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### Department of the Treasu

SCANNED MAY 2 0 2010

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

Check all that apply	F	or ca	lendar	year 2009,	or t	ax year beg	inning	· ·			, 2009	, and en	ding				, 20
Use the IRS   Table   Name of forerdation   THE HAROLD AND MARILYN MELCHER FOUNDATION   A Employer identification number   A 1-1-671354   A					Т				Initia	al return	of a former p	oublic ch	arity			Final re	turn
Under the IRS   THE HAROLD AND MARILYN MELCHER FOUNDATION   43-1671354					Г	Amended	return			Addre	ess change		ו∏	Name (	change -		
tabels.    THE HAROLD AND MARILYN MELCHER FOUNDATION   The suppress print of type. See Specific Instructions.   200 W 47TH STREET NO. 720   (8.16) 931-5300				Name of fou	ında	tion								A Em	ployer ident	ification num	ber
Comparison   Com	1	Use t	he IRS														
print of type. See Specific City or rown, state, and 2IP code Instructions. City or rown, state, and 2IP code (XNSAS CITY, MO 64112)  H Check type of organization: X   Section 501(c)(3) exampt private foundation   Differ the state of the s				THE HAR	OLI	AND MAR	RILYN	MELC	HER	FOUNDA	ATION			43-1671354		4	
or type. Instructions: City or form, state, and ZIP code Instructions: KANSAS CITY, MO 64112  H. Check type of organization: Section 4947(a)(1) necessing the arrange of organization of year (from Part II), necessing the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and the arrange of year (from Part II), organization and year (from P		Othe	rwise,	Number and	stre	et (or PO box	numberi	f mail is no	ot delive	red to stree	et address)	Room/s	uite	B Tele	phone number (s	see page 10 of the	instructions)
See Specific Instructions.    Name		pr	int	i		•						1					
City or town, state, and ZiP code   City or town, state, and ZiP				pe. 800 w 47TH STREET NO.				720							(8	16) 931	-5300
Check type of organization:   X   Section 501(c)(3) exempt private foundation   2   2   2   2   2   2   2   2   2			•	City or town	, sta	ite, and ZIP co	de					1		C If ex	cemption appli	cation is	<b>▶</b>
KANSAS CITY, MO 64112   Part Check type of organization:   Section 501(c)(3) exempt private foundation   Section 4947(a)(1) increasing the state of the section of the section 501(c)(3) exempt private foundation   Fair market value of all assets at end   Accounting method:   Cash   Accounting method:   Fair market value of all assets at end   Accounting method:   Cash   Accounting method:   Fair market value of all assets at end   Accounting method:   Cash   Accounting method:   Fair market value of all assets at end   Accounting method:   Cash   Accounting method:   Fair market value of all assets at end   Accounting method:   Cash   Accounting method:   Fair market value of all assets at end   Accounting method:   Fair market value of all assets at end   Accounting method:   Fair market value of all assets at each   Accounting method:   Fair market value of all assets at each   Accounting method:   Fair market value of all assets at each   Accounting method:   Fair market value of all assets at each   Accounting method:   Fair market value of all assets   Fair market value o	•	ısıru	cuons.	1	•									i '	-		
Check type of organization:   X   Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   Other taxable private fou				KANSAS (	CIT	Y, MO 64	1112							ŀ			
Section 4947(a)(1) nonexempt chariable trust   Other (raxable private foundation   Fair market value of all assets at end of year (from Part II, cot.), (b), line   Other (specify)   Other (	н	Che	ck type					(c)(3) e)	vemnt	nrivate i	foundation			8	5% test, check	here and attach	
Fair market value of all assets at end   JAccounting method;   X Cash   Accrual of year (from Part II, col. (c), line   Other (speedy)   Other (speedy)   Other (speedy)   Other (speedy)   Other companies of advances in commons in columns (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (b), (c), and (c)   Other companies of the foundation in an extension (c)   Other companies of the foundation in an extension (c)   Other companies of the foundation in an extension (c)   Other companies of the foundation in an extension (c)   Other companies of the foundation in an extension   Other companies   Other	Ϊ	_		-						-		tion		ļ <sup>c</sup>	omputation .	• • • • • •	•
of year (from Part II, cot. (c), line   Other (specify)   Part I, column (d) must be on cash basis)   F II the foundations in a 80-month termination to clumms (d), cot. and (d) for the instructions)   All Interest (d) of an outbook and columns (d), (d), and (d)   All Interest (d) of an outbook and columns (d), (d), and (d)   All Interest (d) of the instructions)   All Interest (d) of the instructions)   All Interest (d) of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) of the instructions (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Interest (d) (as a page 1 of the instructions)   All Intere	亡																
16    S	•							_				, dai					
Part   Analysis of Revenue and Expenses (The total data amounts on amounts on column (g) (see page 1 of the instructions)   40		-									n cash basis.)			I			- 1
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions)								1	(-) ///		T		Т	1	300001 007		
Contributions afts growers are considerable in the instructions)   Local Contributions afts growers are considerable in the foliations on the required to a interest on savings and temporary cash investments		كالمات	total o	f amounts in c	olun	nns (b), (c), an	d (d)				1 ''		(			for cl	naritable
1 Contributions, sifts, grants, etc., moused (price) is sheeted     2 Check								, ex			incom	ie		inco	ome		
2 Check	_	4						-	40	9,680.	<del></del>		$\vdash$			(Lasiii	Jessia Unity)
3 Interest on swings and temporary cash investments 4 Dividends and interest from securities 5 Gross rents. 5 Gross rents. 6 Net gain or (loss) from sale of assets not on line 10 b Gross scales price for all 2 44 4, 209, assets on line 5a 2 4 4 4, 209, assets				If the f	ound	lation is not requ	urred to	<b></b>			<del>                                     </del>		†	<u> </u>		<del> </del>	
4 Dividends and interest from securities   21,058   21,058   ATCH 1		_		allacti							1		<del> </del> -			+	
Sa Gross rents				•	,	-			2	1.058	2	1.058	<del> </del>			ΔTCH	1. 1.
b Net rental income or (loss)  B Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 244, 209 assets on line 6a assets on line													+			HICH	
191, 695   191, 695	1										<del>                                     </del>	*	<del>                                     </del>			+	
B Gross sales proce for all assess on line 6a 244,209.  8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold 12 Total. Add lines 1 through 11 13 Compensation of officery allowances 14 Other employee sales (attach schedule) 15 Pension plans employee benefits 16 Legal fees fighted stray returns 17 Cother professionaria less (attach schedule) 18 Taxes (attach schedule) and deptetion 19 Depreciation (attach schedule) 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses 25 Add lines 13 through 23 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess for weeue over expenses and disbursements b Net investment income (if negative, enter -0-)									19	1.695		-	╁	-		+	
Net short-term capital gain	en.	6a b	Net gair Gross s	n or (loss) from : ales pnce for all	sale	of assets not on 2.4.4	. 209				}	-5.5	<del> </del>	-			
Net short-term capital gain	Vel	_					<del></del>				19	1.695	<del> </del>		_	-	
9   Income modifications   10 a Gross sales lesses returns and allowences   10 a Gross sales lesses returns and allowences   10 a Gross sales lesses returns and allowences   11 Other income (attach schedule)   5,063   ATCH 2   12 Total. Add lines 1 through 11   627,496   212,753   ATCH 2   13 Compensator of other schedule   627,496   212,753   ATCH 2   14 Other employee schedule   15 Pension plans describes of the schedu	& ∣		-	-		-										+	i
10 a Gross sales less returns and allowances		_		•	-						<del>                                     </del>		$\vdash$			<del>                                     </del>	
and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of offices directors, fusitees, etc 14 Other employee-scales of profit of the schedule		-			· ·								<del> </del>			+	<u></u>
C Gross profit or (loss) (attach schedule)   5,063   ATCH 2     12 Total. Add lines 1 through 11   627,496   212,753     13 Compensation of office a directors trustees, etc     14 Other employee scales of others are directors trustees, etc     15 Pension plans employee benefit   D     16 Legal fees (attach schedule)   D     16 Legal fees (attach schedule)   D     17 Interest   OCDENTIAL (attach schedule)   D     18 Taxes (attach schedule) (see pool 1 duninstructors)     19 Depreciation (attach schedule) and deptetion     10 Occupancy   D     11 Tavel, conferences, and meetings     12 Total operating and administrative expenses     18 Add lines 13 through 23   3,898   1,828   0     19 Other expenses (attach schedule)   D     20 Total operating and administrative expenses     20 Total operating and administrative expenses     21 Total operating and administrative expenses     22 Total operating and administrative expenses     23 Contributions, gifts, grants paid   253,442   253,442     25 Total expenses and disbursements   257,340   1,828   0     257,340   210,925     26 Total operating 26 from line 12:   370,156     26 Total expenses and disbursements   370,156     26 Net investment income (if negative, enter -0-)     210,925   210,925					- 1								<del> </del>				
11 Other income (attach schedule)				•		ab asbadula)						····	-				<u> </u>
12 Total Add lines 1 through 11   627, 496   212,753     13 Compensation of offices directors, trustees, etc   14 Other employee schools (Directors)   15 Pension plans (employee Benefits CD)   15 Pension plans (employee Benefits CD)   16 Legal fees (attach schedule)   17 Pension plans (eschools)   18 Pe								_		5.063.			1-			ДТСН	2
13 Compensation of offices directors, trustees, etc.   14 Other employee safets included   15 Pension plans employee benefits   15 Pension plans employee   15 Pension plans							1					2,753.	<del> </del>		_	111 011	<u> </u>
14 Other employee same improves benefit by Pension plans employee by Pension plans employee by Pension plans employee benefit by Pension plans employee by Pension pla	۲											·	†—			<del>                                      </del>	
15 Pension plans employee Denetic D. 16a Legal fees (attach schedule) 3 2,585 1,292 0. 1,293 c Other professional fees (attach schedule) 4 1,023 511. 512  18 Taxes (attach schedule) (see productions) 19 Depreciation (attach schedule) and deptetion. 239 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) [5] 51 25 26  24 Total operating and administrative expenses. Add lines 13 through 23 3,898 1,828 0. 1,831 25 Contributions, giffs, grants paid 253,442 253,442 253,442 253,442 253,442 253,442 255,273  27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)							٠٠.			-			<del>                                     </del>		_	<del> </del>	<del></del>
c Other professional fees (attach schedule) (see product duft) interest.  17 Interest.  18 Taxes (attach schedule) (see product duft) instructions) 19 Depreciation (attach schedule) and deptetion. 20 Occupancy.  21 Travel, conferences, and meetings. 22 Printing and publications. 23 Other expenses (attach schedule) [5]. 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.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-)	S						5						<del>                                     </del>			<del> </del>	
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c Other professional fees (attach schedule) (see product duft) interest.  17 Interest.  18 Taxes (attach schedule) (see product duft) instructions) 19 Depreciation (attach schedule) and deptetion. 20 Occupancy.  21 Travel, conferences, and meetings. 22 Printing and publications. 23 Other expenses (attach schedule) [5]. 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.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements. b Net investment income (if negative, enter -0-)	칮	ıoa	Access	tide tack to	1900	Indinari 3	i <i>181</i> 1			2,585		1,292.	<del>                                     </del>		0		1,293
Travel, conferences, and meetings  20 Occupancy  21 Travel, conferences, and meetings  22 Printing and publications  23 Other expenses (attach schedule) [5]		0	Other	reference (all	auli ac/	attach schoons	#Q#						<del>                                     </del>			<del> </del> -	512
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23	ا≨ٍ	17	Interest	No costolia	SE (	anaui suituul	1531			-			t		<del></del>	<del> </del>	<del></del>
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23	ایز			T	$\underline{U}$	N. LIF	<u> </u>									<del> </del>	
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23	≝∣									239.			<del> </del>				
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23	틹		•	*			Dicaon.			-				-		<del> </del>	<del></del>
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23	ځ		-	-									<b> </b>			<del> </del>	<del></del>
23 Other expenses (attach schedule) [5] 51. 25. 26  24 Total operating and administrative expenses. Add lines 13 through 23 3,898 1,828. 0. 1,831  25 Contributions, gifts, grants paid 253,442 257,340 1,828. 0. 253,442  26 Total expenses and disbursements Add lines 24 and 25 257,340 1,828. 0. 255,273  27 Subtract line 26 from line 12:  370,156 b Net investment income (if negative, enter -0-)	띭												<del>                                     </del>			<del> </del>	
25 Contributions, gifts, grants paid	9		-							51		25.	Ι			<del> </del>	26
25 Contributions, gifts, grants paid	≣			•			1				· · · · · · · · · · · · · · · · · · ·		<del> </del>		<del></del>	<del> </del>	<del>_</del>
25 Contributions, gifts, grants paid	اچ	<b>4</b>		•			1		1	3,898		1,828.			0		1,831
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0-)  257, 340.  1,828.  0.  255, 273  270, 156.  210, 925.	5	2 6					ſ						<b>!</b>			<del> </del>	253,442
27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements	- 1				_	-	- 1				<u> </u>	1,828.	<u> </u>		0		255,273
a Excess of revenue over expenses and disbursements	$\neg$						r anu 20						<u> </u>			<del>                                     </del>	
b Net investment income (if negative, enter -0-)	-						nts		370	7,156							1
2 ret in State of the State of	-			-							21	0,925.			_	1	
	-					=	1						<u> </u>		-O <i>-</i>	<u> </u>	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.  $^{9E1410\ 1\ 000}$  68092Q AlOP 4/21/2010 9:00:32 AM V 09-5.2

