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Form 990-PF

Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0052 2009

For	calenda	ar year 2009, or tax year beginning ,	and ending				
G	Check a	If that apply Initial return Initial re	turn of a former public o	harity		Final return	
		Amended return Add	ress change	Nan	ne change		
	the IR	Name of foundation				oloyer identification num -4645789	ber
	erwise	STORYTEL FOUNDATION		0 of the instructions)			
	print	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite		2-502-9258	
0	type.	12520 SHAMROCK RD			C If exc	emption application is pend	ing, check here
See	Specifi	City or town, state, and ZIP code			D 1 F	oreign organizations, check	here •
Inst	ruction	OTMAN NO	68154		2. F	oreign organizations meetir	ng the
<u>H</u> (Check ty	/pe of organization X Section 501(c)(3) exempt private	foundation		8:	5% test, check here and att	ach computation
Ш	Section	4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		⊣ '	vate foundation status was	
1 F	air mark	set value of all assets at end	X Cash Acc	rual	secti	on 507(b)(1)(A), check here	▶ [
	•	rom Part II, col (c), Uther (specify)				foundation is in a 60-mont	
	e 16) 🕨		pe on cash basis)		unde	r section 507(b)(1)(B), chec	ck here
P	art I	Analysis of Revenue and Expenses (The	(a) Revenue and	(h) Not	nuosimoni	(a) Advisted not	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		nvestment come	(c) Adjusted net income	purposes
		the amounts in column (a) (see page 11 of the instructions))	100 101				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	409,431				
	2	Check ► If the foundation is not required to attach Sch B	10.015		10 015	10 015	
	3	Interest on savings and temporary cash investments	18,815		18,815	18,815	
	4	Dividends and interest from securities Gross rents					
\cong		Net rental income or (loss)					
3	۱ <u>.</u>	Net gain or (loss) from sale of assets not on line 10	10,811				
æ <u>ē</u>	6a b	Gross sales price for all assets on line 6a 131,378	10,811	·			
^{AU} 'ጽ ፭ ሪ ፭ክ ሪ ይነነሀ		Capital gain net income (from Part IV, line 2)			10,811		
⊡	8	Net short-term capital gain			10,011	10,811	
\forall		Income modifications	-				***
2	I	Gross sales less returns & allowances					
SCANNED		Less Cost of goods sold					
		Gross profit or (loss) (attach schedule)				-	
⋖	11	Other income (attach schedule)					
<u>ത</u> _	12	Total. Add lines 1 through 11	439,057		29,626	29,626	
·/^	13	Compensation of officers, directors, trustees, etc	50,000				50,000
penses	14	Other employee salaries and wages					
en	15	Pension plans, employee benefits	3,825				3,825
	16a	Legal fees (attach schedule)					
ш	b	Accounting fees (attach schedule)	_				<u> </u>
Ě	С	Other professional fees (attach schedule)					
and Administrative Ex		Interest					
is		Taxes (attach schedule) (see page 14 of the instructions) STMT 1	7,009				7,009
m:	1	Depreciation (attach schedule) and depletion STMT 2	3,363				
Αď	l	Occupancy	1 005				1 005
ğ	l	Travel, conferences, and meetings	1,885				1,885
		Printing and publications	06.100				76 631
Operating	1	Other expenses (att sch) STMT 3	86,120				76,631
ati	24	Total operating and administrative expenses.	150 000		0		120 250
ber	25	Add lines 13 PR GG B3 V L	152,202		0		139,350
ō	25 26	Contributions, gifts, grants paid 8 Total expenses and disputs entitles. Add thes 24 and 25	152,202		0	0	139,350
		Subtractine 26 from-line 12	132,202				139,330
		Excess of revenue over expenses land disbursements	286,855				
	b	Net investment income (if negative, enter -0-)			29,626		
	ł	Adjusted net income (if negative, enter -0-)			, <u>-</u>	29,626	

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

Form 990-PF (2009)

Part l	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End or	f year
	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cashnon-interest-bearing	340,078	102,114	102,114
2	Savings and temporary cash investments			
3	Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶	}		
	Less allowance for doubtful accounts ▶			
5	Grants receivable			1,67 1,67 2,601,30 30,08 33,08 340,07 286,85 626,93
6	Receivables due from officers, directors, trustees, and other	li li		
-	disqualified persons (attach schedule) (see page 16 of the			
İ	instructions)			
7	Other notes and loans receivable (att schedule) > SEE WRK 1,670		1	
1	Less allowance for doubtful accounts ▶		1,670	1,670
S 8	Inventones for sale or use			
Assets 9 10a	Prepaid expenses and deferred charges			
4 10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)			
C	Investments—corporate bonds (attach schedule) SEE STMT 4		493,069	601,302
11	Investments—land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch.)			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis			
į .	Less accumulated depreciation (attach sch) ► STMT 5 3,363		30,080	30,080
15	Other assets (describe ▶)	-		
16	Total assets (to be completed by all filers—see the			
	instructions. Also, see page 1, item I)	340,078	626,933	735,166
17	Accounts payable and accrued expenses			
ဟု 18	Grants payable			
19 19 20 21 21	Deferred revenue			
20 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.B</u> 21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0		
	Foundations that follow SFAS 117, check here ► X and complete lines 24 through 26 and lines 30 and 31.			
Ses		340 079	626,933	
	Unrestricted Temporarily restricted	340,078	626,933	
25 B 26	Temporarily restricted Permanently restricted			
8 20	Foundations that do not follow SFAS 117, check here ▶			
et Assets or Fund Balan	and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds			
φ 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			
٦	instructions)	340,078	626,933	
Ž 31	Total liabilities and net assets/fund balances (see page 17			
	of the instructions)	340,078	626,933	
Part I	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 a	gree with		
end-c	f-year figure reported on prior year's return)		1	340,078
	amount from Part I, line 27a		2	286,855
	increases not included in line 2 (itemize) ▶		3	
	nes 1, 2, and 3		4	626,933
	eases 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), I	ne 30	6	626,933

