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, Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545 0052

2009

For calendar year 2009, or tax year beginning 2009, and ending G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the THE D.E.K. FAMILY FOUNDATION, INC. IRS label. 86-0931606 2508 E PINE ISLAND LANE Otherwise, В Telephone number (see the instructions) print PAYSON, AZ 85541 or type. See Specific C if exemption application is pending, check here Instructions D 1 Foreign organizations, check here Check type of organization. |X| Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method. X Cash Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,920,542 (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (b) Net investment (c) Adjusted net (a) Revenue and (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (seé the instructions)) Contributions, gifts, grants, etc, received (att sch) 35,000 2 Ck ► I if the foundn is **not** req to att Sch B Interest on savings and temporary 4,775 4,775 4,775 cash investments 64:791 64,791 Dividends and interest from securities 64,791 5a Gross rents **b** Net rental income or (loss) Statement -119,803REVENUE 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a 437,705. Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances SCANNEDI NOV 2 4 2016 b Less Cost of RECEIVED c Gross profit/(loss) (att sch) Ö Other income (attach schedule) Total. Add lines 1 through 11 -15,23769,566 69,566 Compensation of officers, directors trustees, et Other employee salaries and wages 20,000 000 10,000 10,000. 13 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) DMINISTRAT 2,925 1,463 1,463 **b** Accounting fees (attach sch) See St 2 1,462. c Other prof fees (attach sch) 17 Interest 7,457. 7,457 8,385 928. 18 See Stm 3 Taxes (attach schedule)(see instr.) 19 Depreciation (attach sch) and depletion 20 Occupancy 21 Travel, conferences, and meetings. Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 31,310 18,920 18,920 12,390 Contributions, gifts, grants paid Part XV 173,500 173,500 Total expenses and disbursements. 204,810 18,920 18,920 185,890. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses -220,047and disbursements 50,646 b Net investment income (if negative, enter 0) 50,646 C Adjusted net income (if negative, enter 0) BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. TEEA0504L 02/02/10

	· .		Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	Ena c	i year
Part	# 1	Balance Sheets	column should be for end of year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-t	pearing	44.	2,266.	2,266.
	2	Savings and tempora		50,667.	19,639.	19,639.
		Accounts receivable	· •			
		Less allowance for d	oubtful accounts			_
	4	Pledges receivable	>			
		Less allowance for de	oubtful accounts			
	5	Grants receivable				
	6	Receivables due from office disqualified persons (attact	rs, directors, trustees, and other n schedule) (see the instructions)			
	7	Other notes and loans recei				
A		Less, allowance for d	oubtful accounts]		
S	8	Inventories for sale of	r use			
A S S E T	9	Prepaid expenses and	d deferred charges			
s	10 a	Investments – U.S. a obligations (attach sc	and state government hedule)			
	Ŀ	Investments - corporate st		1,742,782.	1,898,637.	1,898,637.
	c	: Investments - corporate be	onds (attach schedule)			
	11	Investments - land, l	buildings, and			
		Less accumulated deprecia (attach schedule)	ation •			
	12	Investments - mortg	age loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and	equipment. basis 🏲			
		Less accumulated deprecia (attach schedule)	ation			
	15 16	Other assets (describ Total assets (to be co see instructions. Also	ompleted by all filers -	1,793,493.	1,920,542.	1,920,542.
L	17	Accounts payable and				
ļ	18	Grants payable				
A B I	19	Deferred revenue				1
1	20		ors, trustees, & other disqualified persons]
ī	21	Mortgages and other notes	payable (attach schedule)]
Ţ	22	Other liabilities (describ	be ► See Statement 4)	1,482.	1,292.]
Ė S		Tatal Sabilities (odd)	trace 17 through 22)	1,482.	1,292.	
	23	Total liabilities (add	ow SFAS 117, check here	1,402.	1,232.	•
		and complete lines 2	4 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted	_			1
TND	25	Temporarily restricted				-
A S B	26	Foundations that do	ed not follow SFAS 117, check here ► X 7 through 31.		7	-
A B A L A N	27		rincipal, or current funds			
2 M	28	Paid-in or capital surplus,	or land, building, and equipment fund			
OE	29	Retained earnings, accumu	lated income, endowment, or other funds	1,792,011.	1,919,250.	
ŘŠ	30	Total net assets or fu	and balances (see the instructions)	1,792,011.	1,919,250.	
	31	(see the instructions)		1,793,493.	1,920,542.	
Part	Ш	Analysis of Chan	ges in Net Assets or Fund Balan	ces	1	T
1	Tota end-	I net assets or fund ba of-year figure reported	lances at beginning of year – Part II, colu I on prior year's return)	ımn (a), line 30 (must agr	ee with	1,792,011.
2	Ente	r amount from Part I,	line 27a		2	-220,047.
3	Other	increases not included in lin	ne 2 (Itemize) ► See Statement	_5	3	347,286.
4	Add	lines 1, 2, and 3			4	1,919,250.
		ases not included in line 2 (i		<u></u>	5	
6	Tota	I net assets or fund ba	lances at end of year (line 4 minus line 5)	 Part II, column (b), lin 	e 30 6	1,919,250.

