

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### \*\*See Extension Attached\*\*

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

OMB No 1545-0052

		ie to use a copy of this retu	illi to satisty st	ate reporting i		<del></del>
calend	lar year 2009, or tax year beginning ,	and ending				
heck a	all that apply Initial return Initial re	eturn of a former public	charity		Final return	
	Amended return Ad	dress change	Name	e change		
the IR	DEAN FAMILY FOUNDATION				•	ber
erwise orint	7	d to street address)	Room/suite			
type.	113 W. 1ST STREET			C If exe	mption application is pend	ling, check here
Specif	City or town, state, and ZIP code			D 1 Fo	reign organizations, chec	k here
uction	ns. TONGANOXIE KS	66086	_	2 Fo	reion organizations meeti	na the
heck t	ype of organization · X Section 501(c)(3) exempt private	foundation			• •	·
	·· - —			E If priv	ate foundation status was	terminated under
			crual	sectio	on 507(b)(1)(A), check her	e <b>▶</b> _
vear (1				F If the	foundation is in a 60-mon	th termination
		be on cash basis )		under	section 507(b)(1)(B), che	ck here
						(d) Disbursements
		expenses per	(b) Net in	vestment	(c) Adjusted net	for charitable
	the amounts in column (a) (see page 11 of the instructions) )	books	ince	ome	income	purposes (cash basis only)
1			<del> </del>			(odan basis only)
			<del>                                     </del>			
				-		-
1		.7 243	1	.7 2/3		
1		77,243	<del></del>	,,243		
		<u> </u>				
		*0.010	,			
		9,019	<u>'</u>		•	
			<del> </del>			
		<u> </u>	ļ		0	
9	1		<del> </del>		- · · ·	
10a	Gross sales less returns & allowances		ļ			
b	Less Cost of goods sold		ļ			
С	Gross profit or (loss) (attach schedule)		ļ			
11	Other income (attach schedule)		ļ			
12	Total. Add lines 1 through 11	16,262		•7,243	0	
13	Compensation of officers, directors, trustees, etc					
14	Other employee salanes and wages					
15	Pension plans, employee benefits				KEC	EIVED
16a	Legal fees (attach schedule)					3 2010 0
b	Accounting fees (attach schedule) STMT 2	·1,275		1,275		
С	Other professional fees (attach schedule)				MOU	l (V)
17	Interest					E
18	Taxes (attach schedule) (see page 14 of the instructions) $\mathrm{STMT}3$	122		122	OGD	EN, UI
19	Depreciation (attach schedule) and depletion					
	Occupancy					
	• •	_				
	<del>-</del>					
		• 261		• 261		
		• 1.658		1.658		0
	•			-,000	<u>-</u>	11,250
				1 658	0	11,250
		12,500	<del> </del>	1,000	···-	11,230
	Subtract line 26 from line 12	• 3,354				
_	Excess of revenue over expenses and disbursements	3,334	<del> </del>			
	Mark to a discourse (discourse to the contract	1		E EOE!		
b	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)		-	5,585	0	
	the IR abel envised for type. Specific heck to be construction with the IR abel envised for type. Specific heck to be construction for marry ear (16) and 12 and 14 and 15 and 16 and 17 and 18 and 19	the IRS abel provided in IRS abe	the IRS   Name of foundation   DEAN FAMILY FO	Initial return   Init	Initial return   Address change   Name cha	interest year 2009, or tax year beginning