Form 990-PF (2009) JSA PAGE 4

Part	Attached schedules and £mounts in the description column should be for end-of-year	Beginning of year	End of	f year
	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		82.	82
2	Savings and temporary cash investments		93,091.	93,091
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 (attach schedule)			
	Less. allowance for doubtful accounts ▶			
ω 8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
(n)	Investments - U S and state government obligations (attach schedule)	93,057.	0.	0
-1	Investments - corporate stock (attach schedule) ATCH 7	236,715.	297,498.	549,828
	· · · · · · · · · · · · · · · · · · ·	===,:==	===,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
11 6	Investments - corporate bonds (attach schedule).			ATCH 8
	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)  2,434.  2,434.	0.		VICU 0
1				
12	Investments - mortgage loans			<del></del>
13 14	Investments - other (attach schedule)  Land, buildings, and equipment basis  Less accumulated depreciation 2, 434.  (attach schedule)	. ,		
' -	equipment basis Less accumulated depreciations	239.		
	(attach schedule)	239.		
15	Other assets (describe  )			
16	Total assets (to be completed by all filers - see the	220 260	200 671	642.001
	instructions. Also, see page 1, item I)		390,671.	643,001
17	Accounts payable and accrued expenses			
18	Grants payable			: 1
တ္ထု 19	Deferred revenue			
墨 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 50 51 50 50 50 50 50 50 50 50 50 50 50 50 50	Mortgages and other notes payable (attach schedule)	<u> </u>		
ت <sub>ا 22</sub>	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here ▶			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
E 25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117,			
<u>.</u> 5	check here and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds	330,368.	390,671.	
9 20				
28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
A A	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balance 2 2 2 2 2 2 3 0 2 2 2 2 2 2 2 2 2 2 2 2	Total net assets or fund balances (see page 17 of the	330,368.	390,671.	
	Instructions)	330,300.	3,0,0,1.	
1	` ' *	330,368.	390,671.	
D	of the instructions)	Polonece	390,0/1.	
				<del></del>
	net assets or fund balances at beginning of year - Part II,			220 200
	of-year figure reported on prior year's return)			330,368
2 Ente	r amount from Part I, line 27a r increases not included in line 2 (itemize) ► ATTACHI	<u></u> . <u>.</u>	2	370,156
3 Othe	r increases not included in line 2 (itemize) ▶ATTACHI	MENT 9	3	77,023
				777,547
5 Decr	lines 1, 2, and 3 eases not included in line 2 (itemize) ► ATTACHI	MENT 10	5	386,876
	net assets or fund balances at end of year (line 4 minus li			390,671.
	**ATCH 6			Form 990-PF (2009)

