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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Interval Revenue Service Treated as a Private Foundation

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

2nnq

	For c	alenda	ir year 2009, or tax year	r beginning		, and ending		
			I that apply	Initial return	Initial return of a f	ormer public charity	Final retur	n
				Amended return	Address char	ige	Name change	
	Use	the IR	S Name of foundation				A Employer identificatio	n number
		abel	TIME EXMIT	V EOIMIDAMIO	N TNC		47-0785813	2
	_	erwise orint	' 	Y FOUNDATIO D box number if mail is not de		Room/sulte		
		type.	PO BOX 187		avered to street address,	7.001773410	B Telephone number	-4165
		Specif					C If exemption application is	
	Instr	uction	S OGALLALA,				D 1 Foreign organization	
	н с	heck ty		X Section 501(c)(3) ex	emot private foundation		Foreign organizations m check here and attach c	neeting the 85% test,
	ïŤ	_ ′	on 4947(a)(1) nonexem	` <u>`</u>	Other taxable private found	ation		
	I Fa		et value of all assets at e			Accrual	E If private foundation structure under section 507(b)(1	
			rt II, col. (c), line 16)	· —	her (specify)		_ F If the foundation is in a	
	•	\$	1,193		mn (d) must be on cash	basis)	under section 507(b)(1	_
	Pa	rt I	Analysis of Revenue an	d Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable purposes
			(The total of amounts in colur necessanly equal the amount	ts in column (a))	expenses per books	income	income	(cash basis only)
		1 0	ontributions, gifts, grant	s, etc., received	20,500.		N/A	
		_		n is not required to attach Sch. B				
		3 c	nterest on savings and tempo ash investments	orary	15,870.			STATEMENT 1
		4 D	ividends and interest fro	m securities	26,232.			STATEMENT 2
6			iross rents	24 572	67,688.	67,688	3 .	STATEMENT 3 STATEMENT 4
			et rental income or (loss)	24,572.	<4,203.	<u></u>		STATEMENT 4
0	ne	ba N	let gain or (loss) from sale of a cross sales price for all ssets on line 6a	20,000 .	\4,ZU3.			- 10-63
a	evenue		ssets on line 6a	 		(REUL REUL	V
May 20200	Re		let short-term capital gail					- Igi
3			ncome modifications	"			S MAY 1	7 2010
		. G	iross sales less returns				5	
SCANNED			ess Cost of goods sold			, , , , , , , , , , , , , , , , , , , ,	0001	TALLIT
\$			cross profit or (loss)				UGU	
3		11 (Other Income					
\mathcal{Q}		12 T	otal Add lines 1 through	h 11	126,087.			
(M)		13 c	Compensation of officers, dire	ectors, trustees, etc	6,000.	2,400	0.	3,600.
		14 C	Other employee salaries a	ind wages		-		
	s		'ension plans, employee		500			
	uses		egal fees	STMT 5	500.		2.	0.
	Kpe		accounting fees	STMT 6	2,950.		0.	0.
	E E		Other professional fees					
	ativ		nterest axes	STMT 7	2,085.	1,236	5.	0.
	stra		axes Depreciation and depletio		9,878.		0.	
	and Administrative Expen	Į.	рергестатот апо бергето Оссирансу	11	53,210.		0.	0.
	Adr		ravel, conferences, and i	meetings	5,037.		5.	0.
	P		Printing and publications	=				
	g		Other expenses	STMT 8	46,764.	41,880	0.	0.
	Operating		otal operating and adm	inistrative				
	per	e	xpenses. Add lines 13 t	hrough 23	126,424.		5.	3,600.
	0	25 (Contributions, gifts, grant	ts paid	46,142.	,		46,142.
		26 T	otal expenses and disb	ursements.	150 565			40.740
			Add lines 24 and 25		172,566.	45,516	b.	49,742.
			Subtract line 26 from line		16 170			
		1	xcess of revenue over expen		<46,479.	64,274	<u>,</u>	
		l	let investment income @ Adjusted net income @in			04,27	N/A	
			CONTRACTOR OF THE COURSE OF THE	MINIOUS PRIPE - (b-)		i.	. 41/44	-