Page 2

D	Attached schedules and amounts in the description column	Beginning of year	End o	f year
Pai	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing			
2	Savings and temporary cash investments	3,989	7,447	7,447
اً غ	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	·			
	Less allowance for doubtful accounts ▶			
က ဧ				
set				····
Assets			-	
1	b Investments—corporate stock (attach schedule) SEE STMT 5	3,588	• 3,484	297,796
- 1	c Investments—corporate bonds (attach schedule)			
11	•		5 1 1	•••
''	Less accumulated depreciation (attach sch.)	`	,	•
12				
13				
14				
'4	Less accumulated depreciation (attach sch.)			
4.5				
15	•			
16	, , ,	7,577	10,931	305,243
1 47	instructions. Also, see page 1, item l)	,,,,,,	10, 551	303,243
17				`
<b>ဟု</b> 18	• •			
19 20 21				
20				
21	3-3			
22	,	0		
23	······································	<u> </u>	0	
	Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
Ses				
S 24	· · · · · · · · · · · · · · · · · · ·			
25				
26		<del></del>		
Ĭ	Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balance  7	and complete lines 27 through 31.	5 5 5 5	10 001	
히 <sup>27</sup>		7,577	• 10,931	
တ္က 28		-		
29	•			
<b>ĕ</b>   30	Total net assets or fund balances (see page 17 of the			
<u>e</u>	instructions)	7,577	10,931	
2 31	Total liabilities and net assets/fund balances (see page 17			
	of the instructions)	7,577	10,931	
Par				
	tal net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	gree with		2 522
	d-of-year figure reported on prior year's return)		1 1	7,577
	ter amount from Part I, line 27a		2	3,354
	ner increases not included in line 2 (itemize)		3	10.55
	d lines 1, 2, and 3		4	10,931
	creases not included in line 2 (itemize) ▶		5	
6 Tot	tal net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), li	ne 30	6	10,931.

Page	3

Part IV Capital Gains ar	nd Losses for Tax on Investmen	nt Income			<b>.</b>
	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A					
b					
С					
<u>e</u>					J
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus exper	other basis nse of sale		or (loss) ) minus (g)
a					
b		<del></del>	<del></del>		
<u>c</u>					
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69	-	(1) 0 (0)	MAX.
(i) F M·V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess		col (k), but not	(h) gain minus less than -0-) or om col (h))
a					
b					
С					
d					
e					
2 Capital gain net income or (net ca	pital loss) If gain, also enter in F	•		2	
	s) as defined in sections 1222(5) and (6) column (c) (see pages 13 and 17 of the ins	structions)			•
If (loss), enter -0- in Part I, line 8				3	
Part V Qualification Un	der Section 4940(e) for Reduce	d Tax on Net Inv	vestment Incom	е	
(For optional use by domestic private to	foundations subject to the section 4940(a)	tax on net investmen	nt income )		
If section 4940(d)(2) applies, leave this	s part blank				
	·	·	period? X Ye	es 🗌 No	
	on 4942 tax on the distributable amount of y under section 4940(e) Do not complete	• •	period N	es [] NO	
	ach column for each year, see page 18 of		re making any entries		<del></del> -
(a)		the mandedona belon	(c)		(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributions	Net value o	of noncharitable-use ass		ribution ratio livided by col (c))
2008					
2007					<del></del>
2006			······································		
2005					
2004			···	<del></del>	
2 Total of line 1, column (d)				2	
	year base period—divide the total on line	2 by 5, or by the			
	s been in existence if less than 5 years	2 0, 0, 0. 2, 0.0		3	
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X, line 5	·		4	
5 Multiply line 4 by line 3					
6 Enter 1% of net investment income (1% of Part I, line 27b)					<u> </u>
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from I	Part XII, line 4			8	
· · · · · · · · · · · · · · · · · · ·	line 7, check the box in Part VI, line 1b, an	d complete that part	using a 1% tax rate	See the	

orn	990-PF (2009) DEAN FAMILY FOUNDATION 48-1194237				Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			112
	here ▶ 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-)	2			(
3	Add lines 1 and 2	3			112
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			(
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			112
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a				
b	Exempt foreign organizations—tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)  6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			112
0		10			
1		11			
	rt VII-A Statements Regarding Activities	<del></del>	_		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		-15		1
	published or distributed by the foundation in connection with the activities				
_	Did the foundation file Form 1120-POL for this year?	N/A	1c		
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	14/17	10		
ď	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$				
_					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$				1
,	• —————		,		Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		<u> </u>
	If "Yes," attach a detailed description of the activities	i			
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		3		χ.
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				X
la	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a		
b -	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		Χ.
•	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		^ `
	If "Yes," attach the statement required by General Instruction T				
•	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	NI / 7			
	conflict with the state law remain in the governing instrument?	N/A	6_	17	
	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	·X	
la .	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ► KS				
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	ļ	8b	•X.	
)	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		Χ
)	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				17
	names and addresses		10		_X_