(a) List a	and describe the kind(s) of property sold	vestment Income	(b) How acquired	(c) Date	(d) Date sold
, .	brick warehouse, or common stock, 200	· •	P-Purchase D-Donation	acquired (mo., day, yr)	(mo., day, yr )
1a SEE PART IV SCH	IEDULE				
<u>b</u>					
<u>c</u>					
d			<u> </u>		
<u>e</u>			<u> </u>		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a b		·			
C					
d					
е					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	ain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col. (j), ıf any		(k), but not less t Losses (from co	han -0-) <b>or</b>
a					
b					
C					
d					
е					
2 Capital gain net income o	or (not contol loce)	f gain, also enter in Part I, line 7 } f (loss), enter -0- in Part I, line 7 }	2		191,695.
3 Net short-term capital da	in or (loss) as defined in sections 12	•			
	I, line 8, column (c) (see pages 13				
- ·	I, line 8		3		
	Inder Section 4940(e) for Red				
	i, leave this part diank.				
	r the section 4942 tax on the distrit		ase period	i?	Yes X No
If "Yes," the foundation does	r the section 4942 tax on the distrits not qualify under section 4940(e).	Do not complete this part.			Yes X No
If "Yes," the foundation does	or the section 4942 tax on the distrit is not qualify under section 4940(e). Inount in each column for each year	Do not complete this part.		ing any entries.	Yes X No
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years  Calendar year (or tax year beginning in)	or the section 4942 tax on the distribution of the section 4940(e).  Industrial content of the section 4940(e).  (b)  Adjusted qualifying distributions	Do not complete this part.  r; see page 18 of the instructions be (c)  Net value of nonchantable-use assets	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	tio col (c))
If "Yes," the foundation doe:  1 Enter the appropriate ar (a)  Base penod years Calendar year (or tax year beginning in)  2008	tr the section 4942 tax on the distribution of qualify under section 4940(e).  nount in each column for each year  (b)  Adjusted qualifying distributions  418,306.	Do not complete this part.  r; see page 18 of the instructions be (c)  Net value of nonchantable-use assets  568,127.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	col (c)) 0.736290
If "Yes," the foundation doe:  1 Enter the appropriate ar (a)  Base penod years Calendar year (or tax year beginning in)  2008  2007	tr the section 4942 tax on the distrit is not qualify under section 4940(e). nount in each column for each year (b) Adjusted qualifying distributions 418,306. 377,723.	Do not complete this part.  r; see page 18 of the instructions be (c) Net value of nonchantable-use assets  568, 127.  870, 609.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	otio col (c)) 0.736290 0.433861
If "Yes," the foundation doe:  1 Enter the appropriate ar (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006	r the section 4942 tax on the distrits not qualify under section 4940(e).  nount in each column for each year  (b)  Adjusted qualifying distributions  418,306.  377,723.  411,263.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568,127.  870,609.  797,296.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	otto col (c)) 0.736290 0.433861 0.515822
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years  Calendar year (or tax year beginning in)  2008  2007  2006  2005	r the section 4942 tax on the distrits not qualify under section 4940(e).  nount in each column for each year  (b) Adjusted qualifying distributions  418,306.  377,723.  411,263.  257,506.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568,127.  870,609.  797,296.  545,363.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	otto col (c)) 0.736290 0.433861 0.515822 0.472174
If "Yes," the foundation doe:  1 Enter the appropriate ar (a) Base penod years Calendar year (or tax year beginning in)  2008 2007 2006	r the section 4942 tax on the distrits not qualify under section 4940(e).  nount in each column for each year  (b)  Adjusted qualifying distributions  418,306.  377,723.  411,263.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568,127.  870,609.  797,296.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	otto col (c)) 0.736290 0.433861 0.515822
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years  Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (or	tr the section 4942 tax on the distribution and qualify under section 4940(e).  The mount in each column for each year (b)  Adjusted qualifying distributions  418,306.  377,723.  411,263.  257,506.  195,966.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568,127.  870,609.  797,296.  545,363.  432,865.	efore mak	Ing any entries. (d) Distribution ra (col (b) divided by	otto col (c)) 0.736290 0.433861 0.515822 0.472174
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (or appropriate are appropr	tr the section 4942 tax on the distrits not qualify under section 4940(e).  nount in each column for each year  (b)  Adjusted qualifying distributions  418,306.  377,723.  411,263.  257,506.  195,966.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.	efore mak	ing any entries. (d) Distribution ra (col (b) divided by	tto (c)) 0.736290 0.433861 0.515822 0.472174 0.452719
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years  Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (or according to the column and the column are column and the column are column or according to the column are column or according to the column are column and the column are column or according to the column are column.	the section 4942 tax on the distributions not qualify under section 4940(e).  The section 4940 tax on the distribution 4940(e).  The section 4942 tax on the distribution 4940(e).  The section	Do not complete this part.  (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.  e the total on line 2 by 5, or by the sthan 5 years	2	ing any entries. (d) Distribution ra (col (b) divided by	tio (c)) 0.736290 0.433861 0.515822 0.472174 0.452719 2.610866 0.522173
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years  Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (or appropriate are in the foundation of years the foundation of years the foundation of the foundatio	the section 4942 tax on the distrits not qualify under section 4940(e).  The nount in each column for each year (b)  Adjusted qualifying distributions  418, 306.  377, 723.  411, 263.  257, 506.  195, 966.  It is not qualify under section 4940(e).  Adjusted qualifying distributions  418, 306.  377, 723.  411, 263.  257, 506.  195, 966.	Do not complete this part.  (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.  e the total on line 2 by 5, or by the sthan 5 years	2	ing any entries. (d) Distribution ra (col (b) divided by	tto (c)) 0.736290 0.433861 0.515822 0.472174 0.452719 2.610866 0.522173 466,276.
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years Calendar year (or tax year beginning in)  2008 2007 2006 2005 2004  2 Total of line 1, column (of Average distribution ration number of years the four  4 Enter the net value of note that the second of	the section 4942 tax on the distrits not qualify under section 4940(e).  The nount in each column for each year (b)  Adjusted qualifying distributions  418, 306.  377, 723.  411, 263.  257, 506.  195, 966.  It is not qualify under section 4940(e).  Adjusted qualifying distributions  418, 306.  377, 723.  411, 263.  257, 506.  195, 966.	Do not complete this part.  T; see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.  The total on line 2 by 5, or by the set than 5 years  om Part X, line 5	2 3	ing any entries. (d) Distribution ra (col (b) divided by	tto (c)) 0.736290 0.433861 0.515822 0.472174 0.452719 2.610866 0.522173 466,276.
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (or action of years the four the net value of not the second of the second	the section 4942 tax on the distribution of the section 4940(e).  The section 4942 tax on the distribution of the section 4940(e).  The section 4942 tax on the distribution of the section 4940(e).  The section 4942 tax on the distribution 4940(e).  The section 4940	Do not complete this part.  T; see page 18 of the instructions be (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.  The total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3 4	ing any entries. (d) Distribution ra (col (b) divided by	tto (c)) 0.736290 0.433861 0.515822 0.472174 0.452719 2.610866
If "Yes," the foundation doe:  1 Enter the appropriate ar  (a)  Base penod years Calendar year (or tax year beginning in)  2008 2007 2006 2005 2004  2 Total of line 1, column (of Average distribution ration number of years the four 4 Enter the net value of not Multiply line 4 by line 3 6 Enter 1% of net investmore Add lines 5 and 6	the section 4942 tax on the distrits not qualify under section 4940(e).  Industry under section 4940(e).  Adjusted qualifying distributions  418, 306.  377, 723.  411, 263.  257, 506.  195, 966.  I)  In of or the 5-year base period - divide andation has been in existence if less ancharitable-use assets for 2009 from the companion of the compani	Do not complete this part.  T; see page 18 of the instructions be  (c)  Net value of nonchantable-use assets  568, 127.  870, 609.  797, 296.  545, 363.  432, 865.  The total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3 4 5 6	Ing any entries.  (d)  Distribution ra  (col (b) divided by	tho col (c)) 0.736290 0.433861 0.515822 0.472174 0.452719 2.610866 0.522173 466,276. 243,477. 2,109.