OMASTORYTE 08/09/2010 1 49 PM Form 990-PF (2009) STORYTEL FOUNDATION 36-4645789 Part'IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold -Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo , day, yr) (mo , day, yr) D—Donation SEE WORKSHEET (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 10,811 If (loss), enter -0- in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) 10,811 If (loss), enter -0- in Part I, line 8 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 Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? 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 penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(0	(d) Distribution ratio col (b) divided by col (c))
	2008		435,263		
_	2007			(col (b)	
	2006				
	2005				
	2004				
2	Total of line 1, column (d)			2	
3	Average distribution ratio for the 5-year ba number of years the foundation has been it	· ·	5, or by the	3	
4	Enter the net value of noncharitable-use as	ssets for 2009 from Part X, line 5		4	420,258
5	Multiply line 4 by line 3			5	
6	Enter 1% of net investment income (1% of	Part I, line 27b)		6	296
7	Add lines 5 and 6			7	296
R	Enter qualifying distributions from Part XII	line 4		, I	139 350

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

Form	990-PF (2009) STORYTEL FOUNDATION		36-4645789					F	age 4
	rt.VI Excise Tax Based on Investment Income (Section 4940(a), 494	0(b), 4940(e), or 4948—see page 18 of	the i	nstru	ctions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here	and	enter "N/A" on line 1.	\exists	_				
	Date of ruling or determination letter (attach copy of	letter if nec	essary—see instructions)	ŀ	ļ				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, o	check		•	_1				296
	here X and enter 1% of Part I, line 27b			1		!			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organization	tions enter 4	% of	ل	Ì	1			
	Part I, line 12, col. (b)				ĺ				-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ations only (Others enter -0-)		2				0
3	Add lines 1 and 2				3				296
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found	ations only	Others enter -0-)		4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less	s, enter -0-			5				296
6	Credits/Payments·								
а	2009 estimated tax payments and 2008 overpayment credited to 2009		6a]	ļ			
ь	Exempt foreign organizations—tax withheld at source		6b						
С	Tax paid with application for extension of time to file (Form 8868)		6c		1	į			
d	Backup withholding erroneously withheld		6d]	ł			
7	Total credits and payments Add lines 6a through 6d				7	L _	_		
8	Enter any penalty for underpayment of estimated tax. Check here if Fo	orm 2220 is a	ittached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			>	9				296
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amou	ınt overpaid		•	10				
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶		Refunded	•	11				
Pa	rt VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	e, or local leg	islation or did it					Yes	No
	participate or intervene in any political campaign?						1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for po	olitical purpo	ses (see page 19				ļ	ļ	1
	of the instructions for definition)?						1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and copies	of any materials						
	published or distributed by the foundation in connection with the activities							ļ	
C	Did the foundation file Form 1120-POL for this year?						1c	<u> </u>	X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) impos	ed during th	e year						
	(1) On the foundation. > \$ (2) On foundation	n managers	\$		_		1	ł	
е	Enter the reimbursement (if any) paid by the foundation during the year for po	litical expend	diture tax imposed						
	on foundation managers \$								i
2	Has the foundation engaged in any activities that have not previously been rep	ported to the	IRS?				2		X
	If "Yes," attach a detailed description of the activities								<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in i	its governing	instrument, articles of						Ì
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a confor	rmed copy o	f the changes				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	during the ye	ar?				4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?					A/N	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	13					_ 5_		X
	If "Yes," attach the statement required by General Instruction T								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945)	5) satisfied e	ither				ļ ,		
	By language in the governing instrument, or						1		
	• By state legislation that effectively amends the governing instrument so that	no mandato	ry directions that						
	conflict with the state law remain in the governing instrument?						6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	If "Yes," cor	nplete Part II, col (c), and P	art X\	/		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (sinstructions) > NE	see page 19	of the						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF to the	Attorney General				[
	(or designate) of each state as required by General Instruction G? If "No," atta						8b	x	
9	Is the foundation claiming status as a private operating foundation within the m	•					"		
-	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see in	-	=: : :						
	27)? If "Yes," complete Part XIV	,,,,,,,,	on page				9	x	
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach a so	hedule listina their						
	names and addresses						10	x	

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Pa	art 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 as	oplication?		13	X	
	Website address ► N/A					_
14	The books are in care of DONALD E. CARNEY	Telephone no 🕨	402-5	02-	925	8
	12520 SHAMROCK ROAD		CO1 F /	,		
_	Located at ► OMAHA, NE	ZIP+4 ▶	68154	ŀ		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	_ 1	[▶ ∟
_	and enter the amount of tax-exempt interest received or accrued during the year		15			
Pi	art VII-B Statements Regarding Activities for Which Form 4720 May Be Requ	irea			V 1	
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			├i	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		l	
	(1) Engage in the sale of exchange, or leasing of property with a disqualitied person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	res	21 110		ł	
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	ì		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		ľ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for				h	
	the benefit or use of a disqualified person)?	Yes	X No		ĺ	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_	_	}	ł	
	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	((ļ	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Reg	gulations	_			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)	?	N/A	1b	_	
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐		ĺ	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	t	/-		- 1	
	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))					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	П у	X No			
	6e, Part XIII) for tax year(s) beginning before 2009?	∐ Yes	X No	1		
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(21				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	·			1	
	all years listed, answer "No" and attach statement—see page 20 of the instructions)	., 10	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		-1, -1			
	▶ 20 , 20 , 20 , 20				İ	
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			
þ	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	he				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the laps	e of				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				1	
	foundation had excess business holdings in 2009.)		N/A	3b	\dashv	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purp			4a	\rightarrow	<u>X</u>
Þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardiz				ļ	3 7
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning	ın 2009?		4b		<u>X</u>
			Fo	rm 99 (J-PF (2009)