Λ	$\circ$	_ ^	-			1	2	7	
4	×	_		_ ~	14	_	٦,	- /	

Page 5

Pa	art VII-A Statements Regarding Activities (continued)	<del></del>		
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	ļ	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  N/A	13		<u> </u>
	Website address ► N/A	245	010	
14	The books are in care of ► RICHARD E. DEAN Telephone no ► 913-1	345-	216	4
	113 W. 1ST STREET	_		
	Located at ► TONGANOXIE, KS ZIP+4 ► 6608	0		
15	Section 4947(a)(1) nonexempt chantable 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			
Pa	art 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  Yes X No  Yes X No			
	(4) Pay compensation to, or pay of reimburse the expenses of, a disqualified person?  (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)?			ļ
	(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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?  N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
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 ) $N/A$	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20	1 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		-	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)  N/A	3b		
40	foundation had excess business holdings in 2009)  N/A  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х.
4a h	Did the foundation invest during the year any amount in a mariner that would jeopardize its chartable purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	79		
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Χ .
		orm 990	)-PF	

P	art VII-B Statements Re	garding Activities for Which For	m 4720 May Be Re	quired (contin	ued)	_	
5a	During the year did the foundation				_		
	(1) Carry on propaganda, or other	wise attempt to influence legislation (section	n 4945(e))?		Yes X No		
	(2) Influence the outcome of any	specific public election (see section 4955), c	or to carry on,				ļ
	directly or indirectly, any voter	registration drive?			Yes X No		i
	(3) Provide a grant to an individua	il for travel, study, or other similar purposes	?		Yes X No		
	(4) Provide a grant to an organiza	tion other than a charitable, etc., organization	on described in	_	_		
		or section 4940(d)(2)? (see page 22 of the in			Yes X No		
	(5) Provide for any purpose other	than religious, charitable, scientific, literary,	or educational		_		
	purposes, or for the prevention	n of cruelty to children or animals?			Yes X No		
b	• •	did any of the transactions fail to qualify ur	der the exceptions desc	cribed in	_		
		a current notice regarding disaster assistan			N/A	5b	
	Organizations relying on a current	notice regarding disaster assistance check	here		▶ 🗌		
С	_	5a(4), does the foundation claim exemption			_		
	because it maintained expenditure	responsibility for the grant?		N/A 🗍 ,	Yes No	1	
	If "Yes," attach the statement requ	ired by Regulations section 53 4945-5(d)		_	_		
6a	Did the foundation, during the year	, receive any funds, directly or indirectly, to	pay premiums			]	
	on a personal benefit contract?			,	Yes X No	1 1	
b	•	, pay premiums, directly or indirectly, on a p	ersonal benefit contract	12		6b	X
	If "Yes" to 6b, file Form 8870	•					
7a		is the foundation a party to a prohibited tax	shelter transaction?	$\Box$	Yes X No		[
b		ny proceeds or have any net income attribu		_	N/A	7b	
		ut Officers, Directors, Trustees,			aid Employee	s,	•
•	and Contractors		`	, , ,	• •	•	
1 1	ist all officers, directors, trustees	s, foundation managers and their compe	nsation (see page 22 o	f the instructions	s).	-	
		· · · · · · · · · · · · · · · · · · ·	(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Na	me and address	hours per week	(If not paid, enter	employee benefit		ense account, allowances
	• •		devoted to position	-0-)	plans and deferred compensation	other	allowances
RI	CHARD E DEAN	TONGANOXIE	PRESIDENT				
	3 W. 1ST ST.	KS 66086	1.00	0	(		(
	RTHA DEAN	TONGANOXIE	SEC./TREAS.				•
	3 W. 1ST ST.	KS 66086	1.00	0			
			1				
				<u> </u>			
2	Compensation of five highest-pa	aid employees (other than those included	on line 1—see page 2	23 of the instructi	ons).		
_	If none, enter "NONE."	(					
			(h) Title and average		(d) Contributions to		
	(a) Name and address of eac	h employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
		,	devoted to position	' '	plans and deferred compensation	Outer	allowances
NC	NF						,
140							
			•				
				<u> </u>	-		
						ļ	
			<del>-  </del>				
		050,000		<u> </u>			
ota	number of other employees paid ov	/er \$50,000				000	<u> </u>
					Fo	rm 990.	-PF (2009)