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Part IV . Capital Gains and	Losses for Tax on Investment				
(a) List and descri 2-story brick wareho	be the kind(s) of property sold (e g , reuse; or common stock, 200 shares MLC	Company)	D) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
b					
С					
d					
e					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
e				 	
	ving gain in column (h) and owned by the			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		gain minus column (l ian -0-) or Losses (f	
a					
b				<u> </u>	
С					
d					
е					· · · · · ·
2 Capital gain net income or (ne	et capital loss). If gain, also if (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) ar	nd (6):			
If gain, also enter in Part I lin	e 8, column (c) (see the instructions). I	If (loss), enter -0-			
ın Part I, Iıne 8			3		
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investmer	nt Income		
	ction 4942 tax on the distributable amo alify under section 4940(e). Do not com		rıod?	Yes	X No
1 Enter the appropriate amount	in each column for each year, see the	instructions before making an	y entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts (co	(d) Distribution Iumn (b) divided	n ratio by column (c))
2008	121,336.	2,263	,752.		0.05360
2007	118,959.	1,887			0.06301
2006	96,660.	1,481			0.06523
2005	82,693.		,392.		0.32894
2004	50,244.	274	,991.	·	0.18271
2 Total of line 1, column (d)			2		0.69350
3 Average distribution ratio for t	he 5-year base period — divide the tota on has been in existence if less than 5 y	al on line 2 by 5, or by the	3		0.13870
•			4		1,829,163
4 Enter the net value of noncha	ritable-use assets for 2009 from Part X	, line 5			
5 Multiply line 4 by line 3			5		253,705
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		506
7 Add lines 5 and 6			7		254,211
8 Enter qualifying distributions to			8		185,890
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, li	ne 1b, and complete that part	using a 1% t	ax rate See the	

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Parl		ons)		
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 instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		1,0	13.
	check 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, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			_
	foundations only. Others enter -0-)		1 0	0.
3	Add lines 1 and 2		1,0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		1 0	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,0	13.
	Credits/Payments 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 6, 529.			
	Zacinipit foreign organizations and married at observe			
	Tax paid with application of statistics of the Company			
	Backet Willing Citoriously William		6 5	29.
_	Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here		0,5	
8	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		5,5	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 5, 516. Refunded		<u> </u>	0.
	VII-A Statements Regarding Activities			
			Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 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 the instructions for definition)?	1 b		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		1	
,	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
	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		х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Χ
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
	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 state 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? If 'Yes,' complete Part II, column (c), and Part XV	7	_X_	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) N/A			
t	of 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)? If 'Yes,' complete Part XIV	9	Х	
10	and addresses	10 orm 99	0.55	X
		OFFIN MY	7 . 1 . 1	1/11/19

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Par	t VII-A Statements Regarding Activities Continued					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	application	7	13	Х	
14	The books are in care of ► WILLIAM KNAUSS Telephone	no. ►	(928)	474-	454	-
-	Located at ► 2508 E PINE ISLAND LN PAYSON AZ ZIP + 4 ►	<u>8554</u>	1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		1	N/A	>	
	and enter the amount of tax-exempt interest received or accrued during the year	► 1 <u>1</u>	5			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	a 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	XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X No	1	l	
	(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	XNo			
	(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	XNo			
t	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 the instruction	ıs)?		1Ь	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•				
c	c 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?			1 c		X
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))					
ā	a 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	XNo			
	If 'Yes,' list the years ▶ 20, 20, 20					
ŀ	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions.)	a)(2))(2) to		2Ь	N	/A
,	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere				
•	► 20, 20, 20					
3	a 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			
ł	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).	i		3b	N	/A
4 8	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
ı	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 tay year beginning in 2009?			4b		X

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Part VII-B Statements Regarding Activit		n 4720 May Be Red	uired (continued)		
5à During the year did the foundation pay or incu	•		n. 6		1
(1) Carry on propaganda, or otherwise attemp	· ·	•	Yes X	No	1
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	tion drive?			No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No	
(5) Provide for any purpose other than religior educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b	N/A
Organizations relying on a current notice regains	ding disaster assistance	e check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	sibility for the grant?		N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53.4945	i-5(d).			1
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes X	1	v
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870.	ums, directly or indirect	lly, on a personal benefi	t contract?	6b	<u> X</u>
7a At any time during the tax year, was the found	ation a party to a prohil	bited tax shelter transac	tion? Yes X	No	
b If yes, did the foundation receive any proceed				7ь	N/A
Part VIII Information About Officers, D	irectors, Trustees	, Foundation Mana	gers, Highly Paid	Employee	s,
and Contractors			-47		
1 List all officers, directors, trustees, foundation				(a) Europes	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
DALTON L KNAUSS	PRES/DIR	0.	0.		0
407 S DECISION PINE	0				
PAYSON, AZ 85541-5890					
ELAINE V. KNAUSS	TREAS/DIR	0.	0.		0
407 S DECISION PINE PAYSON, AZ 85541-5890	0	:			
WILLIAM KNAUSS	V.P./DIR	20,000.	0.		0
2508 E PINE ISLAND LN	0				
PAYSON, AZ 85541					
CYNTHIA DIAZ	SEC/DIR	0.	0.		0
2205 N FLORENCE ROAD	0			,	
PAYSON, AZ 85541	<u> </u>	L			
2 Compensation of five highest-paid employee				1	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
None					
		 		 	
	1				
		-		-	
]				
	<u> </u>	<u> L</u>		<u> </u>	
Total number of other employees paid over \$50,000)		·		(2000

Form 990-PF (2009) THE D.E.K. FAMILY FOUNDATION, INC. Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	31606 Page Employees.
and Contractors (continued)	
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter '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.	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	-
2	
	- -
3	
4	
	-
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	- -
2	_
All other program-related investments. See instructions	_
3	_ _
Total. Add lines 1 through 3	> (
BAA	Form 990-PF (200

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Part X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign four	ndations,
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 1	1,820,710.
b Average of monthly cash balances	1 b	36,308.
c Fair market value of all other assets (see instructions)	. 1c	
d Total (add lines 1a, b, and c)	1d 1	L,857,018.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3 1	1,857,018.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	27,855.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 1	1,829,163.
6 Minimum investment return. Enter 5% of line 5	6	91,458.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of	perating found	dations
and certain foreign organizations check here ► X and do not complete this	part.)	
1 Minimum investment return from Part X, line 6 N/A	1	
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)	_ 	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	· · · · ·
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	185,890.
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 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	185,890.
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 instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	185,890.
		

