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# INTERNAL REVENUE SERVICE.

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F	orm 🔾	750	<b>'*</b> F			or	Sect	tion_4947	(a)	(1) None	xempt Char ite Foundati	ritable Tru	ust					)
- 1	Departmer nternal Re	nt of the Ti evenue Ser	reasury vice	Note	The fou	undation r	nay b	e able to u	se a	copy of t	his return to s	atisfy state	repor	tıng	requirements	<u>:</u>		,
i	For cal	endar v	year 2009,	or ta	ax year	beginnir	ng			12/	/16 ,2009	end end	ling				12/31,20	09
Ī	G Che	ck all th	nat apply	Х	Initial	return			niti	al return	of a former	public cha	rity				Final return	
					Amen	nded retu	ırn			Addre	ss change	_ [		lam	e change			
•			Name of fo	undat	ion									Α	Employerident	ific	cation number	
	Use th	ne IRS	WILLIAM	1 E	DEAN	III C	HAR	RITABLE	F	OUNDAT	CION							
	lab	el	(30-05-	500	-1812	2213)									54	<u> </u>	6882428	
	Other	wise,	Number an				ber if i	mail is not di	elive	red to stree	t address)	Room/s	uite	В	Telephone number (s	100 F	page 10 of the instructions)	
	pri																	
	or ty	• •	BANK OF	' AM	1ER T CA	A. N.A		P.O. B	OX	83104	1				( 8	30	0) 357-7094	4
	See Sp		City or towi												If exemption appli			X
	mstrut	Ziions.													pending, check he 1 Foreign organia		_	$\cdot \square$
			DALLAS,	ТX	7528	83-104	1							-	2 Foreign organi			_
	H Che	ck type	of organiz					c)(3) exer	not	private f	oundation				85% test, check computation			$\cdot \square$
⊋	$\overline{}$		947(a)(1) no							•	ıvate founda	ation			·			
₹	Fair		value of a		-			unting me				crual			•		status was terminated )(1)(A), check here .	$\Box$
_			m Part II, c				_	ther (spec									n a 60-month termination	
_		<b>▶</b> \$			673.	(P					n cash basis	.)					)(1)(B), check here .	
_			sis of Reve			cpenses	(The									٦	(d) Disburseme	nts
<u>^</u>   ≤ ₹		total c	of amounts in	colui	mns (b),	(c), and (c		(a) Ke		ie and s per	(b) Net inv		(		djusted net income		for charitable	•
			ot necessarii n (a) (see pa				s))		ook		l lileo	ine			income		purposes (cash basis on	iy)
Š .	1		ions, gifts, grant	*					15	0,000.								1
Z.	2	Check 1	If the	found	dation is <b>n</b>	not required	d to											
0.0	3		on savings an			 sh investme												
	4		ids and inter	-														
STREET BY	5a	_	ents				59 27		1	···								
حت	'		al income or (	loss)	R	RECE	V		L									
			or (loss) from		of assets r	not on line	10	C	$\perp$									
	b b 7	Gross sa	iles price for a n line 6a	H	378	MAY 1	7.2	010	7		<u></u>							
1	2 2		gain net inc	ome )	from Pa	rt IV, line	2) .		红				<u> </u>			_		
2	8 اء	Net sho	ort-term capi	talga	n	1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	G F	150	1				1					
	9		modificatio		) · · (D	MGUL		U	<u> </u>			···	ļ			_		
	10 a		iles less return wances		-								ļ					
	Ь		st of goods so		L													
	С	Gross p	profit or (loss	) (atta	ach sche	dule)										_		
	11	Other (	ncome (attac	ch sch	hedule)								1			_		
	12	Total.	Add lines 1 t	hroug	<u> 11 . </u>	<u> </u>			<u>15</u>	<u>0,000                                 </u>			-			4		
	13	Comper	sation of offic	ers, dı	rectors, tr	rustees, etc							-			_		
	14		employee sal		•					<del> </del>			<del> </del>			$\dashv$		
	15 16a b		n plans, emp					1			<u> </u>		<u> </u>			_	<del></del>	
	16a		ees (attach s					I .					-		<u>.</u>			
L	<u>к</u> р		nting fees (a										-			$\dashv$		
	စ္ င	Other p	professional	fees (	attach so	chedule) .						-	<del> </del>			-	<del> </del>	
	17	Interes	t									_					<u> </u>	<del></del>
	18		ittach schedul							<del></del>			<del> </del>			-	<del> </del>	
•	17 18 19 20 21 22		iation (attac						_		<b></b>					-	<del> </del>	
	20	•	ancy								<del> </del>		+			_	<del> </del>	
•	21		conferences								<u> </u>		-				<del> </del>	
			g and public								<del> </del>		+					
	23		expenses (at					1	_				+				<del> </del>	
•	24		perating an			•												
	23 24		es 13 throu	•			_				<u> </u>		+			-	<del> </del>	
•	25		outions, gifts	_						<del></del>	<del> </del>		+		<del></del>			
	26		enses and disb			lines 24 an	d 25			<del>.</del>	<del> </del>	<del></del>	+	-				
	27	Subtra	ct line 26 fro	m lın	ie 12 <sup>.</sup>			ŀ			1		1				1	