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on	n 990-PF (2009)	STORYTEL	FOUNDATION	36-4	645789			Page 6
P	art VII-B	Statements Re	garding Activities for Which For	m 4720 May Be Re	quired (contin	ued)		
5a	During the year	ar did the foundation	pay or incur any amount to	<u> </u>				
	(1) Carry on p	propaganda, or other	rwise attempt to influence legislation (section	n 4945(e))?	\ \	res 🗓 No	1	
	(2) Influence	the outcome of any	specific public election (see section 4955),	or to carry on,				
	directly or	indirectly, any voter	registration drive?			res X No		
	(3) Provide a	grant to an individua	al for travel, study, or other similar purposes	;?		res X No	1	
	(4) Provide a	grant to an organiza	ition other than a chantable, etc., organizati	on described in		_	1	1
	section 50	9(a)(1), (2), or (3), o	or section 4940(d)(2)? (see page 22 of the ii	nstructions)	\ \\	res X No		
	(5) Provide fo	r any purpose other	than religious, chantable, scientific, literary	, or educational		_	1 1	
	purposes,	or for the prevention	n of cruelty to children or animals?		\	res 🗶 No	1 [
b	If any answer	is "Yes" to 5a(1)-(5)	, did any of the transactions fail to qualify ur	nder the exceptions desc	ribed in		i l	,
	Regulations se	ection 53 4945 or in	a current notice regarding disaster assistan	ice (see page 22 of the ir	structions)?	_N/A	5b	
	Organizations	relying on a current	notice regarding disaster assistance check	here		▶ □]	
С	If the answer is	s "Yes" to question (5a(4), does the foundation claim exemption	from the tax		_	i l	
	because it mai	intained expenditure	responsibility for the grant?		N/A []	res No	1	
	If "Yes," attach	the statement requ	ired by Regulations section 53 4945-5(d)					
6a	Did the founda	ition, during the year	r, receive any funds, directly or indirectly, to	pay premiums				
	on a personal	benefit contract?			\ _\	res 🗓 No	, (ľ
b	Did the founda	ition, during the year	r, pay premiums, directly or indirectly, on a [personal benefit contract	?		6b	X
	If "Yes" to 6b,	file Form 8870				_	,	1
7a	At any time du	ring the tax year, wa	es the foundation a party to a prohibited tax	shelter transaction?	<u> </u>	′es 🏻 No		
b	If yes, did the t	foundation receive a	ny proceeds or have any net income attribu	stable to the transaction?		N/A	7b	
P	art VIII in	nformation Abo	ut Officers, Directors, Trustees,	Foundation Manag	ers, Highly Pa	aid Employee:	5,	
		nd Contractors						
1 !	List all officers,	directors, trustees	s, foundation managers and their compe	nsation (see page 22 o	f the instructions)		
		(a) Na	me 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		pense account, r allowances
				devoted to position		compensation	<u> </u>	
DC	N E. CARNEY		OMAHA	DIRECTOR			ĺ	
12	2520 SHAMROCE	K ROAD	NE 68154	20.00	50,000	0	<u> </u>	0
CF	RISTOPHER J.	. CARNEY	NORTH BARRINGTON	DIRECTOR			ļ	
19	WYNSTONE W	AY	IL 60010	1.00	0	0	<u> </u>	0
Tŀ	IOMAS R. BROV	N.	OMAHA	SECRETARY				
20	27 DODGE STE	REET	NE 68102	1.00	0	0		0
				}	1		1	
2			aid employees (other than those include	d on line 1—see page 2	3 of the instructi	ons).		
	If none, enter	"NONE."						
	(a) Na	me and address of eac	h 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 		pense account, r allowances
NC	ONE		 					
							 -	
				_				
							<u> </u>	
							<u> </u>	
							<u></u>	
-+-	1 mumbar of aiba	e ampleuses paid as	CEO 000					1

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Part·VIII Information About Officers, Directors, Trustees, Four	ndation Managers, Highly Paid Empl	oyees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see pagents)	e 23 of the instructions). If none, enter "NON	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
•	1	
	ļ	
otal 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 chantable activities during the tax year. Include relevant statist organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ical information such as the number of	Expenses
1 N/A		
		ĺ
		
2		
		-
3		
		į
		
4		
Part IX-B Summary of Program-Related Investments (see pa	ge 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2	Amount
1 N/A	}	
	}	
2		
	1	
All other program-related investments See page 24 of the instructions		
3	1	
	ł	
otal. Add lines 1 through 3	▶	

7	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	i	ĺ		
а	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a		139,	350
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				
а	Suitability test (prior IRS approval required)	3a			
b	Cash distribution test (attach the required schedule)	3b			
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4		139,	350
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			296
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6		139,	054

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

Form 990-PF (2009)

