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Form **990-PF**

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

OMB No 1545-0052

2009Department of the Treasury
Internal Revenue Service

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 , and ending

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS
label.
Otherwise,
print
or type.
See Specific
Instructions.

Name of foundation

**James W. & Betty Dye
Foundation, Inc.**

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

900 Ridge Road

Room/suite

Ste M

City or town, state, and ZIP code

Munster**IN 46321**

A Employer identification number

35-1884798

B Telephone number (see page 10 of the instructions)

219-836-1100C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2 Foreign organizations meeting the
85% test, check here and attach computation ☐E If private foundation status was terminated under
section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination
under section 507(b)(1)(B), check here ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end
of year (from Part II, col (c),
line 16) **\$ 3,703,751** (Part I, column (d) must be on cash basis)
 J Accounting method ☒ Cash ☐ Accrual
☐ Other (specify)

Part I Analysis of Revenue and Expenses (The

total of amounts in columns (b), (c), and (d) may not necessarily equal
the amounts in column (a) (see page 11 of the instructions))

(a) Revenue and
expenses per
books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

Revenue

- 1 Contributions, gifts, grants, etc., received (attach schedule)
 2 Check ☒ if the foundation is not required to attach Sch B
 3 Interest on savings and temporary cash investments
 4 Dividends and interest from securities
 5a Gross rents
 b Net rental income or (loss)
 6a Net gain or (loss) from sale of assets not on line 10 **Stmt 1**
 b Gross sales price for all assets on line 6a **350,649**
 7 Capital gain net income (from Part IV, line 2)
 8 Net short-term capital gain
 9 Income modifications
 10a Gross sales less returns & allowances
 b Less Cost of goods sold
 c Gross profit or (loss) (attach schedule)
 11 Other income (attach schedule) **Stmt 2**
 12 Total. Add lines 1 through 11

Operating and Administrative Expenses

- 13 Compensation of officers, directors, trustees, etc
 14 Other employee salaries and wages
 15 Pension plans, employee benefits
 16a Legal fees (attach schedule) **See Stmt 3**
 b Accounting fees (attach schedule) **Stmt 4**
 c Other professional fees (attach schedule)
 17 Interest
 18 Taxes (attach schedule) (see page 14 of the instructions) **Stmt 5**
 19 Depreciation (attach schedule) and depletion
 20 Occupancy
 21 Travel, conferences, and meetings
 22 Printing and publications
 23 Other expenses (att sch) **Stmt 6**
 24 Total operating and administrative expenses.
 Add lines 13 through 23
 25 Contributions, gifts, grants paid
 26 Total expenses and disbursements. Add lines 24 and 25

81,134**79,092****-82,544****1,641****0****743****-667****80,733****0****1,000****1,000****1,885****985****900****4,414****2,230****433****4,534****2,267****2,267****1,864****1,864****942****771****13,210****13,210****27,849****5,482****20,445****261,431****261,431****289,280****5,482****0****281,876****-289,947****75,251****0**

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form **990-PF** (2009)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	430,045	349,012	349,012
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7 Other notes and loans receivable (att schedule) ▶ Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	2,000	249	249
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule) See Stmt 7	3,836,566	3,629,403	3,315,169
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
Liabilities	14 Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch) ▶			
	15 Other assets (describe ▶ See Statement 8)	39,321	39,321	39,321
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,307,932	4,017,985	3,703,751
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	4,307,932	4,017,985	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances (see page 17 of the instructions)	4,307,932	4,017,985	
	31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	4,307,932	4,017,985	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,307,932
2 Enter amount from Part I, line 27a	2	-289,947
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	4,017,985
5 Decreases 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	4,017,985

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	Vanguard - Health Care Fund			
b	Vanguard - Equities			
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,283			1,283
b 358			358
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			1,283
b			358
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	1,641
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 </div>	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	253,823	4,714,944	0.053834
2007	332,626	5,970,302	0.055713
2006	197,660	5,218,730	0.037875
2005	183,178	4,101,857	0.044657
2004	177,844	2,952,590	0.060233

