. Instead, you must submit the fully comple Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click	you cannot file Form orms 990-BL, 6069, c eted and signed page	8868 or 8870, group e 2 (Part II) of	p f
Type or Name of Exempt Organization print Seyan Foundation, Inc	Employer ider 35-1714050	ntification num	nber
File by the Number, street, and room or suite no. If a P O box, see instructions	100-11 14000		
due date for Post Office Box 232			
City, town or post office, state, and ZIP code. For a foreign address, see instructions. Culver	IN	46511-0232	
Check type of return to be filed (file a separate application for each return):			
Form 990 Form 990-T (corporation)		Form 47	20
Form 990-BL Form 990-T (sec 401(a) or 408(a) trust)		Form 52	27
Form 990-EZ Form 990-T (trust other than above)		Form 60	69
X Form 990-PF		Form 88	
[V] LOUIT 990-LL [] LOUIT 1041-V	•	1 01111 00	70
 The books are in the care of	his box EN)	. If this and attac	
I request an automatic 3-month (6 months for a corporation required to file Form 990-T) of until	zation named above		on
2 If this tax year is for less than 12 months, check reason Initial return Final ret		n accounting	period
3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta	ix,		
less any nonrefundable credits. See instructions.	38	ı \$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	d tax		
payments made Include any prior year overpayment allowed as a credit.	3k		
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if req			2
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymer			
System). See instructions	30		0
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form	8453-EO and Form	8879-EO	
for payment instructions.			