Page	2

Ralance Sheets Attached schedules and amounts in the description	beginning or year	Ellu oi y	cai
Part II .Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
'1 Cash - non-interest-bearing	50,896.	14,705.	14,705. 847,678.
2 Savings and temporary cash investments	683,394.	847,678.	847,6 <u>78.</u>
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	289,261.	277,576.	263,697.
7 Other notes and loans receivable	207/2021		
		1	
Less allowance for doubtful accounts			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 110 Investments - ILS and state government obligations			
9 Prepaid expenses and deferred charges			
108 investments - 0.5 and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis Less accumulated depreciation 91,797. 62,500.	22 25 5	20.005	00 007
Less accumulated depreciation 62,500.	29,956.	29,297.	<u> 29,297.</u>
12 Investments - mortgage loans			
13 Investments - other STMT 9	34,999.	34,999.	35,500.
14 Land, buildings, and equipment basis			
Less accumulated depreciation			
15 Other assets (describe ► STATEMENT 10)	3,027.	3,169.	2,500.
16 Total assets (to be completed by all filers)	1,091,533.	1,207,424.	1,193,377.
17 Accounts payable and accrued expenses	490.	605.	
18 Grants payable			
20 Loans from officers, directors, trustees, and other disqualified persons			
19 Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable	37,389.	37,389.	
22 Other liabilities (describe ► STATEMENT 11)	245,082.	245,082.	
Other habilities (describe		210,0021	
22 Total liabilities (add lines 17 through 22)	282,961.	283,076.	
23 Total liabilities (add lines 17 through 22)	202/301.	203/0700	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
8 24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	808,572.	924,348.	
30 Total net assets or fund balances	808,572.	924,348.	
31 Total liabilities and net assets/fund balances	1,091,533.	1,207,424.	
Part III Analysis of Changes in Net Assets or Fund Ba	lances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	.0	· · · · · · · · · · · · · · · · · · ·	
(must agree with end-of-year figure reported on prior year's return)	=	1	808,572.
2 Enter amount from Part I, line 27a		2	<46,479.
3 Other increases not included in line 2 (itemize) ► UNREALIZED G	ATN ON THUEST		162,255.
- 414	TITL OIL THANDI	4	924,348.
		5	0.
5 Decreases not included in line 2 (itemize)	uma (h) lina 20	6	924,348.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	urini (0), iiile 30		Form 990-PF (2009)

Part IV Capital Gains a	nd Losses for Tax on In	vestment	t Income					
	be the kind(s) of property sold (e g ehouse, or common stock, 200 shs			l P	How acquired - Purchase - Donation	(c) Date a (mo , d		(d) Date sold (mo , day, yr)
1a								
b SEE ATTACHED	STATEMENT			ļ				
<u> </u>				-				
<u>d</u>				┼				
<u>e</u>	(f) Decreesting allowed	(=) (0==	at an ather bear			(h) C		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (
<u>a</u>								
<u>b</u>		<u> </u>						
<u>C</u>								
30,000			24 20	12				<4,203.
e 20,000.	gara in column (h) and award but	the foundation	24,20	13.		0 (0	-1 (h)	
Complete only for assets snowing	gain in column (h) and owned by						ol (h) gain iot less thar	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				(from col (
a								
b								
С								
d								-1 202
е !								<4,203.
2 Capital gain net income or (net capi	If gain, also enter stal loss) { If (loss), enter -0	r in Part I, line - in Part I, line	7 7	}	2			<4,203.
3 Net short-term capital gain or (loss)								
If gain, also enter in Part I, line 8, co		(0)		プト				
If (loss), enter -0- in Part I, line 8					3		N/A	
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estment Inc	ome		
(For optional use by domestic private f	oundations subject to the section 4	4940(a) tax on	i net investment in	ncome	3)			
If section 4940(d)(2) applies, leave this	s part blank							
, ,, , ,,	•							
Was the foundation liable for the section			•	riod?				Yes X No
If "Yes," the foundation does not qualify								
1 Enter the appropriate amount in ea	1	uctions before	making any entire			-		(d)
Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) neba	ritable-use assets			oùtion ratio
Calendar year (or tax year beginning	<i>,,</i> 1	4,515.			,036,465			ided by col (c)) • 091190
2008		2,545.			,030,403 ,025,017			.129310
2007		$\frac{2,343.}{1,752.}$			701,038			.073822
2005		2,065.			901,197			.102159
2004		9,992.			,099,751		**	.054551
2004		<i>5 5 5 </i>			, 033, 131			
2 Total of line 1, column (d)						2		.451032
3 Average distribution ratio for the 5-	wear hase neriod - divide the total i	on line 2 by 5	or by the number	r of ve	ars			<u> </u>
the foundation has been in existence		on mio 2 by 0,	or by the number	. U. yu		3		.090206
	, , , , , , , , , , , , , , , , , , ,							
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X.	line 5				4		785,831.
								• •
5 Multiply line 4 by line 3						5		70,887.
						-		
6 Enter 1% of net investment income	(1% of Part I, line 27b)				_	6		643.
	·							
7 Add lines 5 and 6						7		71,530.
8 Enter qualifying distributions from						8		49,742.
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line	1b, and comp	plete that part usin	ng a 1	% tax rate			

	990-PF (2009) LUTE FAMILY FOUNDATION, INC.			<u>0785</u>			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	0(e), or 4	948 -	see ii	nstru	ctior	<u>1S)</u>
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 letter if necessary-see instructions	;)				_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	}	1			1,2	85.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (I) J					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0.
	Add lines 1 and 2		3			1,2	85.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			1,2	85.
	Credits/Payments						
	2009 estimated tax payments and 2008 overpayment credited to 2009						
	Exempt foreign organizations - tax withheld at source						
		_					
			7				0 -
_	Total credits and payments Add lines 6a through 6d						36.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8	 -		1,3	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		_	1,3	<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of the to de decards is a second s	efunded ►	11				
	rt VII-A Statements Regarding Activities					Yes	Na
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	e or intervene	IN.			res	
	any political campaign?				1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for				1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	ials publishe	ed or				
	distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?				1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	_					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	0.	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on for	ndation					
	managers ► \$ 0 •						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of in	corporation,	or	~	,	,	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
_	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	with the stat	e law				
	remain in the governing instrument?				6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	Х	
•	If "Yes," complete Part II, col (c), and Part XV.				<u> </u>		
Ω-	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE						
04	Letter the states to which the roundation reports of with which it is registered (see instructions)						
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des	anate)					
D		gnato/			8b	х	1
•	of each state as required by General Instruction G? If "No," attach explanation	2/1\/5\ for cal	ender		- 55	ļ -	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	E(I)(O) TOT GAI	unual		9	Ì	х
4.0	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	44			10		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses					<u> </u>		

