### 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.

2010

For calendar year 2010, or tax year beginning 8/1/2010 , and ending 7/31/2011 G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Mark and Barbara Denton Family Foundation, Inc. 27-0213311 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see page 10 of the instructions) Room/suite 15537 Sandlands Cir (502) 876-5172 City or town, state, and ZIP code C If exemption application is pending, check here ▶ Noblesville D 1. Foreign organizations, check here . . . . H Check type of organization: Section 501(c)(3) exempt private foundation 2. Foreign organizations meeting the 85% test. Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation check here and attach computation. If private foundation status was terminated Fair market value of all assets at end J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) of year (from Part II, col. (c), F If the foundation is in a 60-month termination line 16) ▶ \$ (Part I, column (d) must be on cash basis.) 20.922 under section 507(b)(1)(B), check here (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes the amounts in column (a) (see page 11 of the instructions).) books (cash basis only) 18,675 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments Dividends and interest from securities . . . . 0 0 **5 a** Gross rents . . . . . . . . 0 **b** Net rental income or (loss) 6 a Net gain or (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) Net short-term capital gain . . . . . . . Income modifications . . . . . 0 10 a Gross sales less returns and allowances 0 **b** Less: Cost of goods sold . . . . c Gross profit or (loss) (attach schedule) . . . . . 0 11 Other income (attach schedule) . . . . 0 O Total. Add lines 1 through 11 . 12 2 18.677 13 Compensation of officers, directors, trustees, etc. 0 14 Other employee salaries and wages . . . . . . 15 Pension plans, employee benefits . . . . . 0 0 0 0 16 a Legal fees (attach schedule) . . . 0 0 0 **b** Accounting fees (attach schedule) . . . . . 0 and Administrative 0 0 0 c Other professional fees (attach schedule) . . . 0 17 3 0 18 3 Taxes (attach schedule) (see page 14 of the instructions) . . . 19 0 0 Depreciation (attach schedule) and depletion . . 20 21 Travel, conferences, and meetings . . . . . 22 Printing and publications . . . . 23 1,008 0 0 0 Other expenses (attach schedule) . . . . . . 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . . . . 1,011 25 7,860 Contributions, gifts, grants paid . . . . . . . . . 7.860 26 Total expenses and disbursements. Add lines 24 and 25. 8,871 3 0 7,860 Subtract line 26 from line 12: 9,806 a Excess of revenue over expenses and disbursements . **b Net investment income** (if negative, enter -0-). c Adjusted net income (if negative, enter -0-) . . .

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	<u>End (</u>	of year
		should be for end-or-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	6,113	<u>6,918</u>	6,918
	2	Savings and temporary cash investments	5,003	14,004	14,004
	3	Accounts receivable   0			
	_	Less: allowance for doubtful accounts	0	0	0
	4	Pledges receivable   0			
	_	Less: allowance for doubtful accounts	0	0	0
	5 6	Grants receivable	· · · · · · · · · · · · · · · · · · ·		
	0	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the			
		instructions)	ام	0	n
	7	Other notes and loans receivable (attach schedule)			
m	'		0	0	0
Assets	8	Less: allowance for doubtful accounts  Ultimorphism of the state of th	<u> </u>		
SS	9	Prepaid expenses and deferred charges			
⋖		Investments—U.S. and state government obligations (attach schedule)	0		
		D Investments—corporate stock (attach schedule)	0		
		Investments—corporate stock (attach schedule)	0		
	11				
	'''		0	0	
	12	toos abbandado doprobador (alabar bonotalo)	<del></del>		
	13	Investments—mortgage loans	0	0	
	14	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis  Less: accumulated depreciation (attach schedule)	O		
	4.5		0		0
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	11,116	20,922	20,922
	17	Accounts payable and accrued expenses	11,110	20,322	20,322
	18	Grants payable			
es	19				
Ĭ		Deferred revenue	0		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0		Marine Committee of the state of
===	21	Mortgages and other notes payable (attach schedule)	0	0	
	22	Other liabilities (describe  Total liabilities (add lines 17 through 22)	0		Marie Committee of the
	23				
		Foundations that follow SFAS 117, check here			
alances		and complete lines 24 through 26 and lines 30 and 31.	44.440	00.000	
Ĕ	24	Unrestricted	11,116	20,922	
	25	Temporarily restricted			
8	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds.			1.1.1.20 (1.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
Ä	30	Total net assets or fund balances (see page 17 of the	44 440	20.022	
é		instructions)	11,116	20,922	Parking Parking of the Parking of the
~	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	44.440	20.000	
Do	- III	of the instructions)	11,116	20,922	
	rt III	Analysis of Changes in Net Assets or Fund Balances	30 (must agree with		
1		net assets or fund balances at beginning of year—Part II, column (a), line		1	11,116
2		of-year figure reported on prior year's return)			9,806
_					9,800
3		increases not included in line 2 (itemize)			20,922
5				5	20,922
_		eases not included in line 2 (itemize)  net assets or fund balances at end of year (line 4 minus line 5)—Part II, o			20.922
0	ı Ulal	not assets of futio balances at one of year time 4 filling line of—Fait II, t	, , , , , , , , , , , , , , , , , , ,		1 70 977