2 Total of line 1, column (d)	2	0.252312
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.050462
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	3,287,511
5 Multiply line 4 by line 3	5	165,894
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	753
7 Add lines 5 and 6	7	166,647
8 Enter qualifying distributions from Part XII, line 4	8	281,876

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 Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	753
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	753
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	753
6	Credits/Payments		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	249
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	249
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	13
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	517
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input checked="" type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
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)? 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		X
c Did the foundation file Form 1120-POL for this year?		X
d 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? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a 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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Part 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? Website address ► jimandbettydyescholarships.org	13	X	
14	The books are in care of ► James W. Dye 900 Ridge Road Located at ► Munster, IN	Telephone no ► 219-836-1100 ZIP+4 ► 46321		
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	► 15 ► <input type="checkbox"/>		

Part 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	N/A ► <input type="checkbox"/>	
1b			
c	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?	N/A	
1c			
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))		
a	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? If "Yes," list the years ► 20 , 20 , 20 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	N/A	
2b			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	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 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)	N/A	
3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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?		X
4b			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	N/A		5b
Organizations relying on a current notice regarding disaster assistance check here	▶ <input type="checkbox"/>		
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?	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b
If "Yes" to 6b, file Form 8870			X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A		7b

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 (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
James W. Dye 900 Ridge Rd	Munster IN 46321	Pres/Direct 10.00	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the 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	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000



Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see page 23 of the 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 ▶**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 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions.	
3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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		
a	Average monthly fair market value of securities	1a	3,294,783
b	Average of monthly cash balances	1b	3,471
c	Fair market value of all other assets (see page 24 of the instructions)	1c	39,321
d	Total (add lines 1a, b, and c)	1d	3,337,575
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	3,337,575
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	50,064
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,287,511
6	Minimum investment return. Enter 5% of line 5	6	164,376

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	164,376
2a	Tax on investment income for 2009 from Part VI, line 5	2a	753
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	753
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	163,623
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	163,623
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	163,623

Part XII Qualifying Distributions (see page 25 of the 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	281,876
b	Program-related investments—total from Part IX-B	1b	
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	281,876
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	753
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	281,123

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.

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				163,623
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004	44,520			
b From 2005				
c From 2006				
d From 2007	37,991			
e From 2008	21,578			
f Total of lines 3a through e	104,089			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 281,876				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2009 distributable amount				163,623
e Remaining amount distributed out of corpus	118,253			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	222,342			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
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 page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	44,520			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	177,822			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007	37,991			
d Excess from 2008	21,578			
e Excess from 2009	118,253			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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					
e 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					
(1) 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 foundation had \$5,000 or more in assets at any time during the year—see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

N/A

b The form in which applications should be submitted and information and materials they should include

Application attached

c Any submission deadlines

March 1 of the Year of the grant

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See Statement 9

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Attachment			Scholarships	261,431
Total			► 3a	261,431
b Approved for future payment N/A				
Total			► 3b	

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
				Sale Price	Donation				
2000 shrs Baxter		7/13/99	3/09/09	\$ 100,939	Donation	80,840	\$	\$	20,099
2000 shrs Archer Daniel Mid		11/06/03	3/31/09	54,900	Donation	43,400			11,500
600 shrs BP Amoco		9/03/03	3/31/09	24,390	Purchase	25,874			-1,484
1000 shrs Microsoft		7/18/94	3/31/09	18,520	Purchase	3,141			15,379
1000 shrs Walgreens		12/07/06	3/31/09	26,000	Purchase	43,660			-17,660
1291 shrs Time Warner		5/13/02	3/31/09	24,748	Purchase	22,412			2,336
324 shrs Time Warner Cable		5/13/02	3/31/09	8,036	Purchase	5,625			2,411
3065.6 shrs Allianz NSF Small Cap		5/15/08	3/31/09	52,606	Purchase	100,000			-47,394
390 shrs Blackrock		7/22/07	3/31/09	5,398	Donation	8,241			-2,843
4000 shrs Royal Bank Scotland pref		5/10/05	11/03/09	33,471	Purchase	100,000			-66,529
Total				\$ 349,008	\$	433,193	\$	0	\$ -84,185