orm	990-PF(2009) LUTE FAMILY FOUNDATION, INC.	47-0785	813	Page 5
	rt VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			1
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?		12	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	N/A	13	
	Website address ► WWW.MEGAVISION.COM/LFF	<u> </u>		
14	The books are in care of ▶ RICHARD M. BOURQUE Telepho			-4165
	Located at ▶ PO BOX 187, OGALLALA, NE	ZIP+4 ▶69	153	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			, ▶ ∟∟
	and enter the amount of tax-exempt interest received or accrued during the year	15	N/	<u>A</u>
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	Yes X No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	Yes X No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		1b	X
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗀	[
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corre	cted		
	before the first day of the tax year beginning in 2009?		10	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating fou	ndation	1	
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s)	beginning		
	before 2009?	Yes X No		
	If "Yes," list the years \blacktriangleright	_		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" are	nd attach		
	statement - see instructions)	N/A	2b	
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	Yes X No		
t	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified pe			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sch	edule C,		
	Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3b	
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	purpose that		
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		46	X

4b X Form **990-PF** (2009)

Form 990-PF (2009) LUTE FAMILY FOUNDATION,			<u>47-07858</u>	<u>13</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955), of		ectly,			
any voter registration drive?			es X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y£	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?	or daddawarian parposoo, or .		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described i				
section 53 4945 or in a current notice regarding disaster assistance (see instru		riogalationo	N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check h			▶ □	-	
c. If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?		I/A □ Y€	es 🗀 No		
		1/ 44 16	.3 110		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?		18	ואו באַ אי	6b	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal denetit contract?		-	011	
If "Yes" to 6b, file Form 8870.	h. H A		es X No	l	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	·······.	7b	
b If yes, did the foundation receive any proceeds or have any net income attribut				/0	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higni	y		
List all officers, directors, trustees, foundation managers and their	compensation				
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	le') Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acco	ount, other
DICUADO M BOUDOUE	to position DIRECTOR/MANA	enter -0-)	compensation	all	lowances
RICHARD M. BOURQUE 115 SPYGLASS CIRCLE	DIRECTOR/MANA	GER			
·	15.00	0.	0.		0.
OGALLALA, NE 69153	DIRECTOR	· · · · ·		├	
BLAKE EDWARDS	DIRECTOR			ļ	
711 EAST 1ST STREET	1 00	0.	0.		0.
OGALLALA, NE 69153	1.00 DIRECTOR	<u></u>	<u> </u>	 	<u></u>
	DIRECTOR				
711 EAST 1ST STREET	1 00		0.		Λ
OGALLALA, NE 69153	1.00	0.	0.	 	0.
	_				
	_				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		<u> </u>	
2 Compensation of tive nighest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	le') Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	ount, other
NOVE	devoted to position		compensation	all	lowances
NONE	1			ľ	
				<u> </u>	
	-				
		 		 	
	-				
				 	
	4		1		
					
	-				
	L		L	<u></u>	
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica	Information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers product	ed, etc	Expenses
1 N/A		
2		
2		
3		
	· -	
4		
		·
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions	-	
3		

Total. Add lines 1 through 3

Р	art X - Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	722,934. 18,920. 339,019.
b	Average of monthly cash balances	1b	18,920.
C	Fair market value of all other assets	10	339,019.
d	Total (add lines 1a, b, and c)	1d	1,080,873.
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	283,075.
3	Subtract line 2 from line 1d	3	797,798.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,967.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	785,831.
6	Minimum investment return. Enter 5% of line 5	6	39,292.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	id certain	
1	Minimum investment return from Part X, line 6	1	39,292.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
	Add lines 2a and 2b	2c	1,285.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	38,007.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	38,007.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	38,007.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
3	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	49,742.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	49,742.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,742.
	Note: The amount on line 6 will be used in Part V, column (h), in subsequent years when calculating whether the foundation	auglifiec fo	or the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7.				38,007.
line 7				30,007.
Undistributed Income, if any, as of the end of 2009 a Enter amount for 2008 only			0.	
b Total for prior years		······································	0 •	········
g rotarior prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 7,642.				
b From 2005 47,005.				
c From 2006 16,700.				
d From 2007 95,846.				
e From 2008 45,072.				
f Total of lines 3a through e	212,265.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ▶\$ 49,742.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	,	0.		· ,,
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	11 705			38,007.
e Remaining amount distributed out of corpus	11,735.	***************************************		
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	77			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	224,000.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
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	0			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	7 642			
not applied on line 5 or line 7	7,642.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	216,358.			
10 Analysis of line 9	210/3301			
a Excess from 2005 47,005.				
b Excess from 2006 16,700.				
c Excess from 2007 95,846.				
d Excess from 2008 45,072.				
e Excess from 2009 11,735.				
				Form 000-DE (2000)