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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BAA

Part XIII Undistributed Income (see instruc	ctions)	N/A		
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	······································		:	 _
line 7				
2 Undistributed income, if any, as of the end of 2009			1	
a Enter amount for 2008 only				
b Total for prior years. 20, 20, 20				
3 Excess distributions carryover, if any, to 2009			1	
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e				
4 Qualifying distributions for 2009 from Part				
XII, line 4. ► \$				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	·			<u></u>
5 Excess distributions carryover applied to 2009.				·····
(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:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b 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 Subtract line 6c from line 6b Taxable amount — see instructions	***************************************			
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions				
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010			<u>.</u>	
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a			,	
10 Analysis of line 9				
a Excess from 2005				<u> </u>
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				I

Form 990-PF (2009) THE D.E.K. FAMIL		INC.		86-0931606	Page 10
Part XIV Private Operating Foundation					
1a If the foundation has received a ruling or d is effective for 2009, enter the date of the r	etermination letter tha ruling	at it is a private ope	erating foundation,	and the ruling	
b Check box to indicate whether the foundati	•	ing foundation desc	cribed in section	X 4942(j)(3) or	4942())(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
each year listed	50,646.	65,647.	59,055.	33,836.	209,184.
b 85% of line 2a	43,049.	55,800.	50,197.	28,761.	<u>177,807.</u>
c Qualifying distributions from Part XII, line 4 for each year listed	185,890.	121,336.	118,959.	96,660.	522,845.
d Amounts included in line 2c not used directly for active conduct of exempt activities					0.
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 	185,890.	121,336.	118,959.	96,660.	522,845.
3 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	60,972.	75, 458.	62,931.	49,389.	248,750.
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)			12.00-27		
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this p ne year – see ins	oart only if the ditructions.)	organization h	ad \$5,000 or mo	re in
1 Information Regarding Foundation Manage a List any managers of the foundation who had close of any tax year (but only if they have See Statement 6	ers:		al contributions rec ction 507(d)(2))	eived by the foundat	on before the
b List any managers of the foundation who of a partnership or other entity) of which the None	own 10% or more of the foundation has a 10%	ne stock of a corpor or greater interest	ration (or an equali	y large portion of the	ownership of
2 Information Regarding Contribution, Gran	t Gift Loan Scholars	ship, etc. Programs	·····		·
Check here In if the foundation only makes complete items 2a, b, c, and d.	nakes contributions to	preselected charita	able organizations		
a The name, address, and telephone number	er of the person to who	om applications sho	ould be addressed		
b The form in which applications should be s	submitted and informa	ition and materials	they should include	9	
c Any submission deadlines.					
d Any restrictions or limitations on awards, s	such as by geographic	cal areas, charitable	e fields, kinds of in	stitutions, or other fa	ctors.

86-0931606 Form 990-PF (2009) THE D.E.K. FAMILY FOUNDATION, INC. Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of Amount recipient Name and address (home or business) a Paid during the year See Statement 7 173,500. 3a Total b Approved for future payment 3Ь Total

Part XVI-A	Analysis	of Income-	Producing	Activities
------------	----------	------------	-----------	------------

ntèr gross	amounts unless otherwise indicated.	Unrelated	business income	LACIDUEU DY	section 512, 513, or 514	
_		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
-	am service revenue:			1 0000		(ace the manachina
						
			<u> </u>			
			- -			
f						
q Fees	and contracts from government agencies					
•	pership dues and assessments					
3 Interest	t on savings and temporary cash investments			14	4,775.	
4 Divide	ends and interest from securities			14	64,791.	
5 Net re	ental income or (loss) from real estate					
a Debt-	financed property					
b Not de	ebt-financed property					
6 Net ren	ital income or (loss) from personal property					
7 Other	investment income				, 	
8 Gain or	(loss) from sales of assets other than inventory					-119,803
9 Net in	come or (loss) from special events					
10 Gross	profit or (loss) from sales of inventory		<u> </u>		····································	
11 Other	revenue					
a		1				
b		1			<u> </u>	
С						
d						
е						110 000
e	otal Add columns (b), (d), and (e)				69,566.	-119,803
e	otal Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e)				69,566. 13	-119,803 -50,237
e	otal Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca				13	
e	otal Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e)		shment of Exem	pt Purpose	13	
e	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
e Subto 13 Total See works Part XVI- Line No.	otal Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca	e Accomplis		 	13 es	-50,237
e Subto 13 Total See works Part XVI-	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
e 12 Subto 13 Total See works 'art XVI- Line No.	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
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e Subto 13 Total See works Part XVI-	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
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e Subto 13 Total See works Part XVI- Line No.	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
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e 12 Subto 13 Total See works Part XVI- Line No.	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
e 12 Subto 13 Total See works Part XVI- Line No.	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,237
e Subto 13 Total See works Part XVI-	otal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in the instructions for line 13 to verify ca Relationship of Activities to the	e Accomplis		 	13 es	-50,23

Form **990-PF** (2009)