P	art XIII Undistributed Income (see page 26 of	the instructions)			
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				<u> </u>
2	Undistributed income, if any, as of the end of 2009		1		
а	Enter amount for 2008 only				
b	Total for prior years 20 , 20 , 20				,
3	Excess distributions carryover, if any, to 2009				٠,,
а	From 2004	ì			"
b	From 2005	7			_
c	From 2006	7			
	From 2007				′
	From 2008	1	1		
	Total of lines 3a through e	-			
4	Qualifying distributions for 2009 from Part XII,		+		
7	line 4 \bigs \square \		}		
_		}]		1
	Applied to 2008, but not more than line 2a	ļ	 		
D	Applied to undistributed income of prior years		1		
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
đ	Applied to 2009 distributable amount		 		
- е	Remaining amount distributed out of corpus		 		
5	Excess distributions carryover applied to 2009		ļ		
	(If an amount appears in column (d), the same		1		
_	amount must be shown in column (a))				
6	Enter the net total of each column as				ı
	indicated below:	j			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				· · · · · · · · · · · · · · · · · · ·
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		 		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)			į	
	tax has been previously assessed		<u> </u>		·
d	Subtract line 6c from line 6b Taxable	į			
	amount—see page 27 of the instructions				
е	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		1	Ì	
_	distributed in 2010	<u> </u>	 		
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)	ļ	 		
9	Excess distributions carryover to 2010.		}	I	
	Subtract lines 7 and 8 from line 6a		<u> </u>		
0	Analysis of line 9		1	}	
а	Excess from 2005	1] [İ	
b	Excess from 2006	4	1	Ì	*
С	Excess from 2007	1	1		
đ	Excess from 2008	1]		•
<u>e</u>	Excess from 2009	<u> </u>	<u> </u>		

Page 10

_ <u>Pa</u>	art XIV · Private Operating Fou	ndations (see pa	age 27 of the instr	uctions and Part \	VII-A, question 9)	
1a	If the foundation has received a ruling or d		, ,			31 /7
	foundation, and the ruling is effective for 2		•	d in section X 4		N/I
b	Check box to indicate whether the foundat		ing foundation described		942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year (a) 2009	(h) 2000	Prior 3 years	(d) 2006	(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2003	(b) 2008	(c) 2007	(4) 2000	
		21,013	J		1	21,013
b	each year listed 85% of line 2a	17,861			 	17,861
C	Qualifying distributions from Part XII,		<u> </u>			17,001
·	line 4 for each year listed	139,350	, j			139,350
d	Amounts included in line 2c not used directly					233,330
-	for active conduct of exempt activities				Į	{
e	Qualifying distributions made directly		†			
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c	139,350	,			139,350
3	Complete 3a, b, or c for the					,
_	alternative test relied upon					
а	"Assets" alternative test—enter					i
	(1) Value of all assets				İ	
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		1			
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in				İ	
	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)				İ	
	(2) Support from general public					
	and 5 or more exempt				i	
	organizations as provided in			·		
	section 4942(j)(3)(B)(iii)	217,761	340,100			557,861
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	-4: 101-4-	Abi		 ¢5 000 :	
Pa	ort XV Supplementary Inform		-		\$5,000 or more i	n assets at
	any time during the ye		or the instruction	s. <u>j</u>		
1	Information Regarding Foundation Man List any managers of the foundation who h	-	than 20/ of the total con	tributions recoved by	the foundation	
а	before the close of any tax year (but only if				tre touridation	
	N/A	they have contributed	(30,000)	se section 507(d)(2))		
ь	List any managers of the foundation who o	wn 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the	
-	ownership of a partnership or other entity)		•			
	N/A					
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Scho	larship, etc., Program	s:		
			preselected charitable		s not accept	
	unsolicited requests for funds. If the founda			-		
	organizations under other conditions, comp		· -	,		
a	The name, address, and telephone numbe			e addressed		
	N/A	•				
b	The form in which applications should be s	ubmitted and informat	ion and materials they s	hould include		
	N/A					
С	Any submission deadlines		·			<u> </u>
	N/A	· · · · · · · · · · · · · · · · · · ·				
d	Any restrictions or limitations on awards, si	uch as by geographica	al areas, chantable field:	s, kinds of institutions,	or other factors	
	N/A					
						Form 990-PF (2009)

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Form 990-PF (2009) STORYTEL FOUNDATION

Supplementary Information (continued)

36-4645789

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of any foundation manager or substantial contributor Amount contribution recipient Name and address (home or business) a Paid during the year N/A Total **▶** 3a Approved for future payment N/A Total **▶** 3b

36-4645789

Page 12

_	<u> aπ XVI-A</u>	Analysis of income-Producing Ac					
	-	unts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of the instructions)
1		vice revenue			 		- Hatractions /
	a						
			-				,,
			-		+		
		<u>-</u>					
	e				 -		
	†		_				
	-	d contracts from government agencies	-				<u></u>
2	Membership	dues and assessments					
		avings and temporary cash investments	ļ				18,815
		nd interest from securities					
5	Net rental in	come or (loss) from real estate					
	a Debt-fin	anced property		· · · · · · · · · · · · · · · · · · ·			
	b Not deb	t-financed property					
6	Net rental in	come or (loss) from personal property					
7	Other invest	ment income					
8	Gain or (loss	s) from sales of assets other than inventory					10,811
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
		ue a					
					T 1		
	е						
12	Subtotal Ad	d columns (b), (d), and (e)		(0	29,626
13	Total. Add li	ne 12, columns (b), (d), and (e)				13	29,626
		in line 13 instructions on page 28 to verify calculation	ns)				
F	art XVI-B	Relationship of Activities to the A	ccomplishme	nt of Exempt Pu	rposes		
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo instructions)					he
	N/A						
							