art XIV Private Operating For a If the foundation has received a ruling or	oundations (see in				
a If the foundation has received a ruling or				N/A	
foundation, and the ruling is effective for			▶ └	7.0.00/00 [7]	0.40(.)(5)
b Check box to indicate whether the foundation		ing foundation described		4942(j)(3) or 4	942(j)(5)
a Enter the lesser of the adjusted net	Tax year	(h) 2009	Prior 3 years	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(11) 2000	(6) 10(4)
investment return from Part X for		<u> </u>			
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities		•			1
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon	· • · • • · • · • · • · • · • · • · • ·				
a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
art XV Supplementary Informat any time during the			if the foundation	on had \$5,000 or m	ore in assets
Information Regarding Foundation	n Managers:				
a List any managers of the foundation who year (but only if they have contributed m			ntributions received by t	he foundation before the cl	ose of any tax
ONE					
b List any managers of the foundation who other entity) of which the foundation has			n (or an equally large po	rtion of the ownership of a	partnership or
ONE					
Information Regarding Contribution Check here if the foundation of the foundation of the foundation makes after a rept. etc. //	nly makes contributions	to preselected charitable	e organizations and doe		
the foundation makes gifts, grants, etc. (, complete items za, u, c, ai	10 0
a The name, address, and telephone numb	per of the person to wh	om applications should t	e addressed		
EE STATEMENT 12 b The form in which applications should b	e submitted and inform	ation and materials they	should include		· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines	****				
d Any restrictions or limitations on awards	s, such as by geographi	cal areas, charitable field	s, kinds of institutions	or other factors	

923601 02-02-10

Form **990-PF** (2009)

- Capple Hental y Information				1
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	·	·
a Paid during the year				
]		ļ
		[
		1		ĺ
		}		
		}		į
SEE STATEMENT 13			· · · · · · · · · · · · · · · · · · ·	
Total		1	▶ 3a	46,142.
Approved for future payment		}		
NONE				
NONE				
]		1
]]
		[
Total		<u> </u>	▶ 3b	0.
(UIO)			- 30	

Part XVI-A Analysis of Income-Producing Activities

	Unrelate	d business income	Excluded	1 by section 512, 513, or 514	(-)
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code	741100111	
a			 		 -
b			+		
d			1		
d			 -		
e	_		+ + +		
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	15,870.	
Dividends and interest from securities			14	15,870. 26,232.	
5 Net rental income or (loss) from real estate					
a Debt-financed property		***************************************			
b Not debt-financed property			16	24,572.	
6 Net rental income or (loss) from personal			- 		
property					
7 Other investment income					
B Gain or (loss) from sales of assets other				<u> </u>	
than inventory			18	<4,203.	•
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
c					
d					
е					
2 Subtotal Add columns (b), (d), and (e)		0		62,471.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	62,471
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acco				ulishment of
the foundation's exempt purposes (other th					
	-				
			·		

For	m 990-l	PF (2009) LUTE	FAMILY FOUNDA	MOIT!	INC				<u>47-0</u>	<u> 78581</u>	3 P	age_13
P	art X	Information Re Exempt Organ	egarding Transfers ' nizations	To and T	ransaction	ns and	Relati	onships Wit	h Nond	charitat	le	
1	• Did th	ie organization directly or indi	rectly engage in any of the fol	llowing with a	any other organ	ızatıon d	escribed in	section 501(c) o	f		Yes	No
	the C	ode (other than section 501(c	c)(3) organizations) or in section	on 527, relat	ing to political o	organizat	ions?					
á			lation to a noncharitable exem		· ·							
	(1) (1a(1)	Х
	, ,	Other assets								1a(Х
		transactions									1	
		sales of assets to a noncharita	ible exempt organization							1b(nÌ	Х
			oncharitable exempt organizati	ion						1b(X
		Rental of facilities, equipment,	• •	1011						1b(X
	,	Reimbursement arrangements								1b(X
		oans or loan guarantees.	1							1b(X
		~	ambarahia ar fuadraisina aalu	outations						1b(X
			embership or fundraising solic								1	X
		=	ailing lists, other assets, or pai	-				face and the book of the	-646	10	'	Λ
(or se	vices given by the reporting f	"Yes," complete the following foundation of the foundation ri other assets, or services rece	eceived less		_			-			
(a)	Line no	(b) Amount involved	(c) Name of nonchar	ritable exemp	ot organization		(d) Desc	nption of transfers, t	ransactions	, and sharing	arrangem	ents
			N/	'A						_		
			ļ									
		·		•								
			<u> </u>									
							•				·	
					· · ·	- +						
			 									