	(a) List and describe the	e kind(s) of property sold (e.g., real est se; or common stock, 200 shs. MLC C	ate,	(b) How acquired P—Purchase		Date acquired	(d) Date sold
1a				D—Donation		110., day, yr.,	(mo., day, yr.)
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	r other basis ense of sale		(h) Gain (e) plus (f)	
<u>a</u>	0	0		0			0
b		0		0			0
<u>c</u>	0	0		0			0
e				0			0
_	Complete only for assets show	ving gain in column (h) and owner	d by the foundation			(I) Gains (Col	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i)		(I) Gains (Col. col. (k), but not Losses (fro	ess than -0-) or
а	0	0		0			0
b	0	0		0			0
C	0	0		0			0
d		0		0			0
е		0		0			0
	Capital gain net income or	(net capital loss) { If (loss),	also enter in Pa enter -0- in Pa	rt I, line 7	2		0
3		or (loss) as defined in section					
		line 8, column (c) (see pages		( )			•
		r -0- in Part I, line 8			3		0
		der Section 4940(e) for Reprivate foundations subject to					
Wa	Yes," the foundation does n	ne section 4942 tax on the dis ot qualify under section 4940	(e). Do not com	plete this part.			Yes No
1		ount in each column for each	year; see page	18 of the instruc	tions	before making	
С	(a) Base period years alendar year (or tax year beginning i	(b) Adjusted qualifying distributio	ns Net value	(c) of noncharitable-use a	assets (col. (b) divided by col. (c))		
	2009						0.000000
	2008				$ \longrightarrow $		0.000000
	2007				$\dashv$		0.000000
	2006						0.000000
	2005				-		0.000000
						2	0.000000
	the number of years the fo	undation has been in existence	e if less than 5	years		3	0.000000
4	Enter the net value of nonc	charitable-use assets for 2010	from Part X, lii	ne 5	.	4	
5 Multiply line 4 by line 3						0	
6	Enter 1% of net investmen	t income (1% of Part I, line 27	'b)		.	6	0
7	Add lines 5 and 6					7	0
8		ns from Part XII, line 4 er than line 7, check the box i page 18.				8 part using a 19	6 tax rate. See