				- 			
_		<u></u>				·	
_							
_							
							
							
							
_		· · · · · · · · · · · · · · · · · · ·					
_							
							
							
		<u></u>					
_		<u></u>			 _		
_							
							
_							

Date

H&R BLOCK TAX & BUSINESS SERVICES

10110 NICHOLAS ST, STE 202

Title

Check if

self-employed

EIN ▶

Phone no

Date

08/09/10

4	02-	69	<u>7-</u>	1	04	0
	Form	99	0-P	F	(2009	-

Preparer's identifying

number (see Signature on page 30 of the instructions)

42-1552029

P0061462

Sign Here

Paid Preparer's Use Only

Signature of officer or truste

Preparer's

Firm's name (or yours if

self-employed), address, and ZIP code

signature

BAAS,

CPA

DAVID

W.

Schedule B '
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization

Employer identification number

STORYTEL FOUN	DATION	36-4645789						
Organization type (check one								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	covered by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and a Special	I Rule See						
General Rule								
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in the contributor Complete Parts I and II	money or						
Special Rules								
sections 509(a)(1) and	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the red 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Compli	ution of the greater						
the year, aggregate co	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one corontributions of more than \$1,000 for use exclusively for religious, charitable, scientific, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
the year, contributions aggregate to more that year for an exclusively	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one cores for use exclusively for religious, charitable, etc., purposes, but these contributions on \$1,000. If this box is checked, enter here the total contributions that were received yieldiguous, charitable, etc., purpose. Do not complete any of the parts unless the Genation because it received nonexclusively religious, charitable, etc., contributions of \$1.000.	did not od during the eneral Rule						
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule st answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of in 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form	its Form						
For Privacy Act and Paperwork for Form 990, 990-EZ, or 990-PF	Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)						

of Part I

of 1

Page 1

Employer identification number Name of organization 36-4645789 STORYTEL FOUNDATION Part I Contributors (see instructions) (a) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 CHRISTOPHER J. CARNEY Person 19 WYNSTONE WAY Payroll 190,000 Noncash NORTH BARRINGTON IL 60010 (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 2 JASON ELDER Person 273 LEEDS DRIVE Payroll 100,000 Noncash BARRINGTON HILLS IL 60010 (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 3 MICHAEL MARTIN Person 10229 HEMLOCK Payroll 5,000 \$ Noncash OVERLAND PARK KS 66207 (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution BRIAN BATTLE Person Payroli 12,500 Noncash (Complete Part II if there is a noncash contribution) (a) (d) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 5 JIM AND SUSAN MATS... Person Payroll 50,000 Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 6 MILES CHRISTI Person Payroli 15,000 Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Page 1 of 1 of Part II

Name of organization STORYTEL FOUNDATION

Employer identification number 36-4645789

Part II **Noncash Property** (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 16,667 SHRS GENERAL GROWTH PPTYS 1 190,000 12/31/09 \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part i \$ (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Name(s) shown on return

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No 67

Identifying number

	STORYTE	464	15789						
	ess or activity to which this form relates NDIRECT DEPRECIATI	OM							
	art I Election To Expen		erty Under Secti	on 179	**				
	Note: If you have a				complete	Part I.			
1	Maximum amount. See the instruct						1	250,000	
2	Total cost of section 179 property p		2						
3	Threshold cost of section 179 proper	3	800,000						
4	Reduction in limitation Subtract line	e 3 from line 2. If zero	o or less, enter -0-				4		
5	Dollar limitation for tax year Subtract line	e 4 from line 1. If zero or					5		
6	(a) Description	of property	(b) Cost (business use	only)	c) Elected cos	t	1	
								-	
								-	
7	Listed property Enter the amount for			4.7	7		١.		
8	Total elected cost of section 179 pr	•	in column (c), lines 6	and /			8		
9	Tentative deduction Enter the sma		000 Farm 4500				9		
0	Carryover of disallowed deduction f	•		or line F (e	aa inntriidian	۵)	10		
1 2	Business income limitation. Enter the Section 179 expense deduction. Ac		•	•	ee mshuchon	5)	12	· · · · · · · · · · · · · · · · · · ·	
3	Carryover of disallowed deduction t				13		1 12		
	: Do not use Part II or Part III below							1	
	rt II Special Depreciati	<u>:</u>		iation (Do not	ınclude lıs	ted proper	tv.) (See instr.)	
4	Special depreciation allowance for						1.7.		
	during the tax year (see instructions			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_		14		
5	Property subject to section 168(f)(1	•					15		
6	Other depreciation (including ACRS						16		
Pa	irt III MACRS Depreciati	on (Do not inclu	de listed property	y.) (See instru	ctions.)				
			Section	Α					
7	MACRS deductions for assets place	ed in service in tax ye	ears beginning before	2009			17	C	
8	If you are electing to group any assets pl	aced in service during th	e tax year into one or mo	re general asset acco	ounts, check her	e ▶			
	Section B—	Assets Placed in Se	rvice During 2009 Ta	ax Year Using the	General Dep	reciation Sy	stem		
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecia (business/investment only-see instruction	use (a) Noodvory	(e) Convention	ention (f) Method		(g) Depreciation deduction	
9a	3-year property							ļ	
b	5-year property								
С	7-year property								
d	10-year property								
е	15-year property								
f			<u> </u>						
g				25 yrs		S/L			
h	Residential rental			27 5 yrs	MM	S/L			
_	property			27 5 yrs	MM	S/L		<u> </u>	
i	Nonresidential real property			39 yrs	MM	S/L		<u> </u>	
	<u> </u>	note Blaced in Con	is a Dusing 2000 Tay	. Vaar Hainer Aha A	MM Mannative De	S/L		<u> </u>	
_		ssets Placed in Sen	vice During 2009 Tax	Tear Using the A	Alternative De			1	
0a		5/1							
	12-year		-	12 yrs		S/L			
_	40-year	tructions \	L	40 yrs	MM	S/L		<u> </u>	
	urt IV Summary (See ins			-			24	3,363	
:1 :2	Listed property. Enter amount from		os 10 and 20 in salii-	on (a) and line 24	Enter here		21	3,363	
4	Total. Add amounts from line 12, line and on the appropriate lines of your	-		· - ·	Futer Hete		22	3,363	
3	For assets shown above and place						1 44	3,303	
-	portion of the basis attributable to s		o observe your, orner to		23				