150,000

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions DBX493 2680 03/22/2010 14:50:19

a Excess of revenue over expenses and disbursements . b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). .

D.	JA III	Attached schedul	es and amounts in the	Beginning of year	End	of year
Ρ6		Balance Sheets description column amounts only (Se	e instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		NONE	46,903	. 46,903
	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			İ
1		disqualified persons (attach schedule) (see p	-			<u>                                     </u>
- 1	7	Other notes and loans receivable (attach				
1		Less allowance for doubtful accounts				
S	8	Inventories for sale or use			<del>.</del>	
Assets	9	Prepaid expenses and deferred charges ,				ļ
¥	10 a	Investments - U S and state government obliga-	ations (attach schedule) .			<u> </u>
	b	Investments - corporate stock (attach sch	nedule) . STMT .1	NONE	5,177	. 101,770
		Investments - corporate bonds (attach so	hedule)			
	11					
		Less accumulated depreciation (attach schedule)			<del></del>	
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·	
- 1	13	Investments - other (attach schedule)			· · · · · · · · · · · · · · · · · · ·	
	14	Land, buildings, and equipment basis				
ı	15	Other assets (describe	)			
ł	16	Total assets (to be completed by all filer	s - see the			
		instructions Also, see page 1, item I)		NONE	52,080	. 148,673
	17	Accounts payable and accrued expenses	·			_
	18	Grants payable		· <u>-</u>		4
es	19	Deferred revenue	<i></i>		=	_
≝	20	Loans from officers, directors, trustees, and other			<del></del>	4
Liabilities	21	Mortgages and other notes payable (atta	ch schedule)		<del></del>	4
ᅦ	22	Other liabilities (describe	)			_
4	23	Total liabilities (add lines 17 through 22				4
		Foundations that follow SFAS 117,				
-		and complete lines 24 through 26	and lines 30 and 31.			
Ses	24	Unrestricted				4
ä	25	Temporarily restricted				4
Ba	26	Permanently restricted				4
Net Assets or Fund Balances		Foundations that do not follow SFA				
괴		check here and complete lines 27			50 000	
9	27	Capital stock, trust principal, or current for	unds	NONE	52,080	<u> </u>
ets	28	Paid-in or capital surplus, or land, bldg, and eq		<u>.</u>		4
Ass	29	Retained earnings, accumulated income, endo	· · · · · · · · · · · · · · · · · · ·			-
늉	30	Total net assets or fund balances (see p	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	50.000	
- 1		instructions)	· · · · · · · · · · · · · · · · · · ·	NONE	52,080	4
	31	Total liabilities and net assets/fund bal	· -	NONE	52 000	
		of the instructions)	Accets or Eural	NONE	52,080	<u> </u>
		Analysis of Changes in Ne			agrae with	1
		I net assets or fund balances at begin	_			NONE
		of-year figure reported on prior year's				150,000.
		r amount from Part I, line 27a			2	150,000.
		er increases not included in line 2 (ite				150,000.
4 E	Nua Door	lines 1, 2, and 3		 TEMENT 2	· · · · · · · · · · · · · · · · · · ·	97,920.
		eases not included in line 2 (itemize) I net assets or fund balances at end o				52.080.