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see p	age 1	8 of th	e inst	ructi	ions)	
1 a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	34.054M					
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		net L			1000	
L	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1 1	and the same		U.	- Marin	
,	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	1466			4		
•	of Part I, line 12, col. (b).	howwell depth (Bept)	OK CANADA STATE			1965. VINCON	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0		
3	Add lines 1 and 2	3			0		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			0		
6	Credits/Payments:	AAJAK		FORT X			
a	2010 estimated tax payments and 2009 overpayment credited to 2010   6a   0						
t	Exempt foreign organizations—tax withheld at source	ile Sisse	Tare S	1000	k design	120 46,7	
(	Tax paid with application for extension of time to file (Form 8868) 6c 0	100	453		G##	W.	
c	Backup withholding erroneously withheld	77.54			19.2		
7	Total credits and payments. Add lines 6a through 6d	7			0		
В	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0		
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0		
1	Enter the amount of line 10 to be: Credited to 2011 estimated tax   ▶ 0 Refunded ▶	11			0		
Рa	rt VII-A Statements Regarding Activities						
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			No.	Yes	No	
	participate or intervene in any political campaign?			1a		X	
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the						
	instructions for definition)?			1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			127 (7 ) 1 1 (20)	9- 5		
	published or distributed by the foundation in connection with the activities.				NA.		
(	Did the foundation file Form 1120-POL for this year?			1c		Х	
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			Y Yar	2 3 MORNEY WW.	Parking.	
	(1) On the foundation.   \$				Andrea Service	700	
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			S. Kain	N. T. Valencia		
	on foundation managers.   \$			4 14		100	
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.			1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			Okize State			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_		X	
4 a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X	
t	o If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	Щ.	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	Continue of C	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:			There's	E Design		
	By language in the governing instrument, or					PE,	
	By state legislation that effectively amends the governing instrument so that no mandatory directions					250,	
_	that conflict with the state law remain in the governing instrument?			6	X	ļ	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and the foundation have at least \$5,000 in assets at any time during the year?	and Pa	art XV.	7	_X	A	
o a	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the				Area Milani		
	instructions) N						
ľ	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney						
0	General (or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	墨列	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	١.2				Sec. and	
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27 If "Yes," complete Part XIV	) !		۵.		_	
0	If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing			9		X	
•	Die any persons become substantial contributors during the tax year: If 165, attach a schedule listlig						

FOITH	1 990-PF (2010) Mark and Barbara Denton Family Foundation, Inc. 27-02	13311	P	age 5
Par	rt 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 page 20 of the 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 application?	13	Х	
	Website address www.dentonfamilyfoundation.org		<b>-</b>	
14	The books are in care of ► Luke Denton Telephone no. ► (502) 876-	5172	<b>-</b>	<b></b> -
4 =	Located at ► 15537 Sandlands Cir Noblesville IN ZIP+4 ► 46060			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		•	▶ ⊔
16	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	162	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter	33	e to a second	^
	the name of the foreign country	100		
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Company of the Company		- HEEA AVE
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	27/25 X	Yes	No
1a	During the year did the foundation (either directly or indirectly):	*	169	Maria
	(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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			Contract Con
	for the benefit or use of a disqualified person)?		4.0	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		y ray.	
	if the foundation agreed to make a grant to or to employ the official for a period		AND THE RESERVE	
	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	N		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	100	Addition the	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	Marian .	7 PROBLEM	Alay.
	that were not corrected before the first day of the tax year beginning in 2010?	1c	Contraction of the Contraction o	Х
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)):			Part Control
а	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?			
	If "Yes," list the years 20 20 20			*Gor
b				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			(4.00 kg/s)
_	to all years listed, answer "No" and attach statement—see page 22 of the instructions.)	2b	N/A	Constitution :
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		Secretary of	
Ju	enterprise at any time during the year?			
b	<del></del>	10 (B)	1 1 / A	
-	or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved	No.		THE STATE OF
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)		land.	Seligion - The Seligi
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine		De Sant	April .
	if the foundation had excess business holdings in 2010.)	3b	N/A	and margins 178.
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	Moral Control		de lex
	purpose that had not been removed from jeopardy before the first day of the tay year beginning in 20102	I Ah		V