	ın sec	•	thy affiliated with, or related to er than section 501(c)(3)) or in redule		•	rganizatio	ons describ	ped		Ye	s X	☐ No
		(a) Name of org	janization	(b) Ty	pe of organizat	tion		(c) Descripti	on of relat	tionship		,
		N/A										
										,		
											-	
			have examined this return, including er than taxpayer or fiduciary) is bas	ed on all inform	nation of which pre	eparer has	any knowled	ige			rrect,	
ارو	=			9	05-12-2	00		ECTOR/MA	MAGE.	ĸ		
Ę	SI	goeture of officer or trustee	}		Date	1-1-	Title	Oha-1-4			. 6. 6	mhc-
Sign Here	Paid Preparer's Use Only	Preparer's signature	h /Sar-	the	PA	Date	1210	Check if self-employed	^P '	reparer's ider	itifying nui	nber
ָ נט	a a o	Firm's name (or young DANA	F COLE & COM	IPANY,	LLP			EIN >				
	rep Jse	if self-employed), 418	N SPRUCE, PO					EIIV F				
	ر م	address, and ZIP code OGAI	LALA, NE 6915					Phone no	(3)	08) 2	84-3	777
_		<u> </u>						1 . 110110 110				<u>_</u>

Form **990-PF** (2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization **Employer identification number** 47-0785813 LUTE FAMILY FOUNDATION, INC. Organization type (check one): Section: Filers of: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively ▶ \$ religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

LUTE FAMILY FOUNDATION, INC.

47-0785813

Contributors (see instructions)	-	
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
HEARTLAND PHILANTHROPY, INC. PO BOX 187 OGALLALA, NE 69153	\$\$	Person X Payroll
(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)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(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)
(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)
(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)
	Name, address, and ZIP + 4 HEARTLAND PHILANTHROPY, INC. PO BOX 187 OGALLALA, NE 69153 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4	Name, address, and ZIP + 4 Aggregate contributions

P	art IV Capital Gains and Los	ses for Tax on Investment Income				
	(a) List and 2-story br	describe the kind(s) of property sol ick warehouse, or common stock, 2	d, e g , real estate, 00 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	259.909 SH INC	OME FUND OF AMER	ICA FUND A			11/30/09
b	174.978 SH AME	RICAN MUTUAL FUN	D A			11/30/09
		DAMENTAL INVESTO				11/30/09
ď	83.264 SH CAPI'	TAL INCOME BUILD	ER FUND A			11/30/09
е		ITAL WORLD GROWT				11/30/09
f						
9						-
<u>h</u>						
1						
_						
t_ k						
- -						
	 			 		
				- 		
0		· · · · · · .		 		
<u> </u>		(f) Depreciation allowed	(g) Cost or other basis) Gain or (loss)	
	(e) Gross sales price	(or allowable)	plus expense of sale	(e) r	lus (f) minus (g)	
	4,000.	·	4,691.			<691.>
<u>.</u> _	4,000.		4,755.			<755.>
<u>с</u>	4,000.		5,176.			<1,176.>
<u>-</u> _	4,000.		4,556.			<556.>
<u>u</u>	4,000.		5,025.			<1,025.>
f_	1,000.		3,023.			11/023.
<u>g</u>				·		
<u>h</u> _						
<u>+</u>						
1_						
<u>k</u> _						
1_						
<u>m</u>						
<u>n</u> _						
	Complete only for secrete chayer	g gain in column (h) and owned by	the foundation on 12/21/60			
	Complete only for assets snowin	g gain in column (h) and owned by		(I) Los	sses (from col (h)) of col (h) gain ove	real (k)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	but r	ot less than "-0-")	(K),
		23 01 12/3 1/03	over cor (j, ii arry			<691.>
<u>a</u> _				· · · · · · · · · · · · · · · · · · ·		<755.>
<u>b</u> _	<u></u>					<1,176.>
<u>c</u> _						
<u>d</u> _						<556.> <1,025.>
<u>e</u>					-	<u>\1,025.</u> 2
<u>f</u> _						
<u>g</u>						
<u>h_</u> _				~		
			<u> </u>			
_			<u> </u>			
<u>k</u> _						
	-			· · · · · · · · · · · · · · · · · · ·		
<u>m</u> _			 			
			<u> </u>			
<u>o</u> _		·	<u> </u>		-	
_	No. of the control of	r If gain, also enter	r in Part I, line 7			ZA 202 -
2 (Capital gain net income or (net ca	pital loss) { If gain, also enter -(loss), enter)-" in Part I, line 7 /	2		<4,203.>
3 1	Net short-term capital gain or (los	s) as defined in sections 1222(5) an	nd (6)			
	f gain, also enter in Part I, line 8,		}		37 / B	
_ !	f (loss), enter "-0-" in Part I, line 8	<u> </u>		3	N/A	

TEX SA

FORM 990-PF INTEREST ON SAVING	S AND TEMPORARY C.	ASH INVESTMENTS	STATEMENT	1
COURCE			AMOUNT	
DAMS BANK & TRUST - OGALLALA			15,8	54. 16.
TOTAL TO FORM 990-PF, PART I, L	INE 3, COLUMN A		15,8	70.
FORM 990-PF DIVIDENDS	AND INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
AG EDWARDS	26,232.	0.	26,2	32.
OTAL TO FM 990-PF, PART I, LN	26,232.	0.	26,2	32.
DORM 990-PF	RENTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INC	оме
AGRICULTURAL - NEBRASKA		1	67,6	88.
TOTAL TO FORM 990-PF, PART I, L	INE 5A		67,6	88.
F'ORM 990-PF R	ENTAL EXPENSES		STATEMENT	4
ूर इन्डCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
MAS, FUEL & OIL MSURANCE REPAIRS & MAINTENANCE SUPPLIES TAXES FERTILIZER & CHEMICALS BUES & SUBSCRIPTIONS FARM MANAGEMENT UTILITIES		92. 7,351. 3,302. 4,397. 1,236. 10,736. 136. 10,410. 788.		