Ē	art IV Capital Gains	and Losses for Tax on Inv	restment Income			
		describe the kind(s) of property sold inch warehouse; or common stock, 200		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<u>1a</u>						
_b	·			<u> </u>		
_ <u>c</u>				ļ		
_ <u>d</u>		····				<del></del>
<u>е</u>	<del></del>		(a) Cost or other house	ļ		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
_ <u>a</u>						
_ <u>b</u>						
_ <u>c</u>						
<u>-ч</u>						
_		wing gain in column (h) and owner	ed by the foundation on 12/31/69	(0)	Gains (Col. (h) ga	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	than -0-) <b>or</b>
_				<del>                                     </del>	<del>_</del>	
_a b				<del> </del>		
_ <u>-</u> _		<del></del>	-			··········
d						
ĕ						
2	Capital gain net income or		f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
3		or (loss) as defined in sections 12 line 8, column (c) (see pages 13 a				
		ine 8		3		
P	art V Qualification Un	der Section 4940(e) for Redu	ced Tax on Net Investment Inc	come	N.	/A
W		the section 4942 tax on the distri	butable amount of any year in the b	ase perio	d?	Yes No
		not qualify under section 4940(e).		foro moki	na anu entrice	
_1	Enter the appropriate amo		; see page 18 of the instructions be	tore maki	ng any entries (d)	
_ c	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
_	2008			-		
	2007		<del> </del>			
_	2006					
	2005		<del></del>	<del> </del>	<del></del>	
_	2004		<u> </u>	<del> </del>	· · · · · ·	<del></del>
	Total of line 1, column (d)	farthe Every been period, divide	the total on line 2 by 5, or by the	2		
3	<del>-</del>		s than 5 years	3		
4	Enter the net value of non	charitable-use assets for 2009 fro	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution of line 8 is equal to or great VI instructions on page	ons from Part XII, line 4 eater than line 7, check the box ie 18.	in Part VI, line 1b, and complete	8 that part	using a 1% ta	x rate See the

	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b), 4940(b), 4940(c), or 4948 - see page 18 of the section 4940(a), 4940(b),	he ins	tructio	nsl
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		ri actio	1137
Ia	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		N	ONE
_	here ▶ ☐ and enter 1% of Part I, line 27b			01112
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
·	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		N	ONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			ONE
6	Credits/Payments Payments/Payme			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a			
	Exempt foreign organizations-tax withheld at source 6b NONE			
	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		N	ONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		N	ONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11			
Par	VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
_	of the instructions for definition)?	1ь		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
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 >\$		l	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		ŀ	
•	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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			
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> </u>
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?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			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 state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► STMT 3			
ь	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	8b_	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
-	names and addresses STMT 4	10	x	

If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . .

3a Did the foundation hold more than a 2% direct or indirect interest in any business

Form 990-PF (2009)

X

Х

3b

NONE

NONE

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. ► I NONE

NONE

NONE

Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Employ	rees,
3 Five high	est-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
			- <u>-</u>
Total number	er of others receiving over \$50,000 for professional services	<u></u>	▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	lation's four largest direct charitable activities during the tax year. Include relevant statistical inforons and other beneficiaries served, conferences convened, research papers produced, etc	mation such as the number	Expenses
1 NONE			
2			
3			
4			
Part IX-B			
	two largest program-related investments made by the foundation during the tax year on lines 1 ar	nd 2	Amount
1 NONE			
2 NONE			
	gram-related investments. See page 24 of the instructions		
3 NONE			
Total Add I	ines 1 through 3		<del></del>

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions.)	eign foundatio	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	101,771.
b	Average of monthly cash balances	1b	23,451.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)		125,222.
е		'	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	□         2	NONE
3			125,222.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25	•	
•		4	1,878.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	- 1 '	123,344.
6	Minimum investment return. Enter 5% of line 5		270.
_	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priv	ate operating	270.
	foundations and certain foreign organizations check here  and do not complete this	- T -	
1	Minimum investment return from Part X, line 6		270.
2a	Tax on investment income for 2009 from Part VI, line 5	<b>坦</b>	
b	Income tax for 2009. (This does not include the tax from Part VI) [26]	<b>⊣</b>	
C		2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	. 3	270.
4	Recoveries of amounts treated as qualifying distributions	. 4	NONE
5	Add lines 3 and 4	. 5	270.
6	Deduction from distributable amount (see page 25 of the instructions)	. 6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	. 7	270.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
' a		1a	
b			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	·	
2	purposes	. 2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а		. 3a	NONE
b	Cash distribution test (attach the required schedule)	. 3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	NONE
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4		NONE
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years.	whether the fou	ndation