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	the in	structi	ions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			,
-	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			i
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,	109.
	here ► X and enter 1% of Part I, line 27b			
С	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-)			
3	Add lines 1 and 2		2,	109.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2,	109.
6	Credits/Payments:	,		
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 176.			1
	Exempt foreign organizations-tax withheld at source 6b 0.	•	٠ -	j
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d	•	, `	ļ
7	Total credits and payments. Add lines 6a through 6d			176.
8	Enter any penalty for underpayment of estimated tax. Check here for underpayment of estimated tax.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,9	933.
	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			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	`,	Yes	No
ıa	participate or intervene in any political campaign?	1a		X
<b>h</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		<del></del>	<del> </del>
D		1ь		x
	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.	1 5	_	
_	· · · · · · · · · · · · · · · · · · ·	1 c	/-	X
	Did the foundation file Form 1120-POL for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		٠,	
u	(1) On the foundation (2) On foundation managers \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е		'		
_	on foundation managers.  \$\Bigsim \\$ \text{ Has the foundation engaged in any activities that have not previously been reported to the IRS?}	2		
2				
_	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3		3		X
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		Х
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?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_	X
5	·	-		
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or  By the governing instrument, or  By the language in the governing instrument, or  By the governing instrum			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		X	
_	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," complete Part II, col. (c), and Part XV.	7		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $\triangleright^{MO}$			,
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	8ь	X	<del></del> ;
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	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		ا ا	
	names and addresses	10	Х	

orm	990-PF (2009) 43-16/1354			Page 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	- ·	13		X
	Website address N/A			
14		530	50	
•	The books are in care of ► RANDY CLARK  Located at ►800 W 47TH STREET, SUITE 720 KANSAS CITY, MO  ZIP+4 ► 64112			
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			
Par	t 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
12	During the year did the foundation (either directly or indirectly):	1.7	45 3	3 6 4
14	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	·′′ -	31	
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1	,	` -
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	13.	.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	١٠,	" · ·	, , , ,
	the benefit or use of a disqualified person)?	2,5		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	100	, 1	
	the foundation agreed to make a grant to or to employ the official for a period after			1.7
	termination of government service, if terminating within 90 days.)		, .	
h	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)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here	38.77	3.5	15,7
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	124		
Ŭ	were not corrected before the first day of the tax year beginning in 2009?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	4, *	` ,	
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	′	, '	1: 1
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and		:	
_	6e, Part XIII) for tax year(s) beginning before 2009? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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.)	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.		-	-
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?		1	
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			1
_	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 )	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a_		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	the stable and a stable and and have remained from incorred before the first day of the toy year hegipping in 20002	ian I		· X

Pa	rt VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Requ	ired (continued)				
5 a	<ul> <li>During the year did the foundation pay or incur any amount</li> </ul>	unt to.						
	(1) Carry on propaganda, or otherwise attempt to influe		1 4945(e))?	Yes X N	0	,		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
		•	•	Yes X N	_			
	directly or indirectly, any voter registration drive?			·	-			
	(3) Provide a grant to an individual for travel, study, or ot	• •		Yes X N	°   .	1		
	(4) Provide a grant to an organization other than a char	ıtable, etc., organizatı	on described in	L		1	,	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	(see page 22 of the in	structions)	Yes X N	0	1		
	(5) Provide for any purpose other than religious, charita	ble, scientific, literary,	or educational			1		
	purposes, or for the prevention of cruelty to children of	or animals?		Yes X N	0			
<b>.</b>				. —	·			
b	-					-		
	Regulations section 53 4945 or in a current notice regard	_		· . —	· · ·   5b	<del> </del>	<del> </del>	
	Organizations relying on a current notice regarding disas			▶ 🗀				
C	If the answer is "Yes" to question 5a(4), does the foundation	ation claim exemption	from the tax					
	because it maintained expenditure responsibility for the g	rant?		Yes N	0	1		
	If "Yes," attach the statement required by Regulations sec					-		
6	Did the foundation, during the year, receive any funds, of	• •	nov promiumo			1.		
оа		•		Yes X N	_			
	on a personal benefit contract?				J—	·		
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a	personal benefit contra	ct?	6b		X	
	If "Yes" to 6b, file Form 8870.				1			
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	. Yes X N	o [	1		
b	If yes, did the foundation receive any proceeds or have a	any net income attribu	table to the transaction	?	7ь			
Pai	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	<b>Highly Paid Empl</b>	oyees,			
	and Contractors					-		
1_	List all officers, directors, trustees, foundation m				T			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	(d) Contributions to employee benefit plans	(e) Expension			
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)		(e) Expension			
		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
ΑT		hours per week	(If not paid, enter	employee benefit plans	other al			
ΑT	TACHMENT 11	hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
ΑT		hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
AT	TACHMENT 11	hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
AT	TACHMENT 11	hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
AT	TACHMENT 11	hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
AT	TACHMENT 11	hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance		
	TACHMENT 11	hours per week devoted to position	(If not paid, enter 0-)	employee benefit plans and deferred compensation  - 0 -	other al	lowance		
2	TACHMENT 11  Compensation of five highest-paid employees (other	hours per week devoted to position	(If not paid, enter 0-)	employee benefit plans and deferred compensation  - 0 -	other al	lowance		
2	TACHMENT 11	hours per week devoted to position	(If not paid, enter 0-)	employee benefit plans and deferred compensation  -0-	other al	lowance		
2	TACHMENT 11  Compensation of five highest-paid employees (otili none, enter "NONE."	hours per week devoted to position  her than those inc  (b) Title, and average	(If not paid, enter 0-)  -0-	employee benefit plans and deferred compensation  -0-  e page 23 of the ins  (d) Contributions to	other al	- 0 -	s	
2	TACHMENT 11  Compensation of five highest-paid employees (other	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter 0-)	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	other al	- 0 -	int,	
2	TACHMENT 11  Compensation of five highest-paid employees (otili none, enter "NONE."	hours per week devoted to position  her than those inc  (b) Title, and average	(If not paid, enter 0-)  -0-	e page 23 of the ins  (d) Contributions to employee benefit	tructions).	- 0 -	int,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter 0-)  -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	int,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otili none, enter "NONE."	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	int,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	int,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	int,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	ent,	
2 (a	TACHMENT 11  Compensation of five highest-paid employees (otilif none, enter "NONE."  Name and address of each employee paid more than \$50,000	hours per week devoted to position  her than those inc  (b) Title, and average hours per week	(If not paid, enter -0-) -0-	employee benefit plans and deferred compensation  - 0 -  ee page 23 of the ins:  (d) Contributions to employee benefit plans and deferred	tructions).	- 0 -	int,	

3 Five highest-paid independent contractors for professional services (see page 23 of	f 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		
		-
otal number of others receiving over \$50,000 for professional services	<u> </u>	▶ NON
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informs of organizations and other beneficianes served, conferences convened, research papers produced, etc.	ation such as the number	Expenses
1_N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 23 of the instru- Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
1 NONE		· · · · · · · · · · · · · · · · · · ·
2		
All other program-related investments See page 24 of the instructions 3 NONE		
3		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ıgn foundatioi	ıs,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	427,963.
b	Average of monthly cash balances	1b	45,414.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	473,377.
е	Reduction claimed for blockage or other factors reported on lines 1a and	,	- '
	1c (attach detailed explanation)	<u></u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	473,377.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	7,101.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	466,276.
6	Minimum investment return. Enter 5% of line 5	6	23,314.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ and do not complete this j		
1	Minimum investment return from Part X, line 6	1	23,314.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 2,109.	: >	
b	Income tax for 2009. (This does not include the tax from Part VI) 2b	1.3	
С	Add lines 2a and 2b	2c	2,109.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	21,205.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	21,205.
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	21,205.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)	·	
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	255,273.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,		<del> </del>
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	255,273.
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	2,109.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	253,164.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years.	hether the four	idation