LUTE FAMILY FOUNDATION, INC	<u>.</u>		2,075.	47-0785813			
RISCELLANEOUS RACHINE HIRE/CONTRACT LABOR ROMOTIONS			155. 2,000. 208.				
DEFERRED PATRONAGE DISPOSITIO : - S	N UBTOTAL -	1	230.	43,116.			
TOTAL RENTAL EXPENSES			_	43,116.			
NET RENTAL INCOME TO FORM 990	-PF, PART I	, LINE 5B	=	24,572.			
FORM 990-PF	LEGAL	FEES		STATEMENT 5			
,	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED				
ESCRIPTION	PER BOOKS		NET INCOME	_			
MÖGAL FEES	500.	0.		0.			
ro FM 990-PF, PG 1, LN 16A =	500.	0.		0.			
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME				
ACCOUNTING FEES	2,950.	0.		0.			
O FORM 990-PF, PG 1, LN 16B	2,950.	0.		0.			
FORM 990-PF	TAX	ES	STATEMENT				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME				
PAYROLL TAXES OTHER TAXES	574. 275. 1,236.	0. 0. 1,236.		0. 0. 0.			
TO FORM 990-PF, PG 1, LN 18	2,085.	1,236.		0.			
00 B. L M. M.							

 \mathbb{F}^{i}

FORM 990-PF	OTHER E	XPENSES		STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO					
FFICE SUPPLIES	2,503.		0.	0.			
DVERTISING	2,381.		0.	0			
AS, FUEL & OIL	92.		92.	0			
UNSURANCE	7,351.	7,3	51.	0			
REPAIRS & MAINTENANCE	3,302.			0			
SUPPLIES	4,397.			0			
FERTILIZER & CHEMICALS	10,736.			0			
DUES & SUBSCRIPTIONS	136.		36.	0			
FARM MANAGEMENT	10,410.			0			
UTILITIES	788.		88.	0			
TELEPHONE	2,075.			0			
MISCELLANEOUS MACHINE HIRE/CONTRACT LABOR	155.		55.	0			
PROMOTIONS	2,000. 208.	•	08.	0			
PROMOTIONS DEFERRED PATRONAGE	200.	2 (J 6 •	U			
DISPOSITION	230.	2	30.	0			
FOO FORM 990-PF, PG 1, LN 23	46,764.	41,8	80.	0			
©A	OTHER INV	ESTMENTS		STATEMENT 9			
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE			
INSURANCE INVESTMENT - DEDICA	ATED	COST					
			10 202	10 500			
RESOURCES ARTWORK INVESTMENT		COST	10,383. 24,616.				
		COST —		25,000			
ARTWORK INVESTMENT TOTAL TO FORM 990-PF, PART II	I, LINE 13	COST — — — ASSETS	24,616.	35,500			
ARTWORK INVESTMENT FOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER BEGIN	ASSETS NING OF	24,616.	25,000 35,500 STATEMENT 10			
ARTWORK INVESTMENT FOTAL TO FORM 990-PF, PART II FORM 990-PF	OTHER BEGIN	ASSETS NING OF	24,616. 34,999. END OF YEAR	25,000 35,500 STATEMENT 10 FAIR MARKET VALUE			

*ORM 990-PF	OTHER LIABILITIES		STATEMENT	11
		BOY AMOUNT	EOY AMOUNT	?
DEFERRED LIVESTOCK SALES	-	245,082.	245,0	82.
OTAL TO FORM 990-PF, PART II, LINE 22		245,082.	245,0	82.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 12 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RICHARD M. BOURQUE PO BOX 187 OGALLALA, NE 69153

TELEPHONE NUMBER

308-284-4165

FORM AND CONTENT OF APPLICATIONS

SCHOLARSHIPS - LETTER DESCRIBING APPLICANT'S AMBITIONS, OBJECTIVES & REFERENCE LETTER DESCRIBING CHARITABLE PURPOSE FOR USE OF FUNDS & TAX-EXEMPT STATUS FOR NON-SCHOLARSHIP APPLICANTS

NY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIPS - NONE NON-SCHOLARSHIP APPLICANTS - MUST BE A QUALIFIED CHARITABLE ORGANIZATION