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
TECO Class Action Settlement	\$ 743	\$	\$
Total	\$ 743	\$ 0	\$ 0

Federal Statements

Statement 3 - Form 990-PF, Part I, Line 16a - Legal Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Legal Fees	\$ 1,000	\$	\$	\$ 1,000
Total	\$ 1,000	\$ 0	\$ 0	\$ 1,000

Statement 4 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting Fees	\$ 1,885	\$ 985	\$	\$ 900
Total	\$ 1,885	\$ 985	\$ 0	\$ 900

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Federal Income Tax	\$ 1,751	\$	\$	\$
Foreign Tax	1,800	1,800		433
Real Estate Tax	863	430		
Total	\$ 4,414	\$ 2,230	\$ 0	\$ 433

Federal Statements

Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses	\$	\$	\$	\$
Filing Fee & Legal Notice	810			810
Charitable Contribution	8,100			8,100
Student Gifts	600			600
Scholarship Dinner	3,067			3,067
Website	126			126
Office Expense	468			468
Miscellaneous	39			39
Total	\$ 13,210	\$ 0	\$ 0	\$ 13,210

Federal Statements

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
Vanguard: Health Care	\$ 300,000	\$ 300,000	Cost	\$ 286,826
Vanguard: 500 Index Fund Admiral	283,837	283,837	Cost	293,599
Vanguard: Mid-Cap Fund Admiral	128,196	128,196	Cost	205,441
Vanguard Equities	3,124,533	2,917,370	Cost	2,529,303
Total	<u>\$ 3,836,566</u>	<u>\$ 3,629,403</u>		<u>\$ 3,315,169</u>

Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description	Beginning of Year	End of Year	Fair Market Value
Investment - Real Estate	\$ 39,321	\$ 39,321	\$ 39,321
Total	<u>\$ 39,321</u>	<u>\$ 39,321</u>	<u>\$ 39,321</u>

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

Application attached

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

March 1 of the Year of the grant

Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

Initial Eligibility: Applicant must be an enrolled senior at one of the following High Schools - Griffith, Hammond High, Highland, Munster, Lake Central, Whiting, East Chicago Central, Lowell, Crown Point, Bishop Noll, Calumet, Clark, Gavit, Morton, North Newton, or Hanover Central and satisfy the following criteria:

- 1) Must have a composite SAT score of 1650 or better.
- 2) Must have a GPA of 3.25 or better.
- 3) Must be admitted unconditionally as a full-time student to Indiana University Bloomington, Purdue University-West Lafayette, IUPUI, Ball State University, Indiana University Northwest or Purdue University Calumet.

Scholarship Renewals: Scholarships are renewable on a semester-to-semester basis for a maximum of eight consecutive undergraduate semesters. Recipients must maintain a 2.75 cumulative GPA on a 4.0 system and successfully complete an average of fifteen credit hours per semester to maintain eligibility for their Scholarship.

Purdue Univ - Calumet <u>Recipient Name</u>	Spring <u>2009</u>	Fall <u>2009</u>	<u>Totals</u>
Avgerinos, Christina	-	3,000 00	3,000 00
Colgrove, Allison	2,772 70	1,000 00	3,772 70
Curtis, Samantha	3,000 00	2,500 00	5,500 00
Ricciardi, Brittany	3,000 00	-	3,000 00
Stinnett, Amanda	-	2,000 00	2,000 00
Turpin, Kelly	1,063 30	1,107 00	2,170 30
Vuckovich, Jennifer	3,000 00	3,000 00	6,000 00
	<u>12,836 00</u>	<u>12,607 00</u>	<u>25,443 00</u>