03201 • ,•	• •	• •
Form 990-PF (2009) DEAN FAMILY FOUNDATION	48-1194237	Page
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	oundation Managers, Highly Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see	page 23 of the instructions). If none, enter "NO	NE."
(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		<b></b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sorganizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
2		· · · ·
<u> </u>		
3		
4		
Part IX-B Summary of Program-Related Investments (see	<del></del>	<del></del>
Describe the two largest program-related investments made by the foundation during the tax year	ar on lines 1 and 2	Amount
1 N/A		•

Form **990-PF** (2009)

▶

3

Total. Add lines 1 through 3

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

qualifies for the section 4940(e) reduction of tax in those years

	art X · Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fo	undations,
	see page 24 of the instructions.)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	]	
	purposes	ļ	
а	Average monthly fair market value of securities	1a	272,184
b	Average of monthly cash balances	1b	272,184 4,857
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	277,041
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	277,041
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	4,156
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	272,885
6	Minimum investment return Enter 5% of line 5	6	13,644
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	rating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	13,644
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)		
С	Add lines 2a and 2b	2c	112
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	112 13,532
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	13,532
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	13,532
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	11,250
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	11,250
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,250.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		

Form 990-PF (2009)

	art XIII Undistributed Income (see page 26 of t	he instructions)		- <u></u>	
	ATT AIR CHAIGHTBACCA INCOME (COCC PAGE 20 CT	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
'		` <u>-</u>			13,532
•	line 7				
2	Undistributed income, if any, as of the end of 2009				
a	•				
b	· · ·				
3	Excess distributions carryover, if any, to 2009				
	From 2004				
	From 2005				
	From 2006				
d	From 2007				
е					
f	<u> </u>	· 15,536			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 11,250				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2009 distributable amount				11,250
е	Remaining amount distributed out of corpus	·			
5	Excess distributions carryover applied to 2009	·2,282			2,282
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as	-		•	
	indicated below:	,			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	.13,254			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
c	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed	,			
d					
u	amount—see page 27 of the instructions				
_	Undistributed income for 2008 Subtract line				
e					
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
ī	Undistributed income for 2009 Subtract lines	,			
	4d and 5 from line 1. This amount must be				0
_	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				
	instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)	_			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	'13,254			
0	Analysis of line 9				
а	Excess from 2005				
b	Excess from 2006	i			
С	Excess from 2007				
d	Excess from 2008 -13, 254		ļ		
_	Excess from 2000		1		

Pa	art XIV Private Operating Fou	indations (see pa	age 27 of the instr	uctions and Part \	/II-A, question 9)	<del></del>			
1a	If the foundation has received a ruling or o	determination letter that	at it is a private operatin	g					
	foundation, and the ruling is effective for 2009, enter the date of the ruling								
b	Check box to indicate whether the founda	ion is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total			
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006				
	investment return from Part X for								
	each year listed			<del> </del>					
b	85% of line 2a								
С	Qualifying distributions from Part XII,								
	line 4 for each year listed		<del></del>						
d	Amounts included in line 2c not used directly								
	for active conduct of exempt activities	····			<u> </u>				
е	Qualifying distributions made directly								
	for active conduct of exempt activities								
	Subtract line 2d from line 2c			<u> </u>		<u>.</u>			
3	Complete 3a, b, or c for the								
	alternative test relied upon								
а	"Assets" alternative test—enter								
	(1) Value of all assets		<del>-</del>						
	(2) Value of assets qualifying under								
	section 4942(j)(3)(B)(i)		ļ	ļ					
þ	"Endowment" alternative test—enter 2/3			İ					
	of minimum investment return shown in								
	Part X, line 6 for each year listed								
С	"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				<del> </del>	****			
_	(4) Gross investment income		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	1.05.000				
Pa	rt XV Supplementary Inform	•			3 \$5,000 or more in	assets at			
	any time during the ye		or the instruction	is.)					
1	Information Regarding Foundation Mar	•			the formulation				
а	List any managers of the foundation who h				the foundation				
	before the close of any tax year (but only $N / A$	r triey riave contribute	d more than \$5,000) (c	see section 507 (d)(2) )					
<u> </u>	List any managers of the foundation who o	wn 10% or more of th	ne stock of a cornoration	o (or an equally large n	ortion of the				
b	ownership of a partnership or other entity)				Sition of the				
	N/A	of which the localidation	offilias a 10 % of greater	interest					
2	Information Regarding Contribution, G	rant Gift Loan Scho	olarshin etc Program	<u></u>	·				
_	Check here ▶ ☐ if the foundation only				es not accept				
	unsolicited requests for funds. If the found			=					
	organizations under other conditions, com		· · · · · ·						
а	The name, address, and telephone number			be addressed					
	RICHARD E. DEAN 913-		appca						
	113 W. 1ST STREET TO		S 66086						
b	The form in which applications should be s			should include	<del></del>	<del> </del>			
	SEE STATEMENT 6	a und miorina	and materials mey						
	Any submission deadlines								
·	N/A								
d	Any restrictions or limitations on awards, s	uch as by geographic	al areas, charitable field	s, kinds of institutions.	or other factors				
	MUST BE A 501(C)(3)								