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 13
PECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
WILD WEST SOAP BOX DERBY INC 4402 NORTH SPRUCE STREET OGALLALA, NE 69153	PROVIDE FUNDS FOR COMMUNITY SUPPORT	PRIVATE FOUNDATION	1,000.
BOYS & GIRLS CLUB OF LINCOLN COUNTY 401 EAST 4TH NORTH PLATTE, NE 69101	PROVIDE FUNDS FOR COMMUNITY SUPPORT	PUBLIC CHARITY	1,354.
OGALLALA LIBRARY 203 WEST A ST OGALLALA, NE 69153	PROVIDE FUNDS FOR COMMUNITY SUPPORT	PUBLIC CHARITY	50.
EARTLAND PHILANTHROPY O BOX 187 OGALLALA, NE 69153	PROVIDE FUNDS FOR COMMUNITY FIREWORKS DISPLAY	PRIVATE FOUNDATION	2,500.
R-L FIRE DEPARTMENT HWY 92 LEMOYNE, NE 69145	PROVIDE FUNDS FOR FIRE EQUIPMENT	PUBLIC CHARITY	5,376.
KEITH COUNTY FOOD PANTRY 204 EAST A ST OGALLALA, NE 69153	PROVIDE FUNDS FOR COMMUNITY SUPPORT	PUBLIC CHARITY	525.
GREAT PLAINS REGIONAL MEDICAL CENTER 601 W LEOTA NORTH PLATTE, NE 69101	PROVIDE FUNDS FOR COMMUNITY SUPPORT	PUBLIC HOSPITAL	1,899.
OGALLALA VOLUNTEER FIRE DEPARTMENT 101 EAST 4TH OGALLALA, NE 69153	PROVIDE FUNDS FOR FIRE EQUIPMENT	PUBLIC CHARITY	33,438.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		46,142.

Depreciation and Amortization 990PF (Including Information on Listed Property)

OMB No 1545-0172

Attachment Sequence No 67

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Attach to your tax return. ➤ See separate instructions. Business or activity to which this form relates

ldentifying number

LUT	E FAMILY FOUNDATION	, INC.		FOR	м 9	90-F	F PAGE	1	47-0785813
	t Election To Expense Certain Proper		79 Note: If vo	u have any list	ed pr	operty,	complete Part	V before y	rou complete Part I
	aximum amount. See the instructions							1	250,000.
	otal cost of section 179 property place							2	
	nreshold cost of section 179 property	3	800,000.						
	eduction in limitation. Subtract line 3 fi			er -0-				4	
	ollar limitation for tax year Subtract line 4 from line				instruc	tions		5	
6	(a) Description of pro			(b) Cost (busine			(c) Elected	cost	
<u> </u>						ĺ			1
				<u></u>			· -		1
									
		 	_			T T			
7 1	sted property. Enter the amount from	line 29				7			1
	otal elected cost of section 179 proper		ın column (d	c), lines 6 and	7			8	
	entative deduction. Enter the smaller	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,				9	
	arryover of disallowed deduction from		008 Form 45	62				10	
	usiness income limitation. Enter the sr				o) or l	line 5		11	
	ection 179 expense deduction. Add lir		•					12	
	arryover of disallowed deduction to 20				>	13			
	Do not use Part II or Part III below for								
Par	t II Special Depreciation Allowa	nce and Other D	epreciation	(Do not include	de list	ed prop	erty.)		
14 S	pecial depreciation allowance for quali	fled property (oth	ner than liste	d property) pla	aced	ın servic	e during		
	ne tax year	, , , , ,						14	749.
15 P	roperty subject to section 168(f)(1) ele	ction						15	
16 C	ther depreciation (including ACRS)			_		_		16	<u> </u>
Par	t III MACRS Depreciation (Do no	t include listed pr	operty.) (See	e instructions.))				
			Se	ection A					
17 N	ACRS deductions for assets placed in	n service in tax ye	ears beginnir	ng before 2009	9			17	7,858.
18 If	you are electing to group any assets placed in serv						▶		
	Section B - Assets	Placed in Servic	e During 20	09 Tax Year l	Jsing	the Ge	neral Deprecia	tion Sys	tem
	(a) Classification of property	(b) Month and year placed in service	(business/ii	or depreciation investment use instructions)	(d)	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
<u>19a</u>	3-year property	_				_			
b	5-year property	_		3,244.	5	YRS	HY	150DE	
c	7-year property	_		5,226.	7	YRS	HY	200DI	747.
d	10-year property	_							
_ e	15-year property								
f	20-year property								<u> </u>
9_	25-year property					25 yrs.		S/L	
h	Residential rental property	/			2	7.5 yrs.	MM	S/L	<u> </u>
		/			2	7.5 y <u>rs.</u>	MM	S/L_	<u> </u>
i	Nonresidential real property	/			:	39 <u>yr</u> s.	MM	S/L_	
		/	<u> </u>		<u> </u>		MM	S/L	<u> </u>
	Section C - Assets P	laced in Service	During 200	9 Tax Year U	sing t	he Alte	rnative Depre		/stem
<u>20a</u>	Class life							S/L	
b	12-year					12 yrs.		S/L	
C	40-year		<u> </u>		<u>ٺـــــــ</u>	40 yrs.	MM	S/L_	1
Pa	t IV Summary (See Instructions.)								
	usted property. Enter amount from line							21	
22 1	otal. Add amounts from line 12, lines	14 through 17, lin	nes 19 and 2	0 ın column (g), and	line 21			0.020
E	nter here and on the appropriate lines	of your return. P	artnerships a	and S corpora	tions	· see ins	str	22	9,878.
	or assets shown above and placed in		e current ye:	ar, enter the					
	portion of the basis attributable to sect	ion 263A costs				23			