Indiana Univ - Bloomington <u>Recipient Name</u>	Spring <u>2009</u>	Fall <u>2009</u>	<u>Totals</u>
Bembenistra, Julie Ann	1,500 00	1,500 00	3,000.00
Bobowski, James Edward	1,500 00	1,500 00	3,000 00
Bubala, Kellie	-	500 00	500 00
Cioffi, Meredith	-	1,689 40	1,689.40
Conger, Lindsey	-	2,000 00	2,000.00
Dohman, Stephanie	1,500 00	-	1,500.00
Fisher, Jonathon Marc	1,500 00	-	1,500.00
Haddad, Mora	1,877.00	1,802 00	3,679.00
Hamang, Matthew	119 00	-	119.00
Johnston, Caitlin Leigh	1,500 00	1,500.00	3,000.00
Jung, Corinne	-	2,000 00	2,000.00
Kennelly, Therese	2,000 00	2,000 00	4,000 00
Krause, Holly	500.00	500 00	1,000 00
Kretz, Theresa	1,500 00	1,500 00	3,000 00
Largent, Kevin Daniel	3,000 00	-	3,000 00
Laszlo, Katelyn	1,500 00	-	1,500 00
Lilly, Kathryn	1,000 00	1,000 00	2,000 00
McAvoy, Cayla	-	2,000 00	2,000 00
Morton, Taylor Renee	3,000 00	-	3,000 00
Palko, Meredith Ann	2,000 00	-	2,000 00
Parker, Amanda Rae	500 00	500 00	1,000 00
Rutkowski, Laurie	-	3,000 00	3,000 00
Smailis, Donna Marie	2,290.00	2,604 00	4,894 00
Styx, Joshua	2,000 00	2,000 00	4,000 00
Weiss, Lindsay Ellen	3,000.00	2,437 00	5,437 00
Wright, William Oliver	1,500 00	1,500 00	3,000 00
	<u>33,286.00</u>	<u>31,532 40</u>	<u>64,818.40</u>

Ball State Univeristy-Muncie <u>Recipient Name</u>	Spring <u>2009</u>	Fall <u>2009</u>	<u>Totals</u>
Durant Adelle	1,250 00	1,182 00	2,432 00
Lee, Abigail	1,250 00	682 00	1,932 00
Stevens, Holly	-	1,182 00	1,182 00
Unhoch, Laura	3,000 00	-	3,000 00
	<u>5,500 00</u>	<u>3,046 00</u>	<u>8,546 00</u>
Indiana University-Purdue Indianapolis <u>Recipient Name</u>	Spring <u>2009</u>	Fall <u>2009</u>	<u>Totals</u>
Boyan, Ashley	3,000 00	3,000 00	6,000 00
Conroy, Paige	-	1,500 00	1,500 00
Croft, Brittany	2,000 00	2,000 00	4,000 00
	<u>5,000 00</u>	<u>6,500 00</u>	<u>11,500 00</u>
Grand Total	<u>\$131,961 00</u>	<u>\$129,470 20</u>	<u>\$261,431.20</u>