Form	4562 (2009															Page
P	art V	property use	erty (Include d for entertail ehicle for which y	nment, re	creation the star	n, or a	amuse ileage ra	ement.) ite or ded	ucting le						s, and	
			—Depreciation							for limi	ts for pa	ssenger	automol	oiles)		
24a	Do you ha	ave evidence to suppo	ort the business/inve	stment use cl	a:med?		Yes	No	24b	If "Yes,"	" is the e	evidence	written?		Yes	No
Туре	(a) of property vehicles	(b)	(c) Business/ investment use percentage	(d Cost or	pasis (business/investment			(f) Recover period	y ,	(g)			(h) Depreciation deduction		(i) Elected section 179 cost	
25	first) Special	depreciation allowa	nce for qualified	listed proper	ty place	d in serv	use on vice durii		<u> </u>							
	tax year	and used more tha	an 50% in a qualr	fied busines:	s use (se	e instru	ctions)					25				
26	Property	used more than 5	0% in a qualified	business us	е				,		_					
V	EHICI		100 00%	2	0 41	4	20	111	5.		S/L-		3	3,060		
_	O) (D) III	01/30/09		3	0,41	1	30	,411	3.	9	2/11-			, 000		
C	OMPUI	ER EQUIPM 06/30/09			3,03	2	-	3,032	5.	م ام	5/L-	i i		303		
			· · · · · · · · · · · · · · · · · · ·		3,03	<u> </u>		,032	<u> </u>	<u> </u>	5/ Ц-			303	L	
27	Property	used 50% or less	in a qualified bus	iness use					ſ			1			_	
			%							S/I	L-					
			/6						 	1						
			%							S/I	L -					
28	Add amo	ounts in column (h)		27 Enterh	ere and	on line 2	21 nage	1	1			28	3	3,363		
29		ounts in column (i),				- i, page	•			<u></u>			29			
	Add aine	ounts in column (i),	ine 20 Lines ne				ation on	Use of \	/ahicles					_ 1 ==	L	
		section for vehicles		proprietor, pa	artner, or	other "r	more tha	n 5% ow	ner," or r	elated p		f you pro	vided ve	hicles		
	• •	<u> </u>		to see ii you	1						Τ		1		l .	
30	-	siness/investment			(a) (b)				:)				(e)	(f)		
	_	e year (do not inc	lude		Veh	Vehicle 1 Vehicle 2			Veh	cle 3	Vel	hicle 4	Ver	nide 5	Vehi	icle 6
		ng miles)					<u> </u>				 		 			
31		mmuting miles driv	• •				<u> </u>		ļ				 			
32		er personal (nonco	O,	driven			 				ļ		 			
33		es driven during th	e year Add										1			
•		through 32					\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			NI-	\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-	I No	. V	N.		
34		vehicle available for ng off-duty hours?	or personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35		vehicle used prima	arily by a								-	 		 		
-		in 5% owner or rela														
36		er vehicle available	-	2			†				† — —					
	13 4110411	er vernoic available	Section C—Qu		Employ	ors Wh	o Provid	le Vehicl	es for U	se hv T	heir Fm	nlovees	·			1
		questions to detern	nine if you meet a	in exception						-		-				
		owners or related p							1		E					
37		naintain a written p	olicy statement t	nat prohibits	all perso	onal use	of venic	des, inclu	aing con	imuting,	, by				Yes	No
••		ployees?	. 1 4 . 4 4 4													-
38	_	naintain a written p	•		-						our					
20		es? See the instru				onicers,	directors	S, OF 1% (or more	owners						
39	•	reat all use of vehi		•			ation fro			a abaut	tha					
40		provide more than t				ı iniorm	ation iro	m your ei	mpioyee	s about	me					
44		e vehicles, and ret					ration iia	o2 (Soc.	noter of c	nc \						
41		neet the requireme														l
	art VI	your answer to 37,		is res. do	not con	piete St	ection B	tor the co	vereu ve	riicies						
	ait vi	Amortization	<u> </u>									(e)				
		(a) Description of costs		(b) Date amo begi	rtization			(c) ortizable mount	(d) Amortiz Code period			Amortiza period percent	or	Amortiza	(f) ation for this year	
42	Amortiza	ition of costs that b	legins dirring voi	r 2009 tax w	ear (see	Instructi	ions)									
<u></u>	7 411011120	or cools that D	ogino during you	. 2000 tax y	(000		.5.13/									
43	Amortiza	ition of costs that b	egan before you	2009 tax ye	ear	• .	 -					G .	43			
44	Total. A	dd amounts in colu	mn (f) See the in	structions fo	or where	to repor	rt						44			

