

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



Form 990-PF

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

OMB No 1545 0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2010, and ending For calendar year 2010, or tax year beginning Final return Initial Return of a former public charity G Check all that apply Initial return Address change Amended return Name change Employer identification number THE STAN AND BETTY KREHBIEL 26-0902791 FAMILY FOUNDATION Telephone number (see the instructions) 13457 W LINKS 316-722-6147 WICHITA, KS 67235 If exemption application is pending, check here D 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization 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 J Accounting method X Cash 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 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here 145,791 Part I Analysis of Revenue and (c) Adjusted net (d) Disbursements (b) Net investment (a) Revenue and Expenses (The total of amounts in for charitable income expenses per books income columns (b), (c), and (d) may not neces sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) 50,000 Contributions, gifts, grants, etc, received (att sch) if the foundn is not req to att Sch B Interest on savings and temporary 717 717 717 cash investments Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances **b** Less Cost of ×. 18 × acods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 717 717 . 717 13 Compensation of officers, directors, trustees etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 1.429 1,429 SEE ST 1 Interest හා (Jags Tattath schedule) see Inter). Depreciation (attach sch) and depletion cchbabex 1 Printing and publications Other expenses (attach schedule) Total operating and administrative 1,429 expenses. Add lines 13 through 23 1,429 16,500. Contributions, gifts, grants paid PART XV 16,500 Total expenses and disbursements. 16,500. 0 17,929 1,429 Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses 32,788 and disbursements 0 **b** Net investment income (if negative, enter 0)

C Adjusted net income (if negative, enter 0-)

717.

Form 990-PF (2010)

1 113,003. end-of-year figure reported on prior year's return) 32,788. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 145,791 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 6 145,791 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

2-story brick warehouse or common stock 200 shares MI C Company)					(C) Date acquired (month, day, year)	(d) Date sold (month day, year)
	N/A			D — Donatio	<u> </u>	
b					-	· · · · · · · · · · · · · · · · · · ·
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) n	
a					·	
<u>b</u>						
<u>c</u>						
<u>d</u>						_
e		ng gain in column (h) and owned by	the foundation on 12/21/60			
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	(1)	(i) Gains (Col gain minus column (than -0-) or Losses (f	k), but not less
a					 -	
<u>-</u>						
С						
d						
е						
2	Capital gain net income or (net	capital loss) — If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6)	1	[
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see the instructions)) If (loss), enter -0-		3	
Par	t V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	ent Incom	ne	
if sec Was	ction 4940(d)(2) applies, leave the	e foundations subject to the section on the part blank tion 4942 tax on the distributable an off under section 4940(e). Do not co	nount of any year in the bas		Yes	☐ No
		n each column for each year, see th		g anv entrie	es	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distributio (column (b) divided	
	2009					
	2008					
	2007					
	2006		<u> </u>			
	2005		· · · · · · · · · · · · · · · · · · ·			
2	Total of line 1, column (d)			<u> </u>	2	· · · · · · · · · · · · · · · · · · ·
3	Average distribution ratio for th number of years the foundation	ie 5-year base period – divide the to n has been in existence if less than	otal on line 2 by 5, or by the 5 years		3	
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5					4	
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	
7	Add lines 5 and 6			Γ	7	
8	Enter qualifying distributions from	om Part XII. line 4			8	
-	If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions					