Pá	art XIII Undistributed Income (see page	e 26 of the instruction	ons)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
•	line 7	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	, , , ,		21,205.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only		, ,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
b	Total for pnor years 20_07_,20_06_,20_05_				
3	Excess distributions carryover, if any, to 2009	, , , , ,	1 2 × 1.4	, 10 '	,
а	From 2004	1	20	3 /	
b	From 2005 237, 180.	4. 2			
C	From 2006 381,839.				
d	From 2007				
е	From 2008				m 21 4 21
f	Total of lines 3a through e	1,528,931.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-(\)
4	Qualifying distributions for 2009 from Part XII, line 4: ► \$ 255,273.				
а	Applied to 2008, but not more than line 2a	· Pray rail	1 1.25		(*,
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount	なながれ <u>い</u>	S. S	v 52	21,205.
е	Remaining amount distributed out of corpus	234,068.	1-7 WY 3 K 5 7 . 1	3,14 ,, 2,211	* s
5	Excess distributions carryover applied to 2009	<del></del>	. 13 4 4	1-3 * ( ) / ( ) / ( )	
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,762,999.	*	**, * / / /	
	Prior years' undistributed income. Subtract				
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			-	
е	Undistributed income for 2008. Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions	בו פי צייט			
f	Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				
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				, .
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	178,257.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	1,584,742.			
10	Analysis of line 9:				
а	Excess from 2005 237 , 180 .				
b	Excess from 2006 381,839.	İ			
С	Excess from 2007 341, 409.				
	Excess from 2008 390, 246.				
е	Excess from 2009 234, 068.			1	1

Form	n 990-PF (2009)			43-1	671354	Page 10
Pa	rt XIV Private Oper	rating Foundations	(see page 27 of th	e instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a .	. If the foundation has	received a ruling or o	letermination letter th	at it is a private oper	ating	
	foundation, and the rulin	g is effective for 2009, e	nter the date of the rulin	9	▶	
b	Check box to indicate wh				4942(	(J)(3) or 4942(J)(5)
_		Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment	<u> </u>	(2,222	(7)	(1,7 = 1 = 1	
	return from Part X for each year listed	•				
L						
b	85% of line 2a				·	-
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not					
	used directly for active conduct					
۰	of exempt activities		<del></del>			
·	Qualifying distributions made directly for active conduct of				}	
	exempt activities. Subtract line				İ	
3	2d from line 2c  Complete 3a, b, or c for the	· · · ·				<del></del>
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying				-11.	
	under section					
b	4942(j)(3)(B)(i)					
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	"Support" alternative test - enter		· · · · · · · · · · · · · · · · · · ·	<del> </del>		
	(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	<u> </u>				<del> </del>
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(iii)					
	port from an exempt organization					
	(4) Gross investment income					
Pa				only if the founda	ation had \$5,000	or more in assets
	at any time o	luring the year - see	e page 28 of the in	structions.)		
1	Information Regarding	-				
а	List any managers of	he foundation who h	ave contributed mor	e than 2% of the total	contributions receiv	ed by the foundation
	before the close of any	tax year (but only if the	ey nave contributed	more than \$5,000). (Se	e section 507(a)(2).)	
	HAROLD & MA	RILYN MELCHER				
b	List any managers of					large portion of the
	ownership of a partner	ship or other entity) of	which the foundatio	n has a 10% or greater	ınterest.	
	NONE	0 4 1 4 0 0	O:#   O =   -	Li1- B		
2	Information Regarding	•	•	• • •		
	Check here ► X if the	ne foundation only r	nakes contributions	to preselected charita	able organizations a	nd does not accept
	unsolicited requests for organizations under oth				28 of the instruction	ns) to individuals or
			•			
а	The name, address, ar	id telephone number (	of the person to who	m applications should be	e addressed.	
	The form in which and	potions should be set	muttad and info	on and materials there	should include:	
D	The form in which apple	cations snould be sur	muleo ano iniormati	on and materials they s	SHOUIU INCIUUE:	
c	Any submission deadling	nes.				
	-					
<u></u> .			<del></del>			
	Any restrictions or lin	nitations on awards,	such as by geogra	aphical areas, charitat	ole fields, kinds of i	nstitutions, or other
	factors.					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment								
	ng the Year or Appi			<b>T</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contribution					
a Paid during the year	ĺ		1					
ATTACHMENT 12			1					
			}					
				•				
		}	1					
		1						
		l						
:				1				
				1				
				1				
				1				
				1				
Total			▶ 3a	253,442.				
b Approved for future payment								
5 Approved for fatare payment								
	[							
	ļ							
		1						
			<u> </u>					
Total	<u> </u>	· · · · · · ·	▶ 3b					

er gross amounts unless otherwise indicated		business income	Excluded by se	ction 512, 513, or 514	(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
Program service revenue.			<del>                                     </del>		the instructions j
a b			<del> </del>		
ь					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	21 050	<del></del>
Dividends and interest from securities			14	21,058.	·
Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property			<del>                                     </del>		
Net rental income or (loss) from personal property	<del>-</del>	<del> </del>	<del> </del>		
Other investment income	<del>-</del> -		18	191,695.	
Gain or (loss) from sales of assets other than inventory			1		
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory  Other revenue: a			1		
TAX REFUND		1.2			5,063
c	-				
		· · · ·			
d					····
d e					
e				212,753.	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to  Total. Add line 12, columns (b), (d), and (e)  Explain below how each activities are No.  Explain below how each activities	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns (b).  Relationship of Activities	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
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Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the According ty for which	ons) mplishment of E	xempt Purposed in column (e	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
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Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	217,816
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the No.  Explain below how each activities the accomplishment of the fo	o verify calculation to the Accordance to the Accordance ty for which undation's ex	ons) mplishment of E income is reporte cempt purposes (	xempt Purposed in column (eother than by	es ) of Part XVI-A cont	

Pa	rt XVI	Information Exempt Orga		Transfers' To a	nd Transa	ctions	and Relat	ionships With N	lonch	narit	able
1		the organization direct								Yes	No
a		nizations? sfers from the reporting f							•		1
	(1) Cash1a(1)										
		Other assets							1a(2)		
t	Other	r transactions:							-		
		ales of assets to a nonc							1b(1)		
		urchases of assets from							1b(2)		
		tental of facilities, equipm									
		leimbursement arrangem							1b(4)		
		oans or loan guarantees erformance of services of							, ,		
		ng of facilities, equipmen							i I		
		e answer to any of	•	•						faır n	——— narket
_		of the goods, other									
		in any transaction of									
			·								
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt or	rganization		cription of trans	fers, transactions, and share	ng arran	gemer	ıts
		N/A	ļ			N/A					
			<del> </del>								
—		<u> </u>	<del>  -</del>								
—				·		L				_	
		<del> </del>						·			
			-		•		<del></del> -				
_				- <del></del>							
			Í	- <u></u>							
		<u> </u>									
2a		foundation directly or				nore tax-e	exempt organi	zations described in	٦.,	_	1
		on 501(c) of the Code (oth		501(c)(3)) or in section	on 5277			L	Yes	• 🖳	No
<u>b</u>	it Ye	s," complete the following  (a) Name of organization		(h) Type of	organization	<del></del>		(c) Description of relationsh			
—–		(a) Hame of organization	<u>'                                      </u>	(5) 1) pc oi	Ciganization			(c) occumpation of telesions	<u>p</u>		
			<del></del> -	<del></del>							
		<u> </u>									
			_ <del></del> _								
	Under	penalties of perjury, I decli	are that I have ex	amined this return, incl	luding accompa	nying scheo	dules and stater	ments, and to the best of	my kno	owledg	e and
	pellel,	It is true, correct, and com	piete Deciaration	or preparer (other than	taxpayer or not	icialy) is ua	sed on all lillor	n		KIIOW	leuge
	X	1.1.1		100		<u>y 5/11/</u>	10	Y PRESIDEN	<u> </u>		
e e	St	gnature of officer or trustee				Date		Title	<del></del>		
Ĭ			n \ 4	$\circ$	Date		Check if	Preparer's in number (See			
Sign Here	er's Y	Preparer's	h	Mr. +	-   テト	1/10	self-employ	ed P page 30 of th			
S	Pald Preparer's Use Only	signature	m / /	AUM TIC	1-1			F00439	> 77	<u></u>	
	Fre Use	Firm's name (or yours if	$\frac{\text{CBIZ N}}{11440}$	1HM, LLC TOMAHAWK CRE	TEK DADE	7 <u>0</u> V		EN ▶ 34-18742	<del>0</del> 0		
	_	self-employed), address, and ZiP code	LEAWO(		TOU LWKVA		211	Phone no. 913.23	<u>/</u> 1 ∩	nn	
1			TEAMOR	יסי, ווט		00.		Phone no. 913.23	7.10		