	Capital Gains and Losses	for Tax on Investmen	t Income				
Form . 990-PF	•			2009			
	dar year 2009, or tax year beginning	, and er					
Name			Employer Id	entification Number			
STORYTEL FOUNDAT:	ION		36-464	36-4645789			
(a) List and desc 2-story brick to	ribe the kind(s) of property sold, e.g., real estate warehouse, or common stock, 200 shs. MLC Co	. (b) How a P-Purc	chase (mo, day, yr)	(d) Date sold (mo , day, yr)			
(1) COUNTRY WIDE HO	OME LOAN SER 2006-10	D-Dona P	02/19/09	03/17/09			
(2) CHASEFLEX TRUS		P	02/05/09				
(3) CHASEFLEX TRUST	r ser 2005-2	P	02/05/09				
	THRU SER 2006-AR12	P	02/03/09				
	THRU SER 2006-AR12	P	02/03/09				
(6) WASH MUT MSC M		P	02/06/09				
(7) COUNTRYWIDE HON		P	VARIOUS VARIOUS	03/25/09			
(8) WASH MUT MSC MT (9) BANC AMERICA FI		P	VARIOUS	VARIOUS			
(10) CHASEFLEX TRUST		P	VARIOUS	VARIOUS			
(11) FIRST HORIZON A		P	VARIOUS	VARIOUS			
(12) INDYMAC INDX C		P	VARIOUS	VARIOUS			
(13) THORNBURG MORTO		P	VARIOUS	VARIOUS			
(14) WAMU MTG CERT 2	2006-AR12 2	P	VARIOUS	VARIOUS			
(15)							
	1	T					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) G (e) plu	(h) Gain or (loss) (e) plus (f) minus (g)			
(1) 58,038		49,412		8,626			
(2) 299		206		93			
(3) 269		185		84			
(4) 1,254		539		715			
(5) 852		367		485			
(6) 33,252 (7) 2,549		32,444		808			
		682					
(8) 682 (9) 1,255		1,255					
(10) 7,524		7,524					
(11) 5,269		5,269					
(12) 7,620		7,620					
(13) 3,995		3,995					
(14) 8,520		8,520					
(15)	<u> </u>		<u> </u>				
Complete only for a cost of a cost	and the second s						
	g gain in column (h) and owned by the fou		(I) Gains	(Col. (h) gain minus			
(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	col (k), but no Losses (f	(Col (h) gain minus it less than -0-) or rom col (h))			
(1)				8,626			
(2)				93			
(3)				84			
(4)				715			
(5)	 	 		485			
(6)				808			
(7) (8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)		<u> </u>					

Forms `	Oth	er Notes a	nd Loans Receiv	able		
990 / 990-PF					İ	2009
	For calendar year 2009, or	tax year beginnir	ng	, and ending		
ame					Employer Identific	ation Number
STORYTEL FOUN	₽¥₩ŦĊŊ		•9		36-46457	20
SIORITED FOOR	DATION				30-40437	
FORM 990-PF,	PART II, LINE 7	7 - ADDIT	IONAL_INFORM	ATION		
· · · · · · · · · · · · · · · · · · ·	Name of borrower HRIS CARNEY			Relationship to disc	ualified person	
	HRIS CARNEI					
2)						
						
5)			·			
7)		·				
				· <u>··</u>		
<u> 0)</u>						
	1		<u> </u>			Interest
Original amount	Data of leas	Maturity	_	Repayment terms		
borrowed	Date of loan	date		repayment terms		rate
1)						
2)						
3) 4)						
5)					-	
7)		·-··	-			
				······································		
9)	+					<u> </u>
10)						
.0)						
	.,.					
Secu	rity provided by borrower			Purpose of	loan	
1)						
2)	_					
3)						
3)						
5)						
5)						
')						
3)						
)						
10)						
	on furnished by lender		Balance due at beginning of year	Balance due at end of year		rket value

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1) CASH	_	1,670	1,670
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			· · · · · · · · · · · · · · · · · · ·
(10)			
Totals		1,670	1,670

						
8/9/2010 1:49 PM	•	Charitable Purpose	7,009		Adjusted Net Income	
8		Adjusted Net			Net Investment Income	
	8 - Taxes		s s	Depreciation	Current Year Depreciation	3,363
Federal Statements	- Form 990-PF, Part I, Line 18 - Taxes	Net Investment	s s	- Form 990-PF, Part I, Line 19 - Depreciation	od Life	ω ω
Federal Sta	Statement 1 - Form 990-	Total	7,009	nt 2 - Form 990-PF	Method	S/I S/I O
OUNDATION	<u>State</u>		ທ່ທ "	Statement 2	Prior Year Depreciation	ا ب ا با
OMASTORYTE STORYTEL FOUNDATION 36-4645789 FYE: 12/31/2009		Description	enses		Cost Basis	9 \$ 30,411 JI PMENT 3,032 \$ 33,443
OMASTORYTE 36-4645789 FYE: 12/31/2009			TAXES & LICENSES TOTAL		Date Acquired	VEHICLE 1/30/09 \$ COMPUTER EQUIPMENT 6/30/09 TOTAL \$