=(orm 990-P				DUNDATION,					0931606		ge 13
P	art XVII	Informatio	n Regardir	ng Transfe	ers To and T	ransactio	ons an	d Relatio	nships With	Noncharitab	le	
_	·	Exempt O	rganization	IS								
	1 Did th	ne organization dir	ectly or indire	rtly engage i	n any of the foll	lowing with	any othe	er organizat	ion		Yes	No
	descr	ibed in section 50	1(c) of the Cod	de (other tha	n section 501(c)(3) organiz	ations)	or in section	527,			
		ng to political orga										
		fers from the repo	orting foundation	on to a noncl	haritable exemp	ot organizat	ion of			4 (2)		v
	(1) C									1a (1)		X
	\	other assets								1a (2)		Х
		transactions								41.40		v
		ales of assets to a								16(1)		X
	` '	urchases of asset				on				1b (2)		X
	• • •	Rental of facilities,	• •	other assets	.					1b (3)		X
	٠,,	Reimbursement arr	•							1b (4)		_ <u>^</u>
		oans or loan guara				lakana				1b (5)		X
	٠,,	'erformance of ser no of facilities, eqi		•	•					1b (6)		X
	c Sharii	ng of facilities, equ	uipment, maiii	ng asis, othe	i assets, or par	iu empioye	7 5			1_16		
	the or	answer to any of oods, other assets ransaction or share	s, or services of	given by the	reportina found	ation. If the	: founda	tion receive	d less than fair m	narket value in	of	
<u></u>	a) Line no.	(b) Amount involve			ritable exempt orga				transfers, transaction		aement:	 s
_	/A	(a) / unount moon	(9)							· · · · · · · · · · · · · · · · · · ·		
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		l										
	descr	foundation direct ribed in section 50 s,' complete the fo	1(c) of the Co	de (other tha	th, or related to in section 501(c	, one or mo (3)) or in s	ore tax-e section 5	xempt orga 27?	nizations	Yes	s X	No
		(a) Name of orga			(b) Type of o	rganızatıon			(c) Description	of relationship		
N	/A											
_												
_												
				l				<u></u>				
	Under pena complete	alties of perjury, I declare Declaration of preparer	that I have examine (other than taxpay	ed this return, incli yer or fiduciary) i	uding accompanying s is based on all inforr	schedules and s mation of whicl	tatements, preparer	and to the best of has any knowle	of my knowledge and be edge	het, it is true, correct, a	ind	
		1111	1				_	, ,				
5	\triangleright	WU C	trau	u			V	11/15/1	⋄ ▶ V.P./	'DIR		
G	Sign	ature of officer or truste	e ()	10	//		Date		Title			
Ni 		A/	11,05	1/1:	11 COM		Date	, /	Check if	Preparer's Identify (See Signature in	ing nun	nber trs)
Ħ	Paid	Preparer's signature	JEBRA I T	ANIELS.	CPA		11	111/10	self employed	P0044510		,
R E	Pre- parer's	Firm's name (or			Associate	s. PC		111/10		6-0277974		
	Use	Lyours if solf			, Suite A			-1				
	Only		Payson, A		,				Phone no	928-474-2	024	
_												

BAA

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

miterial iterative estities		
Name of the organization		Employer identification number
THE D.E.K. FAMILY FOUNDATION,	, INC.	86-0931606
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treate	d as a private foundation
	527 political organization	
- 000 05	V solve (2) and a solve for adolest	
Form 990-PF	X 501(c)(3) exempt private foundation	a armete foundation
	4947(a)(1) nonexempt charitable trust treated as	, a private touridation
	501(c)(3) taxable private foundation	
General Rule —	eneral Rule or a Special Rule, anization can check boxes for both the General Rule a Z, or 990-PF that received, during the year, \$5,000 or the second control of the second con	
Special Rules -	200 000 57 Hart with the 22 1/20/ average heat	
509(a)(1)/170(b)(1)(A)(vi) and received from	Form 990 or 990-EZ, that met the 33-1/3% support test in any one contributor, during the year, a contribution of or (ii) Form 990-EZ, line 1. Complete Parts I and II	of the regulations under sections of the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organiz aggregate contributions of more than \$1,00 prevention of cruelty to children or animals	cation filing Form 990 or 990-EZ, that received from an 00 for use <i>exclusively</i> for religious, charitable, scientific c. Complete Parts I, II, and III.	y one contributor, during the year, c, literary, or educational purposes, or the
contributions for use exclusively for religiou	cation filing Form 990 or 990-EZ, that received from an us, charitable, etc, purposes, but these contributions d intributions that were received during the year for an e unless the General Rule applies to this organization b	lid not aggregate to more than \$1,000. If exclusively religious, charitable, etc.
religious, charitable, etc, contributions of \$	5,000 or more during the year.	▶ \$
990-PF) but it must answer 'No' on Part IV. lin	y the General Rule and/or the Special Rules does not e 2 of their Form 990, or check the box on line H of its ig requirements of Schedule B (Form 990, 990-EZ, or	Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Reducti for Form 990, 990EZ, or 990-PF.	on Act Notice, see the Instructions Scho	edule B (Form 990, 990-EZ, or 990-PF) (2009