Form 990-PF (2009)

orm	990-PF (2009)				Page <b>9</b>
Pai	t XIII Undistributed Income (see page	26 of the instruction	ns)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				270.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			NONE	
	Total for prior years 20, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2009.				
	From 2004 NONE				
	From 2005 NONE				
	From 2006 NONE		†		
4	From 2007 NONE				
•					
	110111 2000	NONB			
	Total of lines 3a through e	NONB			
4	Qualifying distributions for 2009 from Part XII, line 4. > \$ NONE				
а	Applied to 2008, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		NONE		
_					
C	Treated as distributions out of corpus (Election required - see page 26 of the instructions)	NONE			
đ	Applied to 2009 distributable amount				NONE
е	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2009	NONE			NONE
6	(If an amount appears in column (d), the same amount must be shown in column (a) )  Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			<del></del>
b	Prior years' undistributed income. Subtract		NONE		
С	Inne 4b from line 2b  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		NONE		
d	Subtract line 6c from line 6b Taxable		NONE		
e	amount - see page 27 of the instructions Undistributed income for 2008 Subtract line		NOIVE		
·	4a from line 2a. Taxable amount - see page 27 of the instructions			NONE	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2010.				270.
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	NONE			
8	instructions)	NONB			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	NONE NONE			
10	Analysis of line 9				
а	Excess from 2005 NONE				
b	Excess from 2006 NONE				
C	Excess from 2007 NONE				•
	Excess from 2008 NONE				
е	Excess from 2009 NONE				

Pa	rt XIV Private Oper	ating Foundations (s	see page 27 of the	e instructions and F	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or de	termination letter th	at it is a private op	erating	
	foundation, and the ruling	is effective for 2009, ente	er the date of the ruling	9	▶∟	
b	Check box to indicate who		rivate operating found		on 4942(	j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	1,0,000	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
ь	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "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 invest- ment return shown in Part X,					
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 royalites).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942 (1)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income .			<u> </u>	<u> </u>	
Pa	rt XV Supplement	ary Information (Co	mplete this par	t only if the four	ndation had \$5,000	or more in assets
	•	during the year - see		nstructions.)		
1		Foundation Managers			. 1 1b	
а	List any managers of before the close of any NONE	the foundation who have tax year (but only if the	ey have contributed mo	more than \$5,000).	(See section 507(d)(2).)	ved by the foundation
<b>b</b>	List any managers of	the foundation who c	wn 10% or more	of the stock of a co	rporation (or an equall	y large portion of the
	ownership of a partner NONE	rship or other entity) of	which the foundation	on has a 10% or great	ter interest.	
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:		
	unsolicited requests	the foundation only n for funds. If the found ther conditions, comple	lation makes gifts,	grants, etc. (see pa	aritable organizations ige 28 of the instructi	and does not accept ons) to individuals or
	The name, address, ar SEE STATEMENT	6				
b	The form in which app SEE ATTACHED S	olications should be sub TATEMENT FOR LI		tion and materials the	ey should include <sup>.</sup>	
С	Any submission deadli SEE ATTACHED S	ines: TATEMENT FOR LI	NE 2			
d	Any restrictions or I factors:			raphical areas, char	itable fields, kınds of	institutions, or other
ΙŚΑ		TATEMENT FOR LI	NE 2			Form 990-PE (2009)

Page **11** 

art	XV Supplementary Information (co	ontinued)			
3	<b>Grants and Contributions Paid Durin</b>	g the Year or Appr	oved for Fi	uture Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	contribution	
а	Paid during the year				
			1		
			1		
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	•		1		
			1		
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			1		
			1 1		
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		l	1 1		
	Total		· · · · · · ·	▶ 3a	
b	Approved for future payment				
	•		1		
			1		
		<u>.L</u>	<u> </u>		