4 19 4			
8/9/2010 1:49 PM	•	Charitable Purpose	1, 664 1, 150 13, 775 13, 775 4, 461 55, 230 299 \$\frac{76, 631}{8}\$
	xpenses	Adjusted Net	\$ S
Federal Statements	Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	\$ \$\square\$ \qquare\$
Federal St	ment 3 - Form 990-PF,	Total	\$ 1,664 214 320 1,150 13,775 13,775 8,905 8,905 8,905
OMASTORYTE STORYTEL FOUNDATION 36-4645789 FYE: 12/31/2009	Stater	Description	BANK CHARGES BANK CHARGES AUTO EXPENSES DUES & SUBSCRIPTIONS OFFICE SUPPLIES POSTAGE & DELIVERY PUBLIC RELATIONS & ADVERTISTN PRODUCTION COSTS PRODUCTION LABOR PROFESSIONAL & LEGAL FEES SUPPLIES TOTAL

QMASTORYTE STORYTEL FOUNDATION
36-4645789 Federal Statements

FYE: 12/31/2009

36-4645789

Statement 4 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description

	Beginning of Year	 End of Year	Basis of Valuation	Fair Market Value
BANC AMERICA FDG				
\$ CHASEFLEX TRUST CMO SERIES 2002		\$ 22,057	COST	\$ 23,827
COUNTRYWIDE ALTERNATIVE LOAN 2005	5-23	23,683	COST	32,788
GO TIRGE ROOMON MORESTON		25,836	COST	51,556
CS FIRST BOSTON MORTGAGE		55,630	COST	56,963
CWMBS CHL MTG TR		·		,
FIRST HORIZON ALT 2007-FA2		14,894	COST	16,791
INDYMAC INDX		43,886	COST	58,908
		43,375	COST	61,355
THORNBURG MTG SEC 2007-4		51 O21	COCM	E7 0.C4
WAMU MTG CERT 2006		51,021	COST	57,864
CENEDAL CDOWNU DDWYC		22,687	COST	49,580
GENERAL GROWTH PPTYS		190,000	COST	191,670
TOTAL \$	0	\$ 493,069		\$ 601,302

8/9/2010 1:49 PM

8/9/2010 1:49 PM	•	FMV \$ 2,729 27,351	\$ 30,080				ĸ
	d Equipment	End Accumulated Depreciation \$ 303	\$ 3,363				
tements	Statement 5 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment	End Cost / Basis \$ 3,032 30,411	\$ 33,443				
Federal Statements	m 990-PF, Part II, Line	Beginning Net Book	0				
EL FOUNDATION	Statement 5 - For						
OMASTORYTE STORYTEL FOUNDATION 36-4645789 FYE: 12/31/2009		Description PRODUCTION EQUIPMENT VEHICLES	TOTAL				

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Internal Revenue		► File a separate application for each return.				
		omatic 3-Month Extension, complete only Part I and check this box				X
		ditional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).			•	
		ess you have already been granted an automatic 3-month extension on a previously filed Form	8888			
Part I		c 3-Month Extension of Time. Only submit original (no copies needed).	0000			
A corporation :	required to file	Form 990-T and requesting an automatic 6-month extension—check this box and complete				_
Part I only					•	
	rations (includi ome tax returns	ng 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extensi	on of	/-		
Electronic File	ıng (e-file). Ge	nerally, you can electronically file Form 8868 if you want a 3-month automatic extension of time	to file			
		v (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868				
		ne additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, g				
		isolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II		rm		
		electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits	,			
Type or				.oz idonti	ification number	
print	Name of Exc	mpt Organization	inplo	yer identi	ification number	
	STORYT	EL FOUNDATION	36-/	16457	90	
File by the due date for			<u> </u>	10437	09	
filing your		et, and room or suite no If a P O box, see instructions SHAMROCK RD				
return See nstructions		post office, state, and ZIP code. For a foreign address, see instructions				
nistractions	OMAHA	NE 68154				
Check type of	return to be f	led (file a separate application for each return)		·		
Form 99		Form 990-T (corporation)			Form 4720	
Ferm 99		Form 990-T (sec 401(a) or 408(a) trust)		\vdash	Form 5227	
Form 99		Form 990-T (trust other than above)		\vdash	Form 6069	
X Form 99		Form 1041-A		\vdash	Form 8870	
<u></u>	0	1 0 m 1041-A		L '	01111 0070	
Telephone If the organ If this is for or the whole go a list with the not a list wit	rization does not a Group Return roup, check this armes and EINs an automatic 38/15/10 rganization's related at year beginn	2-502-9258 pt have an office or place of business in the United States, check this box in, enter the organization's four digit Group Exemption Number (GEN) s box If it is for part of the group, check this box of all members the extension will cover -month (6 months for a corporation required to file Form 990-T) extension of time to file the exempt organization return for the organization named above The extension is sum for 2009 or		ting period	▶ [
3a If this app	olication is for F	orm 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	Π			
		credits See instructions	3a	s		0
		orm 990-PF or 990-T, enter any refundable credits and estimated tax	<u> </u>	<u> </u>		
		any pnor year overpayment allowed as a credit	3ь	s		0
		ine 3b from line 3a. Include your payment with this form, or, if required,				
		n or, if required, by using EFTPS (Electronic Federal Tax Payment] :			
	See instruction	· · · · · · · · · · · · · · · · · · ·	3с	s		0
		ake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO		_₹		-
or payment ins		2 2 2 2 2 1010 Millionalia, Millionalia Com 0000, 500 Form 0400 E0 and Form 0070-E0				
: <u>-</u> -		ork Reduction Act Notice, see Instructions.		For	m 8868 (Rev 4-20	009)
	•	·				- /