Form	990-PF (2010) THE STAN AND BETTY KREHBIEL 26-0902791		Р	age 4
Part		tions)		<u> </u>
	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,			0.
	check here ▶ and enter 1% of Part I, line 27b			j
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-)			0.
3	Add lines 1 and 2.			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
-	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	1		<u>0.</u> ,
	Credits/Payments	» + »		
	2010 estimated tax pmts and 2009 overpayment credited to 2010	· 👌	, ,	
	Exempt foreign organizations — tax withheld at source	,		
	Tax paid with application for extension of time to file (Form 8868)	. * .	, «	7
	Backup withholding erroneously withheld Table and to and to a second of the second of	*		Z 13
	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here If Form 2220 is attached 8			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			_
	Enter the amount of line 10 to be Credited to 2011 estimated tax			
	t VII-A Statements Regarding Activities			
		T	Yes	No
1 4	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?	1 a		Х
h	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		` ; , ,	
	Did the foundation file Form 1120-POL for this year?	1 c		X
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 (3) On foundation managers		, ` •	7
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1 -		8
	foundation managers • \$ 0.		- w:	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	ا مراق کی مسلم	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N.	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			12.3
	By language in the governing instrument, or	1 6	Section.	23 *33
	• 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	<u> </u>
	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	F . 3
8 <i>a</i>	Enter the states to which the foundation reports or with which it is registered (see the instructions) KS	Ť		
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 <i>General Instruction G² If 'No,' attach explanation</i>	8b	X	
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? 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	10		Х
BAA	, F	orm 9 9	0-PF	(2010)

rai	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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► DONALD B. HARRIS, CPA Telephone no ► 972-50	03-1	040	
	Located at ► 12221 MERIT DR, SUITE 750 DALLAS TX ZIP + 4 ► 75251	-	_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year		V	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
,,	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ►			*
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 :	a During the year did the foundation (either directly)		٠	, ¶
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			, ,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		-	, , ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		* ,	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	\ \ \\		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No		·•	\$ 1 P
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			\$ (T
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No		`	
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here		*`	. 4
,	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 2010?	1c	_	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))		, , , , , , , , , , , , , , , , , , ,	
	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? Yes X No		ang.	
	If 'Yes,' list the years ▶ 20 , 20 , 20		1.	-7
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see the instructions)	2 b	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 here 20, 20, 20, 20		·'-	7,3
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		,	
	b If 'Yes,' did it have excess business holdings in 2010 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 2010)	3b	 N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	,	X
	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 2010?	4b		x
BA	A Fo	orm 99	0-PF	(2010)

Form 990-PF (2010) THE STAN AND BETTY		4700 M . D . D		902791 Page
Part VII-B Statements Regarding Activiti		14/20 May Be Requ	uirea (continuea)	·
5a During the year did the foundation pay or incur(1) Carry on propaganda, or otherwise attemp	•	n (section 4945(e))?	Yes [X No
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section ition drive?	4955), or to carry	Yes [X No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	X No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	X No			
(5) Provide for any purpose other than religious educational purposes, or for the prevention	X No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	5b N/A
Organizations relying on a current notice regains	rding disaster assistand	ce check here	►[
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure respons If 'Yes,' attach the statement required by Regu	sibility for the grant?	·	N/A Yes [No .
6a Did the foundation, during the year, receive ar on a personal benefit contract?			∐Yes [X No
b Did the foundation, during the year, pay premi If 'Yes' to 6b. file Form 8870	ums, directly or indirec	tly, on a personal benef	it contract?	6b X
7a At any time during the tax year, was the found	dation a party to a prohi	ibited tax shelter transa	ction? Yes	X No
b If yes, did the foundation receive any proceeds				N/A 7b
Part VIII Information About Officers, Di and Contractors	irectors, i rustees,	Foundation Manag	jers, Hignly Pald	Employees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(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	other allowances
SEE STATEMENT 2			compensation	
		0.	l c	0.
2 Compensation of five highest-paid employee	s (other than those inc	cluded on line 1 – see ii	nstructions). If none,	enter 'NONE.'
(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	other allowances
NONE				
Total number of other employees paid over \$50,000)		<u> </u>	>
BAA	TEEA0306L	07/23/10		Form 990-PF (201)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hand Contractors (continued)	ighly Paid Employees,
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 ser	vice (c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	> 0
	<u>_</u>
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 num organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ber of Expenses
1 N/A	
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	a 1 and 2 Amount
1 N/A	- Turis E
2	
All other program-related investments. See instructions	
•	1
·	
Total. Add lines 1 through 3	▶ 0.
BAA	Form 990-PF (2010)