VI-A Analysis of Income-Produ					
ss amounts unless otherwise indicated		ated business income (b)	Excluded by	(d)	(e) Related or exempt function income
am service revenue	Business code	Amount		Amount	(See page 28 of the instructions)
	<del>-</del>				· · · · · · · · · · · · · · · · · · ·
	_				
		:	<del>-  </del>		
			_		<u> </u>
-	}				
		<u> </u>	<del> </del>		
- · · · · · · · · · · · · · · · · · · ·		-	+		
					······································
· · · · · ·					
•					
•					
•					
	-				
otal Add columns (b), (d), and (e)					
				13	
			xempt Purp	oses	
Explain below how each activ	ity for whi	ch income is reporte	ed in column	(e) of Part XVI-A con	tributed importantly to
the accomplishment of the fo	oundation's	exempt purposes (	other than	by providing funds for	such purposes). (See
page 29 of the instructions.)					
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
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		NOT APPLICAB	LE		
	ees and contracts from government agencies bership dues and assessments	ees and contracts from government agencies bership dues and assessments	ees and contracts from government agencies bership dues and assessments st on savings and temporary cash investments ends and interest from securities ential income or (loss) from real estate: lebt-financed property tot debt-financed property rinvestment income or (loss) from sales of assets other than inventory nocome or (loss) from special events sprofit or (loss) from sales of inventory revenue: a  total Add columns (b), (d), and (e) total Add columns (b)	ees and contracts from government agencies bership dues and assessments st on savings and temporary cash investments ends and interest from securities ental income or (loss) from real estate lebt-financed property lot debt-financed property or (loss) from personal property intal income or (loss) from personal property or (loss) from sales of assets other than inventory from or (loss) from sales of inventory or (loss) from sales of inventory or revenue: a  Letal Add columns (b), (d), and (e) ksheet in line 13 instructions on page 28 to verify calculations }  VI-B  Relationship of Activities to the Accomplishment of Exempt Purp the accomplishment of the foundation's exempt purposes (other than	(a) Business code Amount Exclusion code (dd) Amount Business code Amount (exclusion code Amount (dd) Amount (dd) Amount (exclusion code A

Form	990-PF	(2009)				54-68	882428			Pa	ge <b>13</b>
Par	t XVII	Information Exempt Orga		Transfers To and	Transactions	and I	Relationships	With	Nonc	harit	able
1	in se	ction 501(c) of the Co	ode (other than	engage in any of the n section 501(c)(3) orga ncharitable exempt organiz	nizations) or in					Yes	No
а									10(1)		v
											<u>X</u>
h		transactions							. 10(2)		
			ritable exempt o	organization					16(1)		х
				xempt organization							X
				ets							Х
											Х
											X
				fundraising solicitations .							X
C	Sharır	ng of facilities, equipment	, mailing lists, ot	her assets, or paid employe	es				. 1c		<u>X</u>
đ	If the	e answer to any of t	the above is '	'Yes," complete the foll	owing schedule	Column	n (b) should al	ways sho	w the	fair r	narket
		•	•	rices given by the repo	-						
	value	in any transaction or	sharing arran	gement, show in colum	n (d) the valu	e of the	goods, other	assets, o	r service	es rec	eived.
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt organiza	tion (d) De	escription o	of transfers, transacti	ons, and sh	arıng arra	ngeme	nts
	_										
				· · · · · · · · · · · · · · · · · · ·			<del></del>				
											—
								<del></del>		•	
									-		
							<del></del>				
_		-									
2a	Is the	foundation directly or	indirectly affilia	ited with, or related to, o	one or more tax	c-exempt	organizations de	scribed in	<del></del>		٦
	sectio	n 501(c) of the Code (oth	ner than section	501(c)(3)) or in section 527	77				Ye	s Z	No
<u> </u>	If "Yes	s," complete the following					<del> </del>	<del></del>			
		(a) Name of organization	n	(b) Type of organ	ization		(c) Description	on of relation	inship		
							<u> </u>				
							<del> </del>				
						<del> </del>					
		<del></del>							•		
	Under	penalties of perjury, I declar	are that I have ex	ramined this return, including	accompanying sch	hedules an	d statements, and	to the best	of my ki	nowled	ge and
	belief	it is true, correct, and com	plete Declaration	of preparer (other than taxpa-	_		all information of w	hich prepa	rer has ar	y knov	viedge
	<b>\</b> /	) I WW. 25/W	<b>\$1</b>		13-2	2-10	► TRUSTI	EE			
9	Si	gnature of officer or trustee	BANK (	OF AMERICA, N.A.	Date		Title				
Sign Here					Date	Chec	·k if	Preparer'			n
E	s >	Preparer's			İ		employed ►	page 30 o			
Š	are On	signature									
	Paid Preparer's Use Only	Firm's name (or yours if					EIN ▶				
	د ہ	self-employed), address	, <b>r</b>								
		and ZIP code					Phone no			<u> </u>	
									Form 99	U-P-	120091

## Schedule B (Form 990, 990-EZ.

Schedule of Contributors ➤ Attach to Form 990, 990-EZ, or 990-PF. OMB No 1545-0047

or 990-PF) Department of the Treasury

Internal Revenue Service **Employer identification number** Name of the organization 54-6882428 WILLIAM E DEAN III CHARITABLE FOUNDATION Organization type (check one): Filers of: Section: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 X 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 331/3% 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 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 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 that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or

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

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

990-PF).