DALTON & ELAINE KNAUSS Per Pay A07 S. DECISION PINE \$ 35,000. Non (Contributions)	ication number
Part Contributors (see instructions) (a) (a) (b) (c) Aggregate contributions To the contributions	:06
(a) Number	
Number Name, address, and ZIP + 4 Aggregate contributions T. 1 DALTON & ELAINE KNAUSS Per Pay 407 S. DECISION PINE \$ 35,000. Non PAYSON, AZ 85541-5890 (Compared to the contributions) T. (a) Number Name, address, and ZIP + 4 Aggregate contributions T. (a) Number Name, address, and ZIP + 4 Aggregate contributions T. (a) Number Name, address, and ZIP + 4 Aggregate contributions T. (a) Number Name, address, and ZIP + 4 Aggregate contributions T. (a) Number (c) Number Per Pay (c) Sa Nor (CC Is and CIP + 4)	
## 407 S. DECISION PINE \$ 35,000. Non (Constraint) PAYSON, AZ 85541-5890 (a) Number Name, address, and ZIP + 4 Aggregate contributions Tourish and the contributions Tourish and th	(d) Type of contribution
407 S. DECISION PINE \$ 35,000. Non (Co is a large) PAYSON, AZ 85541-5890 (a) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (c) Aggregate contributions Per Pay Nor (Co is a large) Name, address, and ZIP + 4 (c) Aggregate contributions The Per Pay Nor (Co is a large) (d) Name, address, and ZIP + 4 (e) Per Pay Nor (Co is a large) (c)	—————————————————————————————————————
PAYSON, AZ 85541-5890 (a) Number Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (c) Aggregate contributions Per Pay Nor (C) Aggregate contributions T Per Pay Nor (C) S a (a) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (c) Aggregate contributions Per Pay Nor (C) S a	ncash 🗌
Number Name, address, and ZIP + 4 Aggregate contributions Per Pay Nor (Constraint) (A) Number Name, address, and ZIP + 4 Name, address, and ZIP + 4 Per Pay Nor (Constraint) Per Pay Nor (Contributions) Per Pay Nor (Contributions) (Contributions)	omplete Part II if there noncash contribution.)
(a) Number Name, address, and ZIP + 4 Contributions Pay Nor (Constant of the contributions) Per Pay Nor (Constant of the contributions) (b) Aggregate contributions Per Pay Nor (Constant of the contributions) (c) (Constant of the contributions)	(d) Type of contribution
(a) Number Name, address, and ZIP + 4 Contributions Per Pay Nor (CC) IS a	ncash 🗌
Number Name, address, and ZIP + 4 Aggregate contributions T Per Pay Nor (Cols a list	omplete Part II if there noncash contribution)
\$ Pay Nor (Co is a	(d) Type of contribution
(a) (b) (c)	rson yroll ncash
(a) (b) (c) Number Name, address, and ZIP + 4 Aggregate contributions	omplete Part II if there inoncash contribution
	(d) Type of contribution
Pay Noi (Co	rson yroll ncash omplete Part II if there a noncash contribution
(a) (b) (c) Aggregate Contributions	(d) Type of contribution
Pay No.	rson yroll oncash oncas
is a	a noncash contribution
(a) (b) (c) Number Name, address, and ZIP + 4 Aggregate contributions	(d) Type of contribution
Pa	
(C is a	erson eyroll encash

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

Name of orga	B (Form 990, 990-EZ, or 990-PF) (2009)	Pag		1 of Part I
-	E.K. FAMILY FOUNDATION, INC.		86-0931	.606
Part II	Noncash Property (see instructions)	-	_	· · · · · -
(a) No. from Part I	(b) Description of noncash property given	FM\	(c) / (or estimate) e instructions)	(d) Date received
	N/A			
		\$		
(a) No. from Part I	(b) Description of noncash property given	FM\ (see	(c) / (or estimate) : instructions)	(d) Date received
		_ \$		
(a) No. from Part I	(b) Description of noncash property given	FM\ (see	(c) / (or estimate) e instructions)	(d) Date received
]\$		
(a) No. from Part I	(b) Description of noncash property given	FM\	(c) / (or estimate) e instructions)	(d) Date received
		-		
		_		
		_ \$		
(a) No. from Part I	(b) Description of noncash property given	FM\ (see	(c) / (or estimate) e instructions)	(d) Date received
		-		
		- \$		
(a) No. from Part I	(b) Description of noncash property given	FM\	(c) V (or estimate) e instructions)	(d) Date received
		-		
		-		

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

BAA

(e)
Transfer of gift
Relationship of transferor to transferee

BAA

Transferee's name, address, and ZIP + 4

2009	Federal Statements	Page 1
Client 1850	THE D.E.K. FAMILY FOUNDATION, INC.	86-09316 0
1/12/10		09 15AI
Statement 1 Form 990-PF, Part I, Line 6a Net Gain (Loss) from Noninv Assets Not Included in Part I	entory Sales Per Books V	
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold:	VARIOUS WELLS ACCT ****8555 - SHORT TERM Various Purchase Various	
Gross Sales Price: Cost or Other Basis:	181,092. 203,776.	
Basis Method:	Cost Gain (Loss)	-22,684.
Description: Date Acquired: How Acquired: Date Sold:	VARIOUS WELLS ACCT ****8555 - LONG TERM Various Purchase Various	
To Whom Sold: Gross Sales Price:	256,613.	
Cost or Other Basis: Basis Method:	353,732. Cost Gain (Loss)	-97,119.
	Total \$	
		119,003.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees	,	
	(a) (b) Net (c)	(d)
	Expenses Investment Adjusted per Books Income Net Income	Charitable <u>Purposes</u>
ACCOUNTING FEES	Total $\frac{$}{$}$ $\frac{2,925.}{$}$ $\frac{$}{$}$ $\frac{1,463.}{$}$ $\frac{$}{$}$ $\frac{1,463.}{$}$ $\frac{$}{$}$	1,462. 1,462.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
EXCISE TAXES PAYROLL TAXES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 6,529. \$ 6,529. \$ 6,529. 1,856. 928. 928. \$ Total \$ 8,385. \$ 7,457. \$ 7,457. \$	(d) Charitable Purposes 928.