26-0902791

Page 7

Form 990-PF (2010) THE STAN AND BETTY KREHBIEL

see instructions.)	art. i oreigii iot	
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	1 a	
b Average of monthly cash balances	1 b	108,940.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	108,940.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e	0.	
2 Acquisition indebtedness applicable to line 1 assets.	2	0.
3 Subtract line 2 from line 1d	3	108,940.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,634.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	107,306.
6 Minimum investment return. Enter 5% of line 5	6_	5,365.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private		ndations
and certain foreign organizations check here ► and do not complete t	this part.)	
1 Minimum investment return from Part X, line 6	1	5,365.
2a Tax on investment income for 2010 from Part VI, line 5		
b Income tax for 2010 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	5,365.
4 Recoveries of amounts treated as qualifying distributions	4_	
5 Add lines 3 and 4	5	5,365.
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	5,365.
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	1 a	16,500.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3ь	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line	4 4	16,500.
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	16,500.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whether the found	ation
BAA		orm 990-PF (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				5,365
2 Undistributed income, if any, as of the end of 2010				3,303
a Enter amount for 2009 only			0	
b Total for pnor years 20, 20, 20		0		
3 Excess distributions carryover, if any, to 2010				
a From 2005		{		
b From 2006	7			
c From 2007	7			
d From 2008 7, 676	7			
e From 2009 631	7			
f Total of lines 3a through e	8,307	}		
4 Qualifying distributions for 2010 from Part				
XII line 4 ► \$16,500_				
a Applied to 2009, but not more than line 2a			0	
 Applied to undistributed income of prior year (Election required — see instructions) 	s	0		
c Treated as distributions out of corpus (Election required — see instructions)	o			
d Applied to 2010 distributable amount				5,365
e Remaining amount distributed out of corpus	11,135			
5 Excess distributions carryover applied to 2010	0			0
(If an amount appears in column (d), the same amount must be shown in column (a)	, [
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	19,442			
•				
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistribut ed income for which a notice of deficiency	ł	i .		
has been issued, or on which the section		١		
4942(a) tax has been previously assessed		0		<u> </u>
d Subtract line 6c from line 6b Taxable amount — see instructions	}	0		
				
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount — see instructions			0	
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be	S			
distributed in 2011				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed		1		
by section 170(b)(1)(F) or 4942(g)(3)	0			
(see instructions)	\	<u> </u>	······································	
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2011 Subtract lines 7 and 8 from line 6a	19,442			
10 Analysis of line 9				
a Excess from 2006		İ		
b Excess from 2007]	li	
c Excess from 2008 7,676				
d Excess from 2009 631				
e Excess from 2010 11, 135				<u> </u>

Form 990-PF (2010) THE STAN AND BETTY KREHBIEL 26-0902791					Page 10	
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling						
b Check box to indicate whether the foundation		erating foundation de		4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1		
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total	
b 85% of line 2a			<u> </u>	<u> </u>		
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities				_		
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 						
Complete 3a, b, or c for the alternative test relied upon						
a 'Assets' alternative test - enter						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test — enter						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Part:XV Supplementary Information assets at any time during the	(Complete this e year — see ir	part only if the structions.)	organization h	ad \$5,000 or mor	e in	
a List any managers of the foundation who h	 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) 					
b List any managers of the foundation who ca partnership or other entity) of which the	wn 10% or more of	of the stock of a cor	poration (or an equ	ally large portion of the	ne ownership of	
NONE	oundation has a h	on greater intere				
2 Information Regarding Contribution, Gran	t, Gift, Loan, Sch	olarship, etc. Progra	ams:			
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions.						
complete items 2a, b, c, and d a The name, address, and telephone numbe	r of the person to	whom applications	should be addresse	d		
a The name, address, and telephone number of the person to whom applications should be addressed						
SEE STATEMENT 4						
b The form in which applications should be submitted and information and materials they should include						
SEE STATEMENT FOR LINE 2A						
c Any submission deadlines						
SEE STATEMENT FOR LINE 2A						
d Any restrictions or limitations on awards, s	such as by geograp	ohical areas, charita	able fields, kinds of	institutions, or other	factors	
SEE STATEMENT FOR LINE 2A						