For	m 4562 (2009)		<u>E FAMIL</u>										<u>0785</u>		Page
P	art V Listed Proper		utomobiles, ce	rtain oth	ner vehic	les, cell	ular tele	phones	s, certain o	compute	rs, and p	oroperty	used fo	r enterta	ınmen
	recreation, or a Note: For any through (c) of S	vehicle for wi Section A, all	of Section B,	and Sec	tion C if	applica	ble.							b, colun	nns (a)
			on and Other					~ ~ 						٦, ٢	
<u>24a</u>	Do you have evidence to			nt use cla	aimed?	<u> </u>	es L	_ No	24b lf "Y					」Yes	No (i)
	(a) Type of property	(b) Date	(c) Business/		(d) Cost or	Bas	(e) sis for depr	eciation	(f) Recovery		g) thod/		h) ciation	Ele	cted
	(list vehicles first)	placed in service	investment use percentag	e ot	her basis	(bu	siness/inve use only		period		ention		iction		on 179 ost
25	Special depreciation all		L		/ placed	In service			x vear an	l d	7				131
25	used more than 50% in			property	placed	III SCIVIC	oo dariin	g tile te	or your an	_	25				
26	Property used more that			ess use:											
				6											
			9	6											
_			9	6											
27	Property used 50% or l	ess in a quali	fled business	use:											·-·-
			9	6						S/L -				1	
	- · · · · · · · · · · · · · · · · · · ·		9	6			_			S/L ·					
		Ш	9	6						S/L·				1	
	Add amounts in column		=				, page 1				28	_		ļ	
<u>29</u>	Add amounts in column	ı (ı), l <u>ine 26. E</u>											29	<u> </u>	
					B - Infor						_				
Col	mplete this section for ve ou provided vehicles to y	ehicles used	by a sole prop	rietor, p	artner, o	or other	"more th	an 5%	owner," (or related	d person	:ompletii	na this s	section f	or
-	se vehicles.	your employe	,cs, mst answ	or the qu	303(10)13	000		500 ii y	00 111001	211 OXOOP					
	· · · · · · · · · · · · · · · · · · ·			,	a)	,	(b)	T	(c)	1	d)	10	 e)	1	f)
30	Total business/investment	miles driven d	uring the	1 '	hicle	1	hicle	l v	ehicle		ncle		ncle	1	ııcle
00	year (do not include com		aning this							1					
31	Total commuting miles	• .	the vear												
	Total other personal (no	-	-												
	driven	-	•	ļ											
33	Total miles driven durin	g the year.													
	Add lines 30 through 32	2													
34	Was the vehicle availab	ole for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?				ļ										<u> </u>
35	Was the vehicle used p	orimarily by a	more												
	than 5% owner or relat	•		<u> </u>		<u> </u>		ļ		ļ — —				-	 _
36	Is another vehicle availa	able for perso	onal							ļ		Ì			
	use?			<u> </u>			<u> </u>			L	<u> </u>		L		<u> </u>
			- Questions 1	-	-									41	- 50/
	swer these questions to	determine if	you meet an e	xceptio	n to com	pleting	Section	B for v	enicies us	ea by e	пріоуее	s wno ai	re not m	iore thai	15%
	ners or related persons. Do you maintain a writt		tomost that ar	ahılıda.	all paras	nol ugo	of volue	loo incl	luding co	mmuting	by you			Yes	No
31	employees?	en policy sta	tement that pr	OHIDIUS	ali perso	nai use	or veriic	165, 11101	idding coi	minuting	, by you	•		103	+ 110
38	Do you maintain a writte	en nolicy sta	tement that or	ohibits i	nersonal	use of v	vehicles	excen	t commut	ina by s	our/				1
-	employees? See the ins													- 1	
39	Do you treat all use of v							,							
	Do you provide more th	-				ınforma	tion fron	n your e	employee	s about					
	the use of the vehicles,							-							
41	Do you meet the require	ements conc	erning qualifie	d auton	nobile de	monstra	ation use	е?							
	Note: If your answer to	<i>37, 38, 39, 4</i>	0, or 41 is "Ye	s," do n	ot comp	lete Sec	ction B f	o <u>r the</u> c	overed ve	ehicles					<u> </u>
P	art VI Amortization														
	(a) Description of	of costs	Date	(b) amortization	1	(c) Amortiza	ble		(d) Code		(e) Amortiza	tion	А	(f) mortization	1
_				begins		amoun	nt -		section		period or per		to	or this year	
<u>42</u>	Amortization of costs tl	hat begins du	iring your 200	9 tax ye	ar:			- F							
-	A 4. A.				1							12			
	Amortization of costs ti					0 ro=1						43			
44	Total. Add amounts in	column (t). S	ee the instruct	ions for	wnere t	<u>o report</u>						1 444			