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

OMB No 1545-0047

Employer identification number

THE HAROLD AND MAR	RILYN MELCHER FOUNDATION	43-1671354			
Organization type (check or	ne):	.t			
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion			
	501(c)(3) taxable private foundation				
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See			
General Rule					
<del></del>	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 yone contributor. Complete Parts I and II	or more (in money or			
Special Rules					
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test) and 170(b)(1)(A)(vi), and received from any one contributor, during the yea 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	r, a contribution of the greater			
the year, aggrega	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from te contributions of more than \$1,000 for use exclusively for religious, charitab ses, or the prevention of cruelty to children or animals. Complete Parts I, II, ar	le, scientific, literary, or			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
_	at is not covered by the General Rule and/or the Special Rules does not file S	•			
	ust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H PF, to certify that it does not meet the filing requirements of Schedule B (For				
For Privacy Act and Paperwork Re	duction Act Notice, see the Instructions Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)			

for Form 990, 990-EZ, or 990-PF.

Name of organization THE HAROLD AND MARILYN MELCHER FOUNDATION

Employer identification number 43-1671354

Part I	Contributors (see instructions)	
--------	---------------------------------	--

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HAROLD & MARILYN MELCHER  800 W. 47TH ST, STE 720  KANSAS CITY, MO 64112	<b>\$</b>	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

of Part II

Name of organization THE HAROLD AND MARILYN MELCHER FOUNDATION

E

mpl	loyer	ident	tifica	atio	ח ח	uml	)ei
		4	3-	16	71	35	4

r art II	Noncasti Froperty (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	13,224 SHARES CENTURYTEL COMMON STOCK	\$\$	07/07/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - -	

	NET INVESTMENT INCOME	21,058.	21,058.
- DIVIDENDS AND INTEREST FROM SECURITIES	REVENUE AND EXPENSES PER BOOKS	21,058.	21,058.
FROM			
INTEREST			TOTAL
AND			
DIVIDENDS			
PART I			
FORM 990PF, PART I	DESCRIPTION	UMBIRU & CO	
FORM	DESCE	UMBTE	

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

<del>5,</del>063.

DESCRIPTION IRS - TAX REFUND

TOTALS

5,063.

T T T
CNITALICUTA
I
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1-

CHARITABLE PURPOSES_	1,293.	1,293.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME	1,292.	1,292.
REVENUE AND EXPENSES PER BOOKS	2,585.	2,585.
		TOTALS
DESCRIPTION	CBIZ	

FEES
PROFESSIONAL
OTHER
H
PART
990PF,
FORM

NET INVESTMENT	INCOME	511.
REVENUE AND EXPENSES	PER BOOKS	1,023.
	DESCRIPTION	UMB BANK CUSTODIAL FEES

TOTALS

CHARITABLE PURPOSES 512.	
--------------------------	--

ATTACHMENT 4

EXPENSES
OTHER
- 1
н
PART
990PF,
FORM

THE HAROLD AND MARILYN MELCHER FOUNDATION

CHARITABLE PURPOSES 5.	26.
NET INVESTMENT INCOME 5.	25.
REVENUE AND EXPENSES PER BOOKS 10.	51.
	TOTALS
DESCRIPTION MISSOURI ANNUAL REPORT BANK FEES	

ATTACHMENT 6

ENDING ENDING BOOK VALUE

0

FIDELITY TREASURY

DESCRIPTION

US OBLIGATIONS TOTAL

0

ATTACHMENT 6

43-1671354

ATTACHMENT

## FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>FMV</u>	23,188. 108,630. 16,758. 37,225. 19,651. 79,740. 27,520. 18,240. 45,821. 53,712. 53,712.
ENDING BOOK VALUE	16,724. 1,651. 40,031. 13,635. 50,109. 3,814. 2,721. 13,941. 13,941. 5,417. 47,317. 1,650. 50,289.
DESCRIPTION	1,650 SHS CENTEX CORP 400 SHS BP PLC 3,000 SHS CENTURY TEL INC 700 SHS CISCO SYSTEMS INC 300 SHS CITIGROUP 1,429 SHS EAGLE MATERIALS INC 468 SHS INTEGRYS ENERGY GROUP 1,238 SHS JOHNSON & JOHNSON 746 SHS OGE CORP 300 SHS PEPSICO 2,519 SHS PFIZER 920 SHS PROCTOR & GAMBLE 828 SHS PULTE HOMES INC 2,400 SHS WELLS FARGO CAP 5.85 2,440 SHS WELLS FARGO CAP 5.85

2,434.

239

2,195

BALANCE ENDING

ADDITIONS DISPOSALS

BEGINNING

BALANCE

ACCUMULATED DEPRECIATION DETAIL

ATTACHMENT 8

2,434

2,195

		BEG	I		
I PMENT					
INVESTMENTS - LAND, BUILDINGS, EQUIPMENT		ENDING	2,434	2,434	
JENTS - LAND,	FIXED ASSET DETAIL	DISPOSALS			
INVESTA	FIXED ASS	ADDITIONS			
		BEGINNING BALANCE	2,434.	2,434.	
		METHOD/ CLASS	DDBA		
		ASSET DESCRIPTION	DEFIBRILLATOR	TOTALS	

ATTACHMENT 8 PAGE 28

V 09-5 2

77,023.

### FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

TOTAL

JANUARY 2009 INTEREST TAXABLE IN 2008
ADJUSTMENT OF INVESTMENTS TO DONATION AMOUNT 76,825.

### FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

JANUARY 2010 INTEREST TAXABLE IN 2009 ADJUSTMENT OF INVESTMENTS TO TAX BASIS

11. 386,865.

TOTAL

386,876.