3 Grants and Contributions Paid During the	If recipient is an industrial			1
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	0077113011071	
a Paid during the year				
SEE STATEMENT 5				
		1		
		1		
		1		
		1		
		·		
		İ		
Total		Т	▶ 38	16,500.
b Approved for future payment				
		1		
]		İ
		1		
		1		
			İ	
		1		
			!	
	<u> </u>	<u> </u>		
Total			► 31	Ы

gross amounts unless otherwise indicated	Unrelated	business income	Excluded by s	ection 512, 513, or 514	(e)
Decree covers revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions
Program service revenue:	-		code		
	 		 		
	1	· · · · · · · · · · · · · · · · · · ·			
		<u> </u>			
					
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	717.	
Dividends and interest from securities					
Net rental income or (loss) from real estate.		<u></u>		····	
Debt-financed property			 		
Not debt-financed property					
Net rental income or (loss) from personal property			-	<u> </u>	
Other investment income					
Gain or (loss) from sales of assets other than inventory	-		 		
Net income or (loss) from special events Gross profit or (loss) from sales of inventory	 				
Gross profit or (loss) from sales of inventory Other revenue	 		 	-	,
other revenue			1		
)	1				
	1				
1					
Subtotal Add columns (b), (d), and (e)				717.	
Total. Add line 12, columns (b), (d), and (e)				13	71
worksheet in line 13 instructions to verify calculate	ions)				
t XVI-B Relationship of Activities to th	e Accomplis	shment of Exemi	ot Purpose	es	
			· .		
le No. Explain below how each activity for which accomplishment of the foundation's exemp	income is repoi of purposes (off	rted in column (e) of her than by providing	Part XVI-A c funds for suc	ontributed importan ch purposes) (See	tly to the the instructions)
N/A					
N/A					·····
					·
				** -	
					<u>_</u>

Form 990-PF (2010) THE STAN AND BETTY KREHBIEL 26-0902791

Part XVII: Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

						⊶, → √ Yes No		
1 Did the or	rganization directly	or indirectly en	gage in any of the following	with any oth	er organization			
	l ın section 501(c) o o political organizati		ner than section 501(c)(3) or	ganizations)	or in section 52/,			
			a noncharitable exempt orgai	nization of				
	1 a (1) X							
(1) Cash								
(2) Other								
b Other trai	1b(1) X							
(1)								
(2) Purch	nases of assets from	n a noncharitat	ole exempt organization			1 b (2) X		
(3) Renta	al of facilities, equip	ment, or other	assets			1 b (3) X		
(4) Reim	bursement arranger	ments				1 b (4) X		
(5) Loans	s or loan guarantees	s				1 b (5) X		
(6) Perfo	1 b (6) X							
c Sharing o	of facilities, equipme	ent, mailing list	s, other assets, or paid emp	lovees		1c X		
_								
the goods	s otherassets ors	ervices aiven t	complete the following sched by the reporting foundation I now in column (d) the value of	f the foundat	ion received less than fa	air market value in		
	(b) Amount involved	,	f noncharitable exempt organization			actions, and sharing arrangements		
/A	(b) rimount involved	(o) mamo on		7-7-2		<u> </u>		
	· · · · · · · · · · · · · · · · · · ·							
								