2009	Federal Statements		Page 2
Client 1850	THE D.E.K. FAMILY FOUNDATION, INC.		86-093160
11/12/10			09 15AI
Statement 4 Form 990-PF, Part II, Other Liabilities	Line 22		
PAYROLL LIABILIT	IES		\$ 1,292.
		Total	\$ 1,292.
Statement 5 Form 990-PF, Part III Other Increases	, Line 3		
UNREALIZED GAINS	IN INVESTMENTS		\$ 347,286.
		Total	\$ 347,286.
Statement 6		· . .	
Form 990-PF, Part X\ Foundation Manager	V, Line 1a rs - 2% or More Contributors		
DALTON L KNAUSS			
ELAINE V. KNAUSS			

Statement 7 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
CHRIST LUTHERAN SCHOOL 5675 N 73RD STREET SCOTTSDALE, AZ 85250	NONE	EXEMPT	GENERAL PURPOSE	\$ 10,000.
ENTERPRISE DEVELOPMENT 7910 WOODMONT AVE BETHESDA, MD 20814	NONE	EXEMPT	GENERAL PURPOSE	5,000.
FOOD FOR THE HUNGRY 1224 E WASHINGTON STREET PHOENIX, AZ 85034	NONE	EXEMPT	GENERAL PURPOSE	5,000.
GLOBAL INITIATIVES INC 1928 E HIGHLAND AVE PHOENIX, AZ 85016	NONE	EXEMPT	GENERAL PURPOSE	22,500.
H.E.L.P. P O BOX 58 PAYSON, AZ 85541	NONE	EXEMPT	GENERAL PURPOSE	1,000.

2009	Federal Sta	tements		Page 3
Client 1850	THE D.E.K. FAMILY FO	DUNDATION,	INC.	86-09316 0 6
11/12/10 Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				09.15AM
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
NORMAN MOORE MINISTRIES P O BOX 15827 LONG BEACH, CA 90815	NONE	EXEMPT	GENERAL PURPOSE	\$ 2,500.
PACIFIC GARDEN MISSION 1458 S CANAL STREET CHICAGO, IL 60607	NONE	EXEMPT	GENERAL PURPOSE	1,000.
PAYSON COMMUNITY KIDS 903 E HWY 260 STE 5 PAYSON, AZ 85541	NONE	EXEMPT	GENERAL PURPOSE	1,000.
PAYSON MULTI PURPOSE SENIO CENTER 514 W MAIN STREET PAYSON, AZ 85541	OR NONE	EXEMPT	GENERAL PURPOSE	5,000.
THE COMPASSIONATE FRIENDS P O BOX 3482 PAYSON, AZ 85547	NONE	EXEMPT	GENERAL PURPOSE	1,000.
THE SMILE TRAIN 245 FIFTH AVENUE NEW YORK, NY 10016	NONE	EXEMPT	GENERAL PURPOSE	2,500.
TIME OUT, INC. P O BOX 306 PAYSON, AZ 85547	NONE	EXEMPT	GENERAL PURPOSE	5,000.
UPLIFT MINISTRY P O BOX 808 PAYSON, AZ 85547	NONE	EXEMPT	GENERAL PURPOSE	2,500.
PONDEROSA BAPTIST CHURCH 1800 N. BEELINE HIGHWAY PAYSON, AZ 85541	NONE			2,500.
SCOTTSDALE HEALTHCARE FOUNDATION 10001 N. 92nd Street, Sui- 121 SCOTTSDALE, AZ 85258	N te			100,000.
CROSSWAY INTERNATIONAL 14 Fabra Oaks Road BOERNE, TX 78006	NONE			1,000.
PAYSON SUPPLY LINE 514 E TIMBER DR PAYSON, AZ 85541	NONE			1,000.

2009	Federal State	ements		Page 4
Client 1850	THE D.E.K. FAMILY FO	UNDATION, IN	c.	86-0931606
11/12/10 Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				09.15AM
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
WORLD VISION P O BOX 9716 FEDERAL WAY, WA 98063	NONE		ş	5,000.
			Total 🚦	173,500.

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Page 3 of 85

Amended Date: 2/19/10



Account Number: 2366-8555
DEK FOUNDATION
DALTON KNAUSS PRES
GPS-MODERATE GROWTH
407 S DECISION PINE
PAYSON AZ 85541

JOHN MARTIN JETTER 20551 N PIMA ROAD, SUITE 200 SCOTTSDALE, AZ 85255 (480) 419-2000 Your Financial Advisor:

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or tax advisor regarding specific questions.

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tribution
and Dis
ividends
mary of D
Summ

9		က	4	22	9	7	8	6	Sum	8	Ť	Ŧ	7	
0	/												_	
Amount 0 Bo	11,457.50	8,445.66	0.00	0.00	0.00	0.00	119.17	0.00	0.00	312.91	See Detail Section	0.00	0.00	
×	1a Total Ordinary Dividends	1b Qualified Dividends	22 Total Capital Gain Distributions	Unrecaptured Sec. 1250 Gain		Od Collectibles (98%) Cain	Nondividend Distributions	Federal Income Tax Withheld	ŀ		İ	l		l
Вох	7	1 4	2 2	3 5	3 6	3 6	3 6	,	יני	ی ا	_	000	σ	,

	Summ	Summary of Interest Income		
0	o Box		Amount	
31	-	Interest Income	3,612.03	1939
	3	Interest on U.S. Savings Bonds and Treasury Obligations	728.07 600 1	8
	4	Federal Income Tax Withheld	0.00	
	2	Investment Expenses	0.00	
	9	Foreign Tax Pard	0.00	
	7	Foreign Country or U.S. Possession	See Detail Section	
	00	Tax-Exempt Interest	0.00	
	σ	Specified Private Activity Bond Interest	0.00	
	Summ	Summary of Proceeds from Broker and Barter Exchange		
	Box		Amount	
	19	Date of Sale or Exchange	See Detail Section	
	Ę	CHSIP Number	See Detail Section	
	~	Gross Proceeds Less Commissions and Option Premiums	437,704.44	\cap
	4	Federal Income Tax Withheld	00.00	1
	2	Number of Shares Exchanged	Not Applicable	
	9	Classes of Stock Exchanged	Not Applicable	
	^	Description	See Detail Section	
	12	Cannot Take Loss on Amount in Box 2 if Box is Checked	Not Applicable	

(A)