ATTACHMENT 11

AND TRUSTEES

DIRECTORS,

- LIST OF OFFICERS,

PART VIII

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

> HAROLD & MARILYN MELCHER KANSAS CITY, MO 64112

DIRECTOR-FDN MANAGER

RICHARD A. MELCHER GLENCOE, IL

DIRECTOR

DIRECTOR

LAURIE ANN MELCHER-BENJAMIN CARMEL VALLEY, CA

LYNNE F. MELCHER

DIRECTOR

KANSAS CITY, MO 64112

DIRECTOR

RANDALL D. CLARK KANSAS CITY, MO 64112

DIRECTOR

KANSAS CITY, MO 64112

STEVEN N. PALMER

GRAND TOTALS

43-1671354

ATTACHMENT 12

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WAYSIDE WAIFS Kansas City, Mo	NONE	CHARITABLE 501(C)(3)	133,100
CHARLOTTE STREET FOUNDATION KANSAS CITY, MO	NONE	CHARITABLE 501(C)(3)	1,000
JEWISH FEDERATION OF GREATER KC KANSAS CITY, MO	NONE	CHARITABLE 501(C)(3)	35, 394 (J) SEE.
HARVESTERS KANSAS CITY, MO	NONE	CHARITABLE 501(C)(3)	1,500
WRITERS' THEATRE CHICAGO, IL	NONE	CHARITABLE 501(C)(3)	2,500
LOW COST SPAY & NEUTER SERVICE INC BLUE SPRINGS, MO	NONE	CHARITABLE 501(C)(3)	10,000
DOCTORS WITHOUT BORDERS NEW YORK, NY	NONE	CHARITABLE 501(C)(3)	0005
THE GREATER CHICAGO FOOD DEPOSITORY CHICAGO, IL	NONE	CHARITABLE 501(C)(3)	1,750
COMMUNITIES OF SCHOOLS IN CHICAGO CHICAGO, IL	NONE	CHARITABLE 501(C)(3)	750.
COMMUNITY PARTNERSHIP FOR YOUTH DEL RAY OAKS, CA	NONE	CHARITABLE 501(C)(3)	1,000

43-1671354

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

NONE

NONE

MEDICAL STUDENTS FOR CHOICE

PHILADELPHIA, PA

ANIMAL HAVEN

NONE

CAMP FOR ALL KIDS

CARMEL, CA SCHOOLS 3

ST LOUIS, MO

NONE

PARTNERS IN HEALTH BOSTON, MA

NONE

NONE

NONE

NONE

NONE

THE NELSON ATKINS MUSEUM OF ART

KANSAS CITY, MO

THE NELSON ATKINS MUSEUM OF ART

THE HARLEM CHILDREN'S ZONE KANSAS CITY, MO

NEW YORK, NY

UNITE FOR SIGHT NEW HAVEN, CT

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

NONE

THE PANETTA INSTITUTE FOR PUBLIC POLICY

SEASIDE, CA

RECIPIENT NAME AND ADDRESS

ATTACHMENT 12 (CONT'D)

2,500 AMOUNT PURPOSE OF GRANT OR CONTRIBUTION CHARITABLE 501(C)(3)

CHARITABLE 501(C)(3)

2,500

CHARITABLE 501(C)(3)

500,

200

5,000

CHARITABLE 501(C)(3)

CHARITABLE 501(C)(3)

CHARITABLE 501(C)(3)

CHARITABLE 501(C)(3)

1,000.

200

CHARITABLE 501(C)(3)

50,448. B F. 34

CHARITABLE 501(C)(3)

1,000

CHARITABLE 501(C)(3)

1,000

ATTACHMENT 12

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

		PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE 501(C)(3)	CHARITABLE 501(C)(3)
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND	FOUNDATION STATUS OF RECIPIENT	NONE	NONE
		RECIPIENT NAME AND ADDRESS	THE CHILDREN'S HEALTH FUND NEW YORK, NY	CHICAGO FOUNDATION FOR WOMEN CHICAGO, IL

500.

AMOUNT

200

TOTAL CONTRIBUTIONS PAID

253,442

O 1,200 SHARES CENTURY TEL INC. PAID 1115109 @ \$29,495

1,700 SHARES CENTURY TEL INC PAID 7/8/09 @ \$ 29.675 <u>@</u>

ATTACHMENT 12

68092Q A10P 4/21/2010

ATTACHMENT 12 (CONT'D)

### SCHEDULE'D (Form 1041)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

	THE HAROLD AND MARILYN MELCH		ON		43-16713		on number
	e: Form 5227 filers need to complete only F		Hald One Ve				<del></del>
Pa	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a					Wish doctoria		oustract (c) non (c)
						-	
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b			1b	
2	Short-term capital gain or (loss) from For	ms 4684, 6252,	6781, and 8824	<b>.</b>		2	
3 4	Net short-term gain or (loss) from partner Short-term capital loss carryover. Enter the					3	
4	Carryover Worksheet				(	4	(
5	Net short-term gain or (loss). Combine for column (3) on the back				1	5	
Pa	t II Long-Term Capital Gains and Loss	es - Assets Held	More Than One	e Year	·		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales pnce	(e) Cost or other to (see page 4 of to instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
							<del></del>
				<u> </u>			
							<del></del>
b	Enter the long-term gain or (loss), if any, f	rom Schedule D-	1, line 6b	• • • • • • • • • • • • • • • • • • • •		6b	191,695.
7	Long-term capital gain or (loss) from Forr	ns 2439, 4684, 6	3252, 6781, and	3 8824		7	
8	Net long-term gain or (loss) from partners	hips, S corporati	ons, and other e	states or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter the Carryover Worksheet	·			[	11	()
12	Net long-term gain or (loss). Combine line column (3) on the back					12	191,695.
For I	Paperwork Reduction Act Notice, see the Instr					edule	D (Form 1041) 2009

_	dule D (Form 1041) 2009	(4) Donafisiana	(2) [01-1-1-	Page
Par	Summary of Parts I and II	(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
	Caution: Read the instructions before completing this part.	(see page 3)	- Or trust s	<del></del>
13	Net short-term gain or (loss)			
14	Net long-term gain or (loss):			191,695
a	Total for year			
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
	28% rate gain			191,695
15 Note	Total net gain or (loss). Combine lines 13 and 14a ▶ 15	T Part I line (a) If line	2 142 22d 15 22lump /	<del></del>
to Pa	rt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Part IV a	and the Capital Loss Can	ryover Worksheet, as no	z), are net gains, go ecessary
Par	t IV Capital Loss Limitation		<del></del>	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line		1 1.	
a Note	The loss on line 15, column (3) or b \$3,000		16 (	lote the Capital Less
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryover.	e 22 (OF FORM 990-1, N	ie 34), is a ioss, compi	ete the Capital Loss
Par	Tax Computation Using Maximum Capital Gains Rates			
	1041 filers. Complete this part only if both lines 14a and 15 in column (2	) are gains, or an am	ount is entered in P	art I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than			
	ion: Skip this part and complete the worksheet on page 8 of the instructions i	f.		
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.			
	990-T trusts. Complete this part only if both lines 14a and 15 are gain			
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and r line 14b, col. (2) or line 14c, col. (2) is more than zero.	complete the works	neet on page 8 of t	ne instructions if
		····		~
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17		
18	Enter the smaller of line 14a or 15 in column (2)	] ]	/	
	but not less than zero	<b>⊣</b> .l		
19	Enter the estate's or trust's qualified dividends	(3)		
	from Form 1041, line 2b(2) (or enter the qualified			
	dividends included in income in Part I of Form 990-T) 19		1 1	
20	Add lines 18 and 19			
21	If the estate or trust is filing Form 4952, enter the		ļ	
	amount from line 4g; otherwise, enter -0 ▶ 21			
22	Subtract line 21 from line 20. If zero or less, enter -0	. 22		
23	Subtract line 22 from line 17. If zero or less, enter -0-	. 23		
24	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24?			
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.			
	No. Enter the amount from line 23	. 25		
26	Subtract line 25 from line 24	. 26		
27	Are the amounts on lines 22 and 26 the same?			
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
	<del>_</del>			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
29	Subtract line 28 from line 27	29		
	Multiply line 29 by 15% (.15)		30	
	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Sche		1 Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)			
	,			
32	Add lines 30 and 31		32	
	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Sche			
	(see the Schedule Ginstructions in the instructions for Form 1041)		33	

Schedule D (Form 1041) 2009

34

G, line 1a (or Form 990-T, line 36) . . . . . . . . . . .

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

Name, of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side THE HAROLD AND MARILYN MELCHER FOUNDATION

Employer identification number 43-1671354

Part II Long-Term Capital Gains a  (a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, ут )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
SEE ATTACHED LIST			244,209.	52,514.	191,695
					<del>, , , <u>, , , , , , , , , , , , , , , , </u></del>
<u> </u>					
				·	
		<del></del>			
		-1			
					<del></del>
		·			<del></del>
		<del> </del>			
	1				191,695.