								
	· · · · · · · · · · · · · · · · · · ·		<u> </u>			·		
					······································			
	 -							
					_			
t					-			
				- 				
		J						
describe	d in section 501(c) o	of the Code (ot	ated with, or related to, one of her than section 501(c)(3)) of	or more tax-e or in section (exempt organizations 527?	Yes XNo		
	complete the follows			 				
	Name of organizati	ion	(b) Type of organiza	tion	(c) Descrip	tion of relationship		
N/A								
	· - · · -							
Under po	enalties of perjury, I declar	re that I have exami	ined this return, including accompanyi than taxpayer or fiduciary) is based or	ng schedules and	statements, and to the best of	my knowledge and belief, it is true.		
I	and complete peciaration	of preparer (other)	than taxpayer or inductary) is based or	i an imormation (or writer preparer has any known	euge		
Sign	1/20	8 1 . M. []	(a V	16	120/11			
lere 🕨 🚤	XXXXXX	ARKU			,,	ESIDENT		
Sig	nature of officer or trustee			Date	Title	Driv		
	Print/Type preparer's nai		Preparer's signature		Date			
Paid	DONALD B. HA	ARRIS, CPA	A DONALD B. HAR	RIS, CPA	9/28/11 self-er	mployed N/A		
reparer	Firm's name	BEAIRD HAF	RRIS & CO. P.C.		Firm's EIN	► N/A		
Jse Only		12221 MERI	IT DR STE 750					
736 Olliy	1 Firm's address		75251-3201		Phone no	(972) 503-1040		
BAA					1	Form 990-PF (2010)		
						. 5 (=0.0)		

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

2010

Name of the organization THE STAN AND BETT	Employer identification number				
FAMILY FOUNDATION		26-0902791			
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated a 527 political organization	as a private foundation			
Form 990-PF X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a	private foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the G Note. Only a section 501(c)(7), (8), or (10) org	ieneral Rule or a Special Rule ganization can check boxes for both the General Rule and	d a Special Rule See instructions			
General Rule	- 000 PT II / II / II / II / II / II / II				
Contributor. (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or mo	ore (in money or property) from any one			
Special Rules					
509(a)(1) and 170(b)(1)(A)(vi), and receive	Form 990 or 990-EZ, that met the 33-1/3% support test or ed from any one contributor, during the year, a contribution t VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts	on of the greater of (1) \$5,000 or			
For a section 501(c)(7), (8), or (10) organic aggregate contributions of more than \$1,00 the prevention of cruelty to children or anii	zation filing Form 990 or 990-EZ, that received from any 00 for use <i>exclusively</i> for religious, charitable, scientific, mals. Complete Parts I, II, and III	one contributor, during the year, literary, or educational purposes, or			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use <i>exclusively</i> 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 <i>exclusively</i> religious, charitable, etc, purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively					
religious, charitable, etc, contributions of \$	5,000 or more during the year	► \$			
Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their 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 990-PF)					
BAA For Paperwork Reduction Act Notice, s 990EZ, or 990-PF.	see the Instructions for Form 990, Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2010)			

Name of organization	anization CAN AND BETTY KREHBIEL		Employer identification number 26–0902791
	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution
1	STANLEY AND BETTY KREHBIEL 13457 W LINKS	\$ 50,	Person X Payroll Noncash
	WICHITA, KS 67235		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) Type of contribution ns
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	e Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	e Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2010)

of 1 of Part I

Page 1

of 1

of Part II

Name of organization

THE STAN AND BETTY KREHBIEL

Employer identification number 26-0902791

Part II. Noncash Property (see instructions) (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I N/A (a) No. from (c) FMV (or estimate) (see instructions) (d) Date received (b) Description of noncash property given Part I (a) No. from Part I (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 (a) No. from Part I (b)
Description of noncash property given (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) (d) Date received (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

26-0902791 THE STAN AND BETTY KREHBIEL Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000** or less for the year (Enter this information once See instructions) N/A (c) (d) (a) (b) No. from Use of gift Purpose of gift Description of how gift is held Part I N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) (b) (c) (d) No. from Purpose of gift Use of gift Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) (b) (c) (d) No. from Purpose of gift Use of gift Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (c) (d) (a) (b) No. from Purpose of gift Use of gift Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