Statement

100 1A/10 8

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9,582

Amended Date: 2/19/10

Account Number: 2366-8555 DEK FOUNDATION DALTON KNAUSS PRES GPS-MODERATE GROWTH

/10	;)			
140/V	87 / 8720 3	/ 100						
00	1				6	200	0000	
6	-145.23	347.95	202.72	60/90/20	03/14/07	34 7950	00000	
	-405.20	851.18	445.98	60/90/20	12/29/06	38.6900	22,0000	
	-165.71	353.90	188.19	04/08/09	06/22/06	35.3902	10.0000	
-	-233.67	495.46	261.79	03/26/09	06/22/06	35,3902	14.0000	AMDOCSLTD
	-1,546.25	2,365.88	819.63	01/27/09	12/21/07	62.2600	38.0000	
	-523.15	846.68	323.53	01/27/09	09/26/07	56.4455	15.0000	
	-773.47	1,398.97	625.50	01/27/09	01/12/07	48.2406	29.0000	AFLAC INC
-	GAIN/LOSS	ADJ COST/ ORIG COST	PROCEEDS	DATE ACQUIRED CLOSE DATE	DATE ACQUIRED (ADJ PRICE/ ORIG PRICE	OUANTITY	Long Term
	\$22,683.50	\$203,775.68	\$181,091.78					Total - Short Term
	21.74	585.77	607.51	60/50/80	06/26/09	45.0590	13.0000	WYETH
!	-6.47	29.67	90.20	04/08/09	11/20/08	48.3343	2.0000	
	-15.78	151.07	135.29	04/08/09	11/19/08	50.3589	3.0000	
0	-19.05	352.52	333.47	03/26/09	11/19/08	50.3589	7.0000	WESTAMERICA BANCORP
•	120.42	6,145,44	6,265.86	06/12/09	09/15/08	102.4240	6.000.0000	
, , ,	29.52	1,024.24	1,053.76	04/09/09	09/15/08	102.4240	1,000,0000	
	37.57	1,024.24	1,061.81	03/27/09	09/15/08	102.4240	1.000.0000	CPN 4875% DUE 08/01/13 DTD 07/17/08 FC 02/01/09
		,						WALGREEN CO
	-1,090.50	2,866.71	1,776.21	02/19/09	07/31/08	33.7260	85.0000	VALERO ENERGY CORP NEW (VALERO REFNG & MKTING)
	92.81	8,090.00	8,182.81	03/04/09	09/15/08	101.1250	8,000.0000	NOTES CPN 2375% DUE 08/31/10 DTD 08/31/08 FC 02/28/09
•								US TREASURY
	GAIN/LOSS	ADJ COST/ ORIG COST	PROCEEDS	LOSE DATE	DATE ACQUIRED CLOSE DATE	ADJ PRICE/ ORIG PRICE	QUANTITY	Short Term Continued DESCRIPTION



Realized Gain/Loss

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Amended Date: 2/19/10

Se Child ٠,

-122.68 -\$97,119.10 16.29 120.48 -185.15 GAIN/LOSS 327.07 \$353,731.76 \$353,784.12 490.60 ADJ COST/ ORIG COST 3,090.33 1,030.11 204.39 \$256,612.66 305.45 1,046.40 PROCEEDS 3,210.81 03/26/09 ACQUIRED CLOSE DATE 04/09/09 05/18/09 04/08/09 01/03/08 04/27/07 01/03/08 04/27/07 81.7670 ADJ PRICE/ ORIG PRICE 103.0110 81.7670 103.0110 4.0000 6.0000 1,000.0000 3,000.0000 QUANTITY Continued NOTES CALLABLE CPN 5500% DUE 02/01/14 DTD 12/16/03 FC 08/01/04 Total - Long Term DESCRIPTION WYETH Long Term 3M CO

Strut 10

Account Number: 2366-8555 DEK FOUNDATION DALTON KNAUSS PRES GPS-MODERATE GROWTH FARCO

YT117053 002082 053175236117 NNNNN NNNNN 000043

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86-0931606

Form **990-W**

(Worksheet)

For Form 990-PF Purposes Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)

OMB No 1545 0976

	al Revenue Service (Keep for	your	records. Do not send to	the Internal Revenue	Service.)		
1	Unrelated business taxable income expected in the tax year						
2	Tax on the amount on line 1. See instructions for tax computation						
3	Alternative minimum tax (see instructions)					3	
4	Total Add lines 2 and 3					4	,
5	Estimated tax credits (see instructions)					5	
6	Subtract line 5 from line 4					6	
7	Other taxes (see instructions)						
8	Total. Add lines 6 and 7						
9	Credit for federal tax paid on fuels (see ii	nstruc	ctions)			9	
	10a Subtract line 9 from line 8 Note. If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions 10a 5,516.						
	the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c						
c 2010 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c						10c	5,516.
	1	(a) (b) (c)			(d)		
11	Installment due dates (see instructions)	11	5/17/10	6/15/10	9/15/10		12/15/10
12	Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a 'large organization.' (see instructions)	12	1,379.	1,379	. 1.:	379.	1,379.
13	2009 Overpayment. (see instructions)	13	1,379.	1,379		379.	1,379.
14	Payment due. (Subtract line 13 from line 12)	14	0.	0		0.	0.
D A A	For Pananuark Raduction Act Notice Se	0 600	arate instructions				Form 990-W (2010)



Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal-Revenue Service

File a separate application for each return.