Part XV Supplementary Information (continued)

Part XV Supplementary Information (co				
3 Grants and Contributions Paid During the		uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid during the year LAWRENCE MEMORIAL HOSP 325 MAINE ST LAWRENCE KS 66044	or substantial contributor	EXEMPT	CHARITABLE	350
ARCHBISHOP CALL TO SHARE 12615 PARALLEL PARKWAY KANSAS CITY KS 66109	NONE	EXEMPT	RELIGIOUS	1,000
GOOD SHEPHERD THRIFT STOR 304 E. 4TH ST TONGANOXIE KS 66086	NONE	EXEMPT	CHARITABLE	2,000
ALLIANCE AGAINST FAM VIOL 1921 19TH ST BAKERSFIELD CA 93301	NONE	EXEMPT	CHARITABLE	300
MARYKNOLL LAY MISSIONERS PO BOX 307 MARYKNOLL NY 10545	NONE	EXEMPT	RELIGIOUS	500
BISHOP WARD HIGH SCHOOL 708 NORTH 18TH ST KANSAS CITY KS 66102	NONE	EXEMPT	DUCATIONAL	4,100
SACRED HEART CHURCH 1100 WEST ST TONGANOXIE KS 66086	NONE	EXEMPT	RELIGIOUS	3,000
Total			<b>▶</b> 3a	11,250
b Approved for future payment				
N/A				
Total		<del></del>	▶ 3b	000 DE

DAA

Part XVI-	A Analysis of Income-Producing Ac	tivities				
	nounts unless otherwise indicated		d business income	Exclude	d by section 512, 513, or 514	(e)
Ç		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
•	ervice revenue			<del> </del>		the instructions )
		_				
		-	-	-		
		-		-		
				+		
	<del></del>	-		+		
f		-		-		
•	and contracts from government agencies			+		
	nip dues and assessments			+		
	a savings and temporary cash investments	<u> </u>		14	• 7,243	
	and interest from securities	-		14	1,243	
	income or (loss) from real estate					
	inanced property			<del> </del>		
	ebt-financed property			1		
	income or (loss) from personal property			1		
	estment income			+		0.016
•	ess) from sales of assets other than inventory					9,019
	e or (loss) from special events					
	fit or (loss) from sales of inventory			<del> </del>		
_	enue a	-		<del> </del>		
		-		<del> </del>		
		- }		1		
d		-		<u> </u>		
е		-	0		7,243	0.010
	Add columns (b), (d), and (e)	<u> </u>		']		9,019 16,262
	l line 12, columns (b), (d), and (e)				13	10,202
	et in line 13 instructions on page 28 to verify calculation		nt of Evernat Due			
Part XVI-I	<del></del>					
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo instructions)					he
8	STOCKS WERE SOLD, RATHER	R THAN DO	NATED, IN C	RDER	. TO	
	CONTRIBUTE TO MULTIPLE (	CHARITIES	. ALL PROCE	EEDS	FROM THE ·	
	SALE WERE CONTRIBUTED TO					
· · ·						
					<u>.                                    </u>	
					<u></u>	
		<del> </del>				
					····	