James & Betty Dye Foundation EIN # 35-1884798

Grants and Contributions Paid During 2009

Purdue Univ - Lafayette <u>Recipient Name</u>	<u>Spring 2009</u>	<u>Fall 2009</u>	<u>Totals</u>
Bajzatt, Katherine	-	500 00	500 00
Cherven, Mary	1,625 00	3,000 00	4,625 00
Couwenhoven, Allison	2,500 00	-	2,500 00
Cox, Louis	2,000 00	1,750 00	3,750 00
Curosh, Zachary	1,625 00	-	1,625 00
Dermody, Lauren	-	3,000.00	3,000 00
Edwards, Kaitlyn	-	3,000 00	3,000 00
Evanich, Brittany	3,000 00	3,000 00	6,000 00
Foust, Matthew	3,000 00	3,000 00	6,000 00
Gaspar, Jaymee	3,000 00	3,000 00	6,000 00
Gauthier, Allyson	-	1,875 00	1,875 00
Gauthier, Andrew	1,089 00	3,000 00	4,089 00
Hillbrich, William	3,000 00	3,000 00	6,000 00
Hlavaty, Nicholas	3,000 00	3,000 00	6,000 00
Huebner, Hannah	-	1,284 00	1,284 00
Huseman, Holly	500.00	500 00	1,000 00
Jelski, Brian	3,000 00	3,000 00	6,000 00
Johnson, Sarah	500 00	500 00	1,000 00
Kacius, Kyle	500 00	500 00	1,000 00
Lehmann, Nathan	3,000.00	3,000 00	6,000 00
Long, Joshua	3,000 00	3,000 00	6,000 00
Malek, Kristin	-	2,000 00	2,000 00
Markoski, Klimentina	3,000 00	3,000 00	6,000 00
McCord, Elena	3,000.00	1,875 80	4,875 80
Myers, Claire	-	1,750 00	1,750 00
Newman, Brett	1,500 00	-	1,500 00
Olen, Joe	500 00	500 00	1,000 00
Pieri, Andrew	-	500 00	500 00
Poby, Ashley	2,500 00	3,000 00	5,500 00
Polus, Nicole	500 00	500 00	1,000 00
Quinn, Katherine	3,000 00	-	3,000.00
Romesburg, Eric	3,000 00	3,000 00	6,000 00
Salczynski, Aaron	3,000 00	3,000 00	6,000 00
Shieh, Tina	3,000 00	-	3,000 00
Solan, Jonathan	500 00	-	500 00
Szewciw, Stephanie	2,500 00	1,750 00	4,250 00
Villicana, Sergio	3,000 00	-	3,000 00
Wadas, Kathryn	3,000 00	3,000 00	6,000 00
Webster, Mark	3,000 00	3,000 00	6,000 00
Wiers, Kimberly	3,000 00	3,000 00	6,000 00
Wojcik, Amanda	3,000 00	3,000 00	6,000 00
	<u>75,339 00</u>	<u>75,784.80</u>	<u>151,123 80</u>

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

DIRECTIONS FOR COMPLETING THE APPLICATION FORM

The application must be typed. Try to limit responses to the space provided on the form. However, additional paper may be attached to complete a response.

Self-Description

This short essay is an opportunity to describe yourself, your special talents, aspirations, and plans for the future.

Recommendations

Two recommendation forms are to be completed someone who is familiar with your school work, activities, achievements and goals (ie. teacher, employer, etc.)

University Admission

A letter of admission from one of the following Universities **must** be attached to the application: Indiana University Bloomington, Indiana University Northwest, Purdue University West Lafayette, Purdue University Calumet, Indiana University Purdue University Indianapolis (IUPUI) or Ball State University Muncie.

University Enrollment

All scholarship recipients are required to be enrolled as a full-time student and maintain an average of fifteen (15) credit hours per semester for a maximum of eight (8) consecutive undergraduate semesters.

Scholarship Award

The Scholarship award is *up to three thousand dollars (\$3,000.00) per semester for tuition only* and the University will bill the Foundation directly. Other fees such as room and board, books, transportation, parking, health and activity fees are to be paid by the student. If you receive other scholarships, awards or grants that *can* be applied toward tuition (excluding Pell Grants and one-time awards totalling \$1,000.00 or less), the Jim and Betty Dye Scholarship will pay the semester tuition up to \$3,000.00, less the amount of the other scholarships received. Failure to inform the Foundation of receipt of another scholarship, award or grant will terminate your Jim and Betty Dye Scholarship.

Scholarship Renewal

Scholarships are renewable on a semester-to-semester basis for a maximum of eight (8) consecutive undergraduate semesters. Recipients must maintain a 2.75 cumulative GPA on a 4.0 system and successfully complete an average of fifteen (15) credit hours per semester to maintain eligibility for their Scholarship. For degree specific scholarships of Nursing, Teaching and Entrepreneurship, recipients must successfully fulfill the required course curriculum.