Name of organization WILLIAM E DEAN III CHARITABLE FOUNDATION Employer identification number 54-6882428

### Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d)
1_		riggiogato continuations	Type of contribution
1	WILLIAM E DEAN, III 551 BEECHCRAFT LN	<b>\$</b>	Person X Payroll X
	SEGUIN, TX 78155-2523		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	WILLIAM E DEAN, III  551 BEECHCRAFT LN  SEGUIN, TX 78155-2523	\$\$ 32,458.	Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution)
(a) No.	· (b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	WILLIAM E DEAN, III  551 BEECHCRAFT LN  SEGUIN, TX 78155-2523	\$\$ 19,359.	Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	WILLIAM E DEAN, III  551 BEECHCRAFT LN  SEGUIN, TX 78155-2523	\$\$ 30,577.	Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	WILLIAM E DEAN, III  551 BEECHCRAFT LN  SEGUIN, TX 78155-2523	\$\$ 46,903.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page\_\_

of Part II

Name of organization

WILLIAM E DEAN III CHARITABLE FOUNDATION

Employer identification number

54-6882428

Part II Noncash	Property •	(see instructions)
-----------------	------------	--------------------

(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
EXXON MOBIL CORP COM		
	\$\$	12/16/2009
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
JOHNSON & JOHNSON COM		
	\$ 32,458.	_12/16/2009
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
MERCK & CO INC NEW COM		
	\$\$	12/16/2009
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
PEPSICO INC COM	_	
	\$\$30,577.	12/16/2009
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given  (b)  Description of noncash property given  JOHNSON & JOHNSON COM  (b)  Description of noncash property given  MERCK & CO INC NEW COM  (b)  Description of noncash property given  PEPSICO INC COM  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  EXXON MOBIL CORP COM  (b) Description of noncash property given  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  \$ 20,703.  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  MERCK & CO INC NEW COM  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)  PEPSICO INC COM  (h) Description of noncash property given  (g) FMV (or estimate) (see instructions)  S 30,577.  (c) FMV (or estimate) (see instructions)  (c) FMV (or estimate) (see instructions)

# FORM 990PF, PART II - CORPORATE STOCK

	ENDING	ENDING
DESCRIPTION	BOOK VALUE	FMV
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1
EXXON MOBIL, CORP COM	1,050.	20,457.
JOHNSON & JOHNSON COM	2,755.	32,205.
MERCK & CO INC NEW COM	737.	18,708.
PEPSICO INC COM	635.	30,400.
		1

101,770.

5,177.

TOTALS

FORM	990PF,	PART	III	- OTHER	DECREASES	IN NET	WORTH C	R FUND	BALANCES
=====						======	======	======	

AMOUNT DESCRIPTION -----

97,920. ADJUSTMENT - FMV TO BOOK VALUE

> 97,920. TOTAL

=========

STATE(S) WHERE THE FOUNDATION IS REGISTERED

ТX

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS 

NAME AND ADDRESS

WILLIAM E DEAN, III 551 BEECHCRAFT LN SEGUIN, TX 78155-2523 FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES \_\_\_\_\_\_

OFFICER NAME:

BANK OF AMERICA, N.A.

ADDRESS:

P.O. BOX 121

SAN ANTONIO, TX 78291-0121

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 10

WILLIAM E DEAN III CHARITABLE FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

BANK OF AMERICA, N.A. - ADAM A DAVIS

ADDRESS:

P.O. BOX 121

SAN ANTONIO, TX 78291-0121

RECIPIENT'S PHONE NUMBER: 210-270-5487

FORM, INFORMATION AND MATERIALS:

LETTER FORMAT WITH APPROPRIATE ATTACHMENTS

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

QUALIFIED DOMESTIC PUBLIC CHARITIES AS DESCRIBED IN

IRC SECTION 501(c)(3)

Ε