·or	m 990-PF	(2009) DEAN FAM.	грі во	JNDALION		40-	1194237		Pa	ige ij
	art XVII		arding Tra		Transaction	s and Relation	nships With No	oncharitable		
1	Did the	organization directly or indi		e in any of the follow	ing with any oth	er organization de	escribed		Yes	No
		on 501(c) of the Code (othe								
	organiz			-	,	· ·				
	-	rs from the reporting founda	ation to a noi	ncharitable exempt o	roanization of					
•	(1) Cas				- g			1a(-	<b>,</b>	X
		er assets						1a(2		X
	, ,	ansactions						1914	4	1
١			bla avamnt i	organization				16/		Х
	` '	es of assets to a noncharita	•	-				16(1	_	X
	٠,,	chases of assets from a no		· -				1b(2		X
		ntal of facilities, equipment,		ets				1b(3		X
	• •	mbursement arrangements						1b(4		
		ins or loan guarantees		f				1b(5	<del></del>	X,
	` '	formance of services or me	•	<del>-</del>				1b(6	4	X
	•	of facilities, equipment, ma	-	-	· -			<u>  1c</u>		X
(		nswer to any of the above is		_						
		f the goods, other assets, or								
		any transaction or sharing				· -				
	(a) Line no	(b) Amount involved	(c) Name	of noncharitable exemp	ot organization	(d) Descrip	tion of transfers, transac	ctions, and sharing arran	ements	
<u> </u>	'A						<del></del>			
			ļ							
								<del></del>		
	<del></del>									
				<u></u> .	· · · · · · · · · · · · · · · · · · ·					
	·									
<b>2</b> a	Is the fo	undation directly or indirect	ly affiliated w	rith, or related to, one	or more tax-ex	empt organization	ns			_
	describe	ed in section 501(c) of the C	ode (other th	nan section 501(c)(3)	)) or in section !	527?			′es X	No
b	If "Yes,"	complete the following sch	edule							
		(a) Name of organization		(b) Type of org	janization		(c) Description of	of relationship		
	N/A									
	Under pe	nalties of perjury, I declare that	I have examine	ed this return, including	accompanying sc	nedules and stateme	nts, and to the best of r	ny knowledge and		
	belief, it is	frue, correct, and complete De	eclaration of pr	eparer (other than taxpa	ayer or fiduglary) i	s based on all inform	ation of which preparer	has any knowledge		
	ightharpoonup	me E	$\mathcal{O}_{\mathcal{C}_{\mathbf{a}}}$		₹7/3	30/10	PRESID	ENT		
שַ	Sign	ature of officer or trustee			Date	<u> </u>	Title	_		
בַּ						Date		Preparer's iden		
=	s _	Preparer's					Check if self-employed	number (see Si page 30 of the		
i di	Paid Preparer's Use Only		E. LOB	AUGH, CPA		07/2	7/10	P0045		
1	Pal epa se (	Firm's name (or yours if		GILLMORE &	GORDON	LLP				
ŀ	يّے	self-employed), address,		CE BANK TO	WER, 6T	H FLOOR		EIN ► 48-078		
		and ZIP code		TTAN, KS	66502			Phone no 785-53	37-0	190

# 03201 DEAN FAMILY FOUNDATION

48-1194237

# **Federal Statements**

FYE. 12/31/2009

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

Description				How Received	Whom Sold	Date Acquire
Date Sold	Sale Price	Cost		Expense	Depreciation	Net Gain / Loss
230 COMMERCE BA 12/07/09 \$ COMMERCE BANCSI 12/15/09	9,115 \$	104 LIEU	\$	DONATION \$ DONATION	\$	11/13/ 9,011 11/18/ 8
TOTAL \$	9,123 \$	104	\$	0 \$	0 \$	9,019 ·

### Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description

	Total	<u>In</u>	Net vestment	Adjusted Net		Charitable Purpose	
ACCOUNTING FEES						ı	
	\$1,2	275 \$	1,275	\$	\$_		
TOTAL	\$	275 \$	.1,275	\$ 0	\$	0	

#### Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Description

			Total	_	Net Investment		Adjusted Net	_	Charitable Purpose
EXCISE TAX ON	INVESTMENT	INCOME							
		\$	122	\$	122	\$_		\$_	
TOTAL		\$	.122	\$	·122	\$	0	\$	0

# 03201 DEAN FAMILY FOUNDATION 48-1194237 Federal Statements

FYE. 12/31/2009

### Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description					
	Tot	al	Net Investment	Adjusted Net	Charitable Purpose
	\$	\$	\$	\$	
EXPENSES					
KANSAS ANNUAL REPORT	FEE				
COMMEDCE ACCES MANAC	EMENIE EEE	40	40		
COMMERCE ASSET MANAG	EMENI ECC	201	201		
BANK FEES					
		20	20		
TOTAL	\$	.261 \$	261 \$	0 \$	0

# 03201 DEAN FAMILY FOUNDATION 48-1194237 Federal Statements

FYE '12/31/2009

# Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description							
	Beginning of Year			End of Year	Basis of Valuation		Fair Market Value
COMMERCE BANCSHARES, INC.							
	\$_	3,588	\$_	3,484	COST	\$_	297,796
TOTAL	\$_	3,588	\$	3,484		\$_	297,796

# 03201 DEAN FAMILY FOUNDATION 48-1194237 Federal Statements

FYE<sup>-</sup>12/31/2009

### Statement 6 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

#### Description

WRITTEN REQUEST INCLUDING NAME, ADDRESS, TELEPHONE NUMBER, EXEMPT STATUS AND EXPLANATION OF ACTIVITIES AND PURPOSE.

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

### Description

MUST BE A 501(C)(3) EXEMPT ORGANIZATION. .

# Form , **8868** (Rev April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

antenna move	100 001110			
<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, complete only Part Land check this box re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on particular)			
	mplete Part II unless you have already been granted an automatic 3-month extension on a previous	usly filed	Form 88	368
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corpora Part I only	ition required to file Form 990-T and requesting an automatic 6-month extension—check this l	oox and	comple	te . ▶ []
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 t e income tax returns.	o reques	it an ex	tension of
one of the electronic returns, or	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automat e returns noted below (6 months for a corporation required to file Form 990-T). However, you ally if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990- r a composite or consolidated Form 990-T. Instead, you must submit the fully completed and sign more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Cha	ou canno BL, 6069 led page	ot file Fo 9, or 88 2 (Part f	orm 8868 70, group II) of Form
Type or	Name of Exempt Organization Empl	oyer iden	tificatio	n number
print	Dean Family Foundation 48-	11942	37	
File by the	Number, street, and room or suite no. If a P.O. box, see instructions			
due date for filing your	% Richard E. Dean - 113 W. 1st Street			
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions	-		
	Tonganoxie, KS 66086			
Check ty	pe of return to be filed (file a separate application for each return):  990	☐ Fo	rm 4720	0
☐ Form	990-BL	☐ Fo	rm 5227	7
☐ Form	990-EZ	☐ Fo	rm 6069	9
⊠ Form	990-PF	☐ Fo	rm 8870	0
<ul><li>If the or</li><li>If this is for the wh</li></ul>	ne No ▶ 913-845-2164 FAX No. ▶  rganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  nole group, check this box ▶ □ . If it is for part of the group, check this box		If th	. ► □ nis ıs tach
a list with	the names and EINs of all members the extension will cover.			
until for t	quest an automatic 3-month (6 months for a corporation required to file Form 99 August 15, 2010, to file the exempt organization return for the organization name the organization's return for:    calendar year 2009 or	d above	The ex	tension is
2 If thi	s tax year is for less than 12 months, check reason.   Initial return   Final return   Ch	ange in a	account	ing period
less	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, any nonrefundable credits. See instructions.	3a \$		
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax nents made Include any prior year overpayment allowed as a credit	3b \$		
depo	Ince Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment em) See instructions.	3c \$		0.00
Caution.	If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EC	and For	m 8879	9-EO
	ent instructions			