20	J.
ZU	u

FEDERAL STATEMENTS

PAGE 1

THE STAN AND BETTY KREHBIEL FAMILY FOUNDATION

26-0902791

STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION	TOTAL	\$ 1,429. \$ 1,429.	\$ 1,429. \$ 1,429.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED			ACCOUNT/
STANLEY E KREHBIEL 13457 W LINKS WICHITA, KS 67235	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.
BETTY S KREHBIEL 13457 W LINKS WICHITA, KS 67235	VICE PRESIDENT 0	0.	0.	0.
STANLEY E KREHBIEL, JR 7604 O'NEIL WICHITA, KS 67212	SECRETARY 0	0.	0.	0.
TEDDI ANNE KREHBIEL 7604 O'NEIL WICHITA, KS 67212	DIRECTOR 0	0.	0.	0.
RENEE J JOHNSON 532 SOUTH 33RD LINCOLN, NE 68510	TREASURER 0	0.	0.	0.
EMILY COPPER 5412 MARTIN LINCOLN, NE 68504	DIRECTOR 0	0.	0.	0.
CORTNEY COPPER 4415 E JOAN DE ARC AVE PHOENIX, AZ 85032	DIRECTOR 0	0.	0.	0.
	TOTAL	\$ 0.	<u>\$0.</u>	\$ 0.

2010

FEDERAL STATEMENTS

THE STAN AND BETTY KREHBIEL **FAMILY FOUNDATION**

PAGE 2

26-0902791

STATEMENT 3 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

STANLEY E KREHBIEL BETTY S KREHBIEL

STATEMENT 4 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM:

NAME:

CARE OF: STREET ADDRESS:

CITY, STATE, ZIP CODE:

TELEPHONE:

FORM AND CONTENT:

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: STANLEY E KREHBIEL

13457 W LINKS

WICHITA, KS 67235

THE CORPORATION SHALL MAKE GRANTS/GIFTS PRIMARILY FOR HUMANITARIAN PURPOSES AND PREFERENCE SHALL BE GIVEN TO

RELIGIOUS ORGANIZATIONS AND SUPPORTING YOUTH

ORGANIZATIONS.

STATEMENT 5 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SALVATION ARMY 350 N MARKET WICHITA, KS 67202	CHARITABLE GIFT	501C3	TO PROVIDE COUNSELING AND NECESSITIES TO PERSONS IN NEED	\$ 7,500.
MENNONITE CENTRAL COMMITTEE 121 E 30TH STREET NORTH NEWTON, KS 67117	CHARITABLE GIFT	501C3	TO PROVIDE SUPPORT TO PEOPLE SUFFERING FROM POVERTY, CONFLICT, AND NATURAL DISASTER	3,000.
WICHITA CHILDREN'S HOME 810 N HOLYOKE WICHITA, KS 67208	-CHARITABLE-GIFT	501C3	TO PROVIDE SUPPORT AND CARE TO HOMELESS CHILDREN	5,000.
UNITY CHURCH 2160 N TILLER WICHITA, KS 67208	CHARITABLE GIFT	501C3	TO SUPPORT SPIRITUAL ACTIVITIES	500.

2010

FEDERAL STATEMENTS

THE STAN AND BETTY KREHBIEL FAMILY FOUNDATION

PAGE 3

26-0902791

STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRANT	OF	AMOUNT
INTER-FAITH MINISTRIES 829 NORTH MARKET WICHITA, KS 67214	CHARITABLE GIFT	501C3	TO SUPPORT SPIRITUAL ACTIVITIES.		\$ 500.
				TOTAL	\$ 16,500.