Pa	rt VII-B	Statements Regarding Activities	es for Which Form	1 4720 May Be R	equired (continued)		
5a	During th	e year did the foundation pay or incur any	amount to:				Territoria.
	(1) Ca	rry on propaganda, or otherwise attempt to	influence legislation (	section 4945(e))? .	Yes X	No	
	(2) Infl	uence the outcome of any specific public	election (see section 49	955); or to carry			
	on,	directly or indirectly, any voter registration	n drive?		Yes X	No	
	( <b>3</b> ) Pro	ovide a grant to an individual for travel, stu	dy, or other similar pur	poses?	Yes _X	No	
		ovide a grant to an organization other than				- L	
		section 509(a)(1), (2), or (3), or section 494			Yes X	No	
		ovide for any purpose other than religious, ucational purposes, or for the prevention o			· · · · · Yes X	] No	na privingo di seletari Propinsi di seletari
þ	If any an	swer is "Yes" to 5a(1)–(5), did any of the t	ransactions fail to qual	ify under the exception	ons described in		
	•	ons section 53.4945 or in a current notice				<b>5</b> b	N/A
	_	tions relying on a current notice regarding			<b>.</b> _		a transfer
С		swer is "Yes" to question 5a(4), does the fo	•			- 1	
		use it maintained expenditure responsibilit	•		Yes _X	」No □	
<b>~</b> -		attach the statement required by Regulation				Ú.	
ба		oundation, during the year, receive any fur s on a personal benefit contract?				7	
<b>L</b>	•	·			Yes X	_	Reference by Heading
D		oundation, during the year, pay premiums, o 6b, file Form 8870.	, directly or indirectly, o	n a personal benefit		6t	X
	•	me during the tax year, was the foundation				***************************************	
		did the foundation receive any proceeds o					
Р	art VIII	-	Directors, Truste	es, Foundation	Managers, Highly Pai	id Emplo	yees,
_	1 :-4 -11	and Contractors	-4:		( 00 -f4b -		
1	LISTAII	officers, directors, trustees, founda	(b) Title, and average	(c) Compensation	(d) Contributions to		
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		ense account, allowances
See	Attache	ed Statement		_	_		
			.00	0	<u></u>	)	0
				•	,	,	•
			.00	0	0	<u>'</u>	0
			.00	0		,	0
		-	.00	0		ή	0
			.00	0			0
2	•	nsation of five highest-paid employ , enter "NONE."	ees (other than the	ose included on li	ne 1—see page 23 of th	e instruct	
			(b) Title, and avera	age	(d) Contributions to		
(a)	Name and	address of each employee paid more than \$50,0	1 ' '	(c) Compensation	on employee benefit plans and deferred compensation		ense account, allowances
NO	NE				Compensation	†	
				-		<del>                                     </del>	
Tot	al numb	er of other employees paid over \$50,0	000			<del> </del>	_

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Part VIII Information About Officers, Directors, Trustees, Foundation Manager and Contractors (continued)	s, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructio	ns). If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of serving	
NONE	0
	0
	0
	0
	0
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 Donation to Anderson University (Anderson, IN) - The university independently selected three s the areas of religious studies, music and education to receive \$1,000 scholarships for the Fall 2 semester.	
2 Donation to Warner Pacific College (Portland, OR) - The college independently selected three s the areas of religious studies, music and education to receive \$1,000 scholarships for the Fall 2 semester.	
3 Donation to Christians Broadcasting Hope (Anderson, IN) - Sponsored one day of worldwide rad broadcasting.	
4 Donation to Siempre Para Los Ninos (Riverside, CA) - Direct support of general operation to magrow orphanage of children from Mexico.	
Part IX-B Summary of Program-Related Investments (see page 24 of the instruct	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions.  3	
	0

Total. Add lines 1 through 3

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations,	
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	+1.2	
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	15,682
Ç	Fair market value of all other assets (see page 25 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	15,682
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	hiz ji ki ki	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	15,682
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25		
_	of the instructions)	4	235
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,447
6	Minimum investment return. Enter 5% of line 5	6	772
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	
	foundations and certain foreign organizations check here 🕨 🗌 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	772
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.)		
¢	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	772
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	772
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	<u>772</u>
Par	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	(4) (4)	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	7,860
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	(

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . .

income. Enter 1% of Part I, line 27b (see page 26 of the instructions)