Application Deadline

The application, high school certification and transcript, college acceptance and letters of recommendation must be submitted to the Guidance Office by March 1st. Incomplete applications may be rejected.

JIM AND BETTY DYE SCHOLARSHIP HIGH SCHOOL CERTIFICATION

[illegible]

Signature of Principal/Counselor _____ Date _____

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

APPLICATION FOR THE JIM AND BETTY DYE SCHOLARSHIP

1 Name _____
Last First Middle

2 Home Address _____

Home Address _____

3 Phone _____

4 Name of Parent or Guardian _____

5 Birth date _____ 6. Social Security # _____

7 High School _____

8 Are you applying for a degree specific scholarship? If yes, check one:

Nursing ☐ Teaching ☐ Entrepreneurship ☐

9 University and Campus Choice _____

10 Alternate _____

12 Probable Major _____

13 Probable Career _____

14 Do you feel your high school grades are an accurate indication of your ability? Yes ☐ No ☐
If not, what were the factors that prevented you from doing better?

15 What high school subject have you enjoyed most, and why?

- 16 List high school activities in which you have participated (example: class or student government, band or orchestra, athletics, dramatics, debate, cheerleading, school publications, clubs, etc.). Indicate the high school year of participation as follows: **1**-Freshman, **2**-Sophomore, **3**-Junior, **4**-Senior

Activity	Position Held	Hours per Week	Year

- 17 List out-of-school activities in which you have participated (example: employer, Boy or Girl Scouts, 4-H, church organizations, etc.). Indicate the high school year of participation as follows:
1-Freshman, **2**-Sophomore, **3**-Junior, **4**-Senior

Activity	Position Held	Hours per Week	Year

- 18 Describe any work activities at home or for outside employers:

--

- 19 What do you do for relaxation and recreation?

--

- 20 If you are a recipient of a Jim and Betty Dye Scholarship, how will your scholarship and education benefit Northwest Indiana?

--

- 21 List other scholarships, financial aid, or grants you have received or for which you are applying and the amount of the award. If you receive other scholarships, awards or grants that *can* be applied toward tuition (excluding Pell Grants and one-time awards totalling \$1,000.00 or less), the Jim and Betty Dye Scholarship will pay the semester tuition up to \$3,000.00, less the amount of the other scholarships received. Failure to inform the Foundation of receipt of another scholarship, award or grant will terminate your Jim and Betty Dye Scholarship.

	amount	received
1 _____		
2 _____		
3 _____		
4 _____		
5 _____		

- 22 Self Description: Include any information that will provide a more complete picture of you. Be sure to specify your academic, career, and personal aspirations. If the space provided below is inadequate, please attach an additional sheet.

I certify all statements contained in the Jim and Betty Dye Scholarship Application are true and correct.

Signature of Student _____ Date _____

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

JIM AND BETTY DYE SCHOLARSHIP LETTER OF RECOMMENDATION

Student's name: _____

Name of Reference _____

Signature _____ Phone _____

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

JIM AND BETTY DYE SCHOLARSHIP LETTER OF RECOMMENDATION

Student's name: _____

Name of Reference _____

Signature _____ Phone _____

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

Please allow this letter to serve as authorization for the Office of Financial Assistance to release financial aid and bursar information and for the Office of the Registrar to release transcripts to the James W. and Betty Dye Foundation for the duration of my studies at _____ .
Transcripts are requested upon the completion of each semester. Please bill any fees for transcript requests to the Foundation. Thank you.

Name _____ Student ID or SSAN _____

Signature _____ Date _____

JAMES W. AND BETTY DYE FOUNDATION
900 Ridge Road, Suite M
Munster, Indiana 46321
(219) 836-1100 / (219) 836-6128 fax

I hereby authorize the James W. and Betty Dye Foundation to include my name and / or photograph relating to my Jim and Betty Dye Scholarship in news or publicity information for the media, including, but not limited to newspapers, magazines, radio, television and our website.

Name _____

Signature _____ Date _____