Q -I		ह्य					 		 		 		
PAGE 2 26-0902791		DECEMBER	124,010 124,010										
P/		NOVEMBER	2,204										
			102,										
		OCTOBER	102,155 102,155										
		SEPTEMBER	102,817 102,817										
			1 1										1
		AUGUST	103,476 103,476										
ETS 31EL		JULY	105,918 105,918										
SHEE KREHE TION		r-1											
ORK BETTY SUNDA		JUNE	108,357 108,357										
EDERAL WORKSHEETS THE STAN AND BETTY KREHBIEL FAMILY FOUNDATION		MAY	108,298 108,298	12									
EDEF HE STA													
<u></u> ⊢		APRIL	110,732 110,732	HS									
		MARCH	113,167 113,167	NUMBER OF MONTHS	108,940								
:	ANCES			NUMBER	10								
	AVERAGE MONTHLY CASH BALANCES FORM 990-PF, PART X, LINE 1B	FEBRUARY	113,108 113,108										
	-Y CAS TX, LII	- 1		283	H BALAI						-	-	
	TONTHI F, PAR	JANUARY	113,041 113,041	1,307,283	AVERAGE MONTHLY CASH BALANCES								
	AGE M 1 990-P	BAL.	GES	ALS	SE MONT								
2010	AVER	CASH BAL.	AVERAGES	TOTALS	AVERAC								
	<u>l</u>												

Form 8868	(Rev 1-2011)				Page 2			
• If you a	are filing for an Additional (Not Automatic) 3-Mont	h Extensio	n, complete only Part II and check t	his box	► X			
Note. Only	complete Part II if you have already been granted	an automa	tic 3-month extension on a previous	sly filed Form 8868.				
• If you a	are filing for an Automatic 3-Month Extension, cor	nplete only	Part I (on page 1).					
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time. Only file the original (r	no copies needed).				
	Name of exempt organization			Employer identification number				
Type or print	THE STAN AND BETTY KREHBIEL FAMILY FOUNDATION			26-0902791				
	Number, street, and room or suite number. If a P O box, see inst	ructions.						
File by the extended								
due date for filing the	13457 W LINKS							
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address	ss, see instructi	ons.					
mouncions.	WICHITA, KS 67235							
	middlin, No 0/200							
Enter the I	Return code for the return that this application is fo	or (file a sej	parate application for each return)		04			
Application Is For	n	Return Code	Application Is For		Return Code			
Form 990		01		POLICE TO SERVE METERS	3X214			
Form 990-	BL	02	Form 1041-A		08			
Form 990-		03	Form 4720		09			
Form 990-	PF	04	Form 5227		10			
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069		11			
	T (trust other than above)	06	Form 8870		12			
	not complete Part II if you were not already grant	ed an autor	natic 3-month extension on a previ	ously filed Form 8868.				
	oks are in care of DONALD B. HARRIS, (
			972-503-1120					
•	organization does not have an office or place of bu			•	►□			
	is for a Group Return, enter the organization's four				is for the			
	up, check this box > 🗍 . If it is for part of the gi				f all			
_	the extension is for.							
		11/15	, 20 11.					
5 For	juest an additional 3-month extension of time until calendar year 2010 , or other tax year beginning tax year entered in line 5 is for less than 12 mon	ng	, 20 _ , and ending	, 20				
6 If the	e tax year entered in line 5 is for less than 12 mon	ths, check i	reason: Initial return	, 20 Final return				
	Change in accounting period							
7 State	e in detail why you need the extension	AYER RE	SPECTFULLY REQUESTS AD	DITIONAL TIME TO)			
	THER INFORMATION NECESSARY TO FI							
non	is application is for Form 990-BL, 990-PF, 990-T, 4 refundable credits. See instructions		<u> </u>	8a \$	0.			
	is application is for Form 990-PF, 990-T, 4720, or 6 ments made. Include any prior year overpayment a Form 8868.		the second contract of the property	d tax substitution of the state	0.			
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions								
			d Verification		0.			
Under penalti correct, and o	ies of perum. I declare that have examined this form, including accomplete, and that I am authorized to depare this form.			nowledge and belief, it is true,	,			
Signature	Let IN CPA Title	CPA	<u>-</u>	Date > 08/15	5/11			
BAA	BAA FIFZ0502L 11/15/10 Form 8868 (Rev 1-20							