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

6

7,860

7,860

<b>Part</b>	Part XIII Undistributed Income (see page 26 of the instructions)								
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010				
	line 7				772				
2	Undistributed income, if any, as of the end of 2010:	The same of the same of		LI WE WAR					
а	Enter amount for 2009 only	A STATE OF THE STA		0					
b	Total for prior years: 20, 20, 20	Was In the said to the said	0						
3	Excess distributions carryover, if any, to 2010:								
а	From 2005 0				The State of the s				
b	From 2006 0	The state of the s							
С	From 2007 0	B. Mar. Belles		HARLEY THAN					
d	From 2008		100						
е	From 2009 0								
f	Total of lines 3a through e	n		a Mary State of State					
4	Qualifying distributions for 2010 from Part		Paratra de la compansión de la compansió						
•	XII, line 4: ►\$ 7,860								
а	Applied to 2009, but not more than line 2a	San		A PARTIE O					
	Applied to undistributed income of prior years				La Abertalian (Comp. 18				
~	(Election required—see page 26 of the instructions)		0						
c	Treated as distributions out of corpus (Election	San State of the S							
·	required—see page 26 of the instructions)	0	Part Tom The						
ч	Applied to 2010 distributable amount	U	The state of the s		772				
e	Remaining amount distributed out of corpus	7,088			No. COMMON AND AND ADDRESS.				
5	Excess distributions carryover applied to 2010	0			0				
3	(If an amount appears in column (d), the	U		The Market Statement					
	same amount must be shown in column (a).)								
6	Enter the net total of each column as			Turk Periodic	The same of the same of the same				
v	indicated below:	Strange Strange							
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	7,088							
	Prior years' undistributed income. Subtract	7,000							
b	line 4b from line 2b		0						
		Sherry at whomas			The Control of Section 1				
С	Enter the amount of prior years' undistributed								
	income for which a notice of deficiency has			PART OF THE					
	been issued, or on which the section 4942(a)	No. of the last of							
	tax has been previously assessed								
u	Subtract line 6c from line 6b. Taxable								
	amount—see page 27 of the instructions		0	Berg State State State Service					
е	Undistributed income for 2009. Subtract line	All the second s							
	4a from line 2a. Taxable amount—see page 27 of the		Marie Marie 17	_					
	instructions		Commence (Exchange)	O Stranger and Company					
T	Undistributed income for 2010. Subtract	The second of the second							
	lines 4d and 5 from line 1. This amount must				_				
-	be distributed in 2011		There are the second of the se						
7	Amounts treated as distributions out of				That the fife				
	corpus to satisfy requirements imposed by				SELVING TO				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27 of								
•	the instructions)		PARAMETER P						
8	Excess distributions carryover from 2005		Market Street						
	not applied on line 5 or line 7 (see page 27 of the	•							
	instructions)	0			And The Control of th				
9	Excess distributions carryover to 2011.	7.000							
10	Subtract lines 7 and 8 from line 6a	7,088		ang di Mayer andang 1994. Majarah di Santa andan andan					
10	Analysis of line 9:								
a	Excess from 2006								
D				mark the second					
C		4. 子的A. 是基本,例		A TOTAL TREE					
d									
t	Excess from 2010	1915 THE ST. ST. ST. ST. ST. ST.			1. Carlotte 1. Car				

	990-PF (2010) Mark and Barbara Denton Fa				27-0213	3311 Page <b>10</b>
	t XIV Private Operating Foundations (S			nd Part VII-A, qu	estion 9)	
1 a	If the foundation has received a ruling or determinate foundation, and the ruling is effective for 2010, enter			•		
<b>b</b> Check box to indicate whether the foundation is a		orivate operating fou	ndation described in	n section	4942(j)(3) or	4942(j)(5)
2 a	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 each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed	o				0
b	85% of line 2a	0	0	0	0	0
С	Qualifying distributions from Part XII, line 4 for each year listed	0				0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test—enter:	J	5	<u> </u>		
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0				0
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	_				0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Con assets at any time during the year	-	•		,000 or more in	
1	Information Regarding Foundation Manag		o or the matruc	tions.,		
'а	List any managers of the foundation who have con-		2% of the total contri	ibutions received by	the foundation	
_	before the close of any tax year (but only if they ha					
Maı	k and Barbara Denton					
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
2	Information Recording Containation Containation	t Cift Loon Ont	olombin sts A			
2	Information Regarding Contribution, Grant Check here X if the foundation only makes		• • • •	•		
	Check here	kes gifts, grants, etc				ions
а	The name, address, and telephone number of the		olications should be	addressed:		
	The farm in which are the discussion of the same in which are the same in the	Landing				
b	The form in which applications should be submitted	and information an	id materials they sho	ould include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, such as b factors:	y geographical area	s, charitable fields,	kinds of institutions,	or other	

Total

### Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year Siempre Para Los Ninos Donation for general 500 5623 Arlington Ave. operations Riverside CA 92504 **CBH Viewpoint** Sponsor radio broadcast 860 PO Box 2420 for a day Anderson IN 46018-2420 Wycliffe Bible Translators Sponsor Sarah Bauson 500 PO Box 628200 Orlando FL 32862-8200 Anderson University Fall 2011 Scholarships 3,000 1100 East Fifth Street Anderson IN 46012 Fall 2011 Scholarships Warner Pacific College 3,000 2219 SE 68th Ave Portland OR 97215 Total **▶** 3a 7,860 Approved for future payment