• If you a	are filing for an Automatic 3-Mon	th Extension, complet	te only Part I and ched	ck this box				► X		
• If you a	are filing for an Additional (Not A	utomatic) 3-Month Ex	tension, complete on	ly Part II (on pag	ge 2 of this fo	orm).				
	mplete Part II unless you have all						8868.			
Part I	Automatic 3-Month Exte	ension of Time. O	nly submit origin	al (no copies	needed).					
								. 🗀		
•	ion required to file Form 990-T a							▶ [_]		
All other co income tax	orporations (including 1120-C file x returns.	rs), partnerships, REN	AICS, and trusts must	use Form 7004	to request a	n exten	sion of time	to file		
returns not the addition Form 990-	Filing (e-file). Generally, you car ted below (6 months for a corpor nal (not automatic) 3-month exte T. Instead, you must submit the visit www.irs.gov/efile and click of	ation required to file Finsion or (2) you file Fi fully completed and sig	orm 990-T). However orms 990-BL, 6069, o gned page 2 (Part II)	, you cannot file r 8870. aroup re	turns, or a c	electron omposit	ically if (1) y e or consolic	ou want dated		
	Name of Exempt Organization	· · · · · · · · · · · · · · · · · · ·	 	•		Employe	r identification r	umber		
Type or										
print	THE D.E.K. FAMILY	THE D.E.K. FAMILY FOUNDATION, INC.					86-0931606			
File by the due date for		Number, street, and room or suite number If a P O box, see instructions								
filing your return See	2508 E PINE ISLAND	LANE								
instructions	City, town or post office, state, and Zi	P code For a foreign address	s, see instructions							
	PAYSON, AZ 85541									
Check type	e of return to be filed (file a sepa	rate application for ea	nch return).							
Form 9	990	Form 990-T (cor	poration)	[Form 472	0				
Form 9	990-BL	Form 990-T (sec	ction 401(a) or 408(a)	trust)	Form 522	.7				
Form 9	990-EZ	Form 990-T (trus	st other than above)		Form 606	9				
X Form 9	990-PF	Form 1041-A			Form 887	0	****			
Telepho If the o If this i check the ext	one No ► (928) 474-454 organization does not have an offis for a Group Return, enter the other box. If it is for part tension will cover.	4fice or place of busine organization's four diginal of the group, check the onths for a corporation	iss in the United State it Group Exemption N its box	umber (GEN) ttach a list with to 1 990-T) extension	the names a	this is f	for the whole	▶ ☐ group, ers		
The	8/15 , 20 10 , to extension is for the organization		ization return for the c	organization nar	ned above					
•	X calendar year 20 09 or	00		20						
• [tax year beginning	, ²⁰ , ^a	and ending	^{, 20}						
2 If the	s tax year is for less than 12 mo	nths, check reason.	Initial return	Final retu	rn C	hange	ın accounting	period		
3a If this	s application is for Form 990-BL, efundable credits. See instruction	990-PF, 990-T, 4720, ns.	or 6069, enter the te	ntative tax, less	any	3a	\$	0.		
b If the made	s application is for Form 990-PF e. Include any prior year overpa	or 990-T, enter any re ment allowed as a cro	efundable credits and edit	estimated tax p	ayments	3b	\$	0.		
depo See	alance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) ee instructions					3с		0.		
Caution. If payment is	f you are going to make an elect nstructions	ronic fund withdrawal	with this Form 8868,	see Form 8453-	EO and Forn	1 8879-l	EO for			
BAA For	Privacy Act and Paperwork Red	uction Act Notice, see	instructions.				Form 8868 (Rev. 4-2009)		

Form 8868	(Rev 4-2009)			Page 2	
	re filing for an Additional (Not Automatic) 3-Month Extension, complete only F	Part II and check this box	(▶ X	
Note: Only	complete Part II if you have already been granted an automatic 3-month exter	ision on a previously file	d Form 8868.		
If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1)				
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no	o copies neede	d).	
	Name of Exempt Organization	Emp	Employer identification number		
Type or					
print	THE D.E.K. FAMILY FOUNDATION, INC.	86-0931606			
Edo by ibo	Number, street, and room or suite number. If a P.O. box, see instructions	For I	RS use only		
File by the extended due date for	Seely, Mullins & Associates, PC	L			
filing the return See	620 E Highway 260, Suite A				
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions				
	Payson, AZ 85541	L			
	of return to be filed (File a separate application for each return).				
Form 9		Form 1041-A	Form		
Form 9	• • • • • • • • • • • • • • • • • • • •	Form 4720	∐ Form	8870	
Form 9		Form 5227			
	not complete Part II if you were not already granted an automatic 3-month extension	ension on a previously fi	led Form 8868.	·	
	oks are in care of WILLIAM KNAUSS				
	one No (928) 474-4544 FAX No			, m	
	rganization does not have an office or place of business in the United States,		16.11		
	s for a Group Return, enter the organization's four digit Group Exemption Num			is is for the	
3	p, check this box If it is for part of the group, check this box	and attach a list with th	e names and Elivs	or all	
	he extension is for.	10			
	uest an additional 3-month extension of time until 11/15 , 20		, 20		
		, and ending Final return			
	,				
7 State	IN detail why you need the extension TAXPAYER'S PREVIOUS A NSFER ALL FILE INFORMATION TO NEW ACCOUNTANT, WE				
	COMPLETE THE INFORMATION TAX RETURNS 990-PF.			- OTOBIC	
		two tax loss any	7		
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental fundable credits. See instructions	live tax, less any	8a \$	1,500.	
b If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cr	edits and estimated tax			
paym with f	ents made Include any prior year overpayment allowed as a credit and any a form 8868	mount paid previously	8ь\$	6,529.	
c Balar	nce Due. Subtract line 8b from line 8a. Include your payment with this form, or FTD coupon or, if required, by using EnTPS (Electronic Federal Tax Payment	, if required, deposit System). See instrs	8c \$	0.	
********	Signature and Verification	n			
Under penaltie correct, and co	es of perjury, I de lare-that have a nined this term, including accompanying schedules and statement of the large of the l		rledge and belief, it is true	∍,	
Signature >	Title ► V.P./DIR		Date ►		

FIFZ0502L 03/11/09

BAA

Form 8868 (Rev 4-2009)