### Form 4:562

Internal Revenue Service

Department of the Treasury

**Depreciation and Amortization** 

•				
(Including	Information	on Li	isted P	roperty)

See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 67

Name(s) shown on return THE HAROLD AND MARILYN MELCHER FOUNDATION 43-1671354

Identifying number

Business or activity to which this form relates GENERAL DEPRECIATION Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount. See the instructions for a higher limit for certain businesses Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions (c) Elected cost 6 (a) Description of property (b) Cost (business use only) Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 . . . . 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11. 12 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 . . . . ▶ Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 239 Part III MACRS Depreciation (Do not include listed property ) (See instructions.) 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (a) Classification of property placed in (business/investment use (f) Method (g) Depreciation deduction only - see instructions) service 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. ΜМ S/L h Residential rental мм S/I 27.5 yrs. property ΜM S/L 39 yrs. i Nonresidential real ММ S/L property Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs. S/L b 12-year c 40-year 40 yrs. ММ S/L Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 239. and on the appropriate lines of your return. Partnerships and S corporations - see instructions. 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

			• •	1 •	43-167	1354
Form 4562 (2009)		4 1 A				Page 2
		e automobiles, certainment, recreation, or a		, cellular telepho	nes, certain co	mputers, and
		which you are using the of Section A, all of Section			ase expense, com	plete <b>only</b> 24a,
Section	A - Depreciation and	Other Information (Cau	ition: See the instru	ctions for limits for p	assenger automol	oiles.)
24a Do you have ev	idence to support the bu	siness/investment use claime	d? Yes No	24b If "Yes," is the	evidence written?	Yes No
(a) Type of property (lix vehicles first)	(b)	(c) Business/ investment use percentage  (d) Cost or other	(e) Basis for depreciation	I Recovery I Method		(i) Elected section 179 cost
year and used m	nore than 50% in a qualifi	alified listed property place ed business use (see instruct	-	ľ	25	
26 Property used n	nore than 50% in a qualific	ed business use:				
		%				
		%		<b> </b>		1
		%				
27 Property used 5	0% or less in a qualified b	usiness use:		<u></u>	· ·	
		%		S/L -		
		%		S/L -		<b>ヿ</b> ゙゚゛゛゛
		%		S/L -		7
28 Add amounts in	column (h), lines 25 thre	ough 27. Enter here and on l	ine 21, page 1		28	
		r here and on line 7, page 1			29	
		Section B - Inform	nation on Use of Ve	bicles		

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	Total business/investment miles driven during the year (do not include commuting miles)	Veh	a) ide 1		b) rcle 2		c) icle 3		d) icle 4		e) de 5		f) cle 6
31	Total commuting miles driven during the year												
32	Total other personal (noncommuting) miles driven												
33	Total miles driven during the year. Add							}					
	lines 30 through 32							ļ					_
34	Was the vehicle available for personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty hours?		<u></u>		<u> </u>								
35	Was the vehicle used primarily by a												
	more than 5% owner or related person?												•
36	ls another vehicle available for personal												
	use?												

### Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by	Yes	No
٠,	your employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees?		
	See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about the		
	use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Pa	rt VI Amortization					
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization penod or percentage	(f) Amortization for this year
42	Amortization of costs that begins of	during your 2009 tax ye	ear (see instructions):	·		
43	Amortization of costs that began bef	ore your 2009 tax year			43	
44	Total. Add amounts in column (f). Se	ee the instructions for whe	re to report		44	
TEA						4500

9X2310 1 000

Form 4562 (2009)

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THE HAROLD AND MARILYN MELCHER FOUNDATION

43-1671354

Description of Property			·											
GENERAL DEPRECIATION														
DEPRECIATION														,
Asset description	Date placed in service	Unadjusted Cost or basis	Bus.	179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated / depreciation	Ending Accumulated depreciation	Me-	, iře	ACRS	MA Current-year CRS 179 class expense		Current-year depreciation
DEFIBRILLATOR	11/19/2004	$\perp$				!!	2, 195	2,434	DDBA	2		L_L_		239
												_		
												-		*
									-				-	
														•
													+	
									-					
Less: Retired Assets									,		<b>-</b>   }			
Subtotals		2,434				2,434.	2,195	2,434					$\dashv$	239
בופנים ו וסספונא													-	
									-					
												-	-	
Less: Retired Assets											].,			
Subtotals			· <del>···</del>							1	s n			
TOTALS		2,434.				2,434	2,195.	2,434						239
Asset description	Date placed in service	Cost or basis					Accumulated ,	Ending Accumulated	Code	٩	-			Current-year
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									+	<u>,</u>	,			
										T	,		<u> </u>	
			<del></del>							Ì				
TOTALS										`				
*Assets Retired														
9X9024 1 000 680920 810B 472172010		M4 CE 00 6												

PAGE 40

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68092Q A10P 4/21/2010

THE HAROLD AND MARILYN MELCHER FOUNDATION 43-167
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u> </u>	APITAL GAI	NS AND LC	199E2 LOL	IVI	ENT INCOM	<u>                                     </u>		
Kınd of F	Property					0.0	Date acquired	Date sold
Gross sale	Depreciation allowed/	Cost or	FMV	Adj. basis	Excess of	Н	Gain	<del></del>
orice less	allowed/	other	as of	Adj. basis as of 12/31/69	FMV over adj basis	$ \cdot $	or (loss)	
expenses of sale	allowabje	basis	12/31/69	1.2(3)(69	I aul nasis	Ħ	(1055)	· · · · · · · · · · · · · · · · · · ·
		SEE ATTACHE				Р	VAR	VAF
		PROPERTY TY	PE: SECURIT	IES		$\  \ $		
244,209.		52,514.					191,695.	
						$\  \ $		
OTAL GAIN(L	oss)					11	191,695.	
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## 2009 Tax Information Statement

Account Number: 105016
Recipient's Tax ID number: XX-XXX1354
Payer's Federal ID number: 43-6295832

Page 7 of 13
Recipient's Name and Address Ref: LMN001
HAROLD & MARILYN MELCHER
FOUNDATION
800 W 47TH ST STE 720
KANSAS CITY, MO 64112-1249

P. O. BOX 419692 M/S 1020305 KANSAS CITY, MO 64141-6692

**UMB ASSET MANAGEMENT** 

Payer's Name and Address UMBTRU & CO

# 2009 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS are Gross Proceeds less commissions and option premiums.

Federal . Income in Tax ss Withheld	(Box 4)	00.00	000 92	000 50.	74 0 00	000 80	92 000	.56 0 00
Net Gain or Loss		-32,677.99	25,342 76	121,422.05	71,307 74	6,292 08	7 92	191,694.56
Cost or other Basis		39,289.81	3,941 48	7,105 54	1,100 39	1,075 23	1 49	52,513 94
Stocks Bonds, etc.	(Box 2)	6,611.82	29,284 24	128,527 59	72,408.13	7,367 31	9,41	244,208.50
Date of Sale	(Box 1a)	06/03/2009	07/08/2009	07/22/2009	12/16/2009	11/20/2000 06/03/2009	08/18/2009	
Date Acquired		VARIOUS	VARIOUS	VARIOUS	09/13/1990	11/20/2000	11/06/1987	
Description	(Box 7)	ed on 1099-B CENTEX CORP	CENTURYTEL INC	CENTURYTEL INC	CENTURYTEL INC	PFIZER INC	PULTE HOMES INC	Total Long Term 15% Sales Reported on 1099-B
CUSIP	(Box 1b)	Long Term 15% Sales Reported on 1099-B 800.0000 152312104 CENTEX CC	1000 0000 156700106	4324 0000 156700106	2000 0000 156700106	500.0000 717081103	7500 745867101	erm 15% Sales R
Number of shares	(Box 5)	Long Term 15 800.0000	1000 0000	4324 0000	2000 0000	500.0000	7500	Total Long Te

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.