3b

2. 02	13311 Page <b>12</b>
d by section 512, 513, or 514	(e)
c) (d) on code Amount	Related or exempt function income (See page 28 of the instructions.)
	0 0
	0 0
	0 0
	0 0
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	Service Park
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	2 0
13	
S	
ributed importantly to	
uch purposes). (See	
_	

### Form 990-PF (2010) Mark and Barbara Denton Family Foundation, Inc. 27-0213311 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	in secti	e organization directly ion 501(c) of the Code zations?	•			•	•			Yes No
	<ul><li>(1) Ca</li><li>(2) Other t</li><li>(1) Sai</li><li>(2) Pui</li></ul>	ers from the reporting ish	charitable exe	empt organization able exempt organ	ization				1a(1) 1a(2) 1b(1) 1b(2)	X X X
	(4) Re (5) Loa (6) Per Sharing If the a value of	ental of facilities, equip eimbursement arrange ans or loan guarantee enformance of services g of facilities, equipment enswer to any of the about the goods, other asson any transaction or sl	ements or memberslent, mailing lis	nip or fundraising sits, other assets, o complete the follo	colicitations	Column	(b) should always	ays show the fa	n fair m	narket
(a)	Line no.	(b) Amount involved		of noncharitable exempt			ription of transfers, t		_	
(a)	Line no.	0	<del></del>	or nonchantable exempt	Organization	(u) Desc	inplication transfers, t	ransactions, and si	aring arr	angements
		0								
		0								
		0								
		0								
		0							_	
	-	0							_	
		0								
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									_	
						_			_	
	describ	foundation directly or i bed in section 501(c) o ," complete the followi	ndirectly affilion of the Code (coing schedule.	ther than section 5	501(c)(3)) or in s	e tax-ex	527? 	· · · · □`	res X	] No
		(a) Name of organization		(b) Type	of organization		(c) D	Description of relation	nsnip	
									_	
_										
	_					-			_	
Się He	gn re	der penalties of perjury, I dec ef, it is true, correct, and com Like Signature of officer or truster	nplete. Declaratio		taxpayer or fiduciary	) is based	on all information o	-		-
		Print/Type preparer's na		Preparer's signature			Date		PTIN	
Ра	id	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7						Check if		
Pre	parer	r						self-employed		
							Firm's EIN			
		Firm's address						Phone no.		
								E	aar	)_PF (2010)

### 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 Employer identification number Mark and Barbara Denton Family Foundation, Inc. 27-0213311 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 as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Page	1	of	1	of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Employer identification number Name of organization 27-0213311 Mark and Barbara Denton Family Foundation, Inc. Contributors (see instructions) (d) (c) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Person Mark and Barbara Denton \_\_\_1\_\_\_ Payroll 3921 Kamilche Point Rd SE Shelton WA 98584 \$ 18,675 Noncash Foreign State or Province: (Complete Part II if there is a noncash contribution.) Foreign Country: (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No.

		33 4	
	Foreign State or Province: Foreign Country:  (b)	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3	Foreign State or Province: Foreign Country:	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
4	Foreign State or Province: Foreign Country:	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b)	(c)	(d)
NO.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
5	Foreign State or Province: Foreign Country:	\$ <u>.</u> 0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	Foreign State or Province: Foreign Country:	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
		Sahadula D	/Fa 000 000 F7 000 DE) (0040)

Name of organization

Mark and Barbara Denton Family Foundation, Inc.

Employer identification number

27-0213311

Part II	Noncash	Property	(see	instructions	١
---------	---------	----------	------	--------------	---

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>.</u> 0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>.</u> 0	

Schedule B (F	Form 990, 990-EZ, or 990-PF) (2010)			Page 1 of 1 of Part III
Name of or				Employer identification number
Mark and E	Barbara Denton Family Foundation, Inc.  Exclusively religious, charitable, etc., aggregating more than \$1,000 for the y For organizations completing Part III, ent	<b>/ear.</b> Complete er the total of <i>e</i>	e columns (a) through (e exclusively religious, cha	and the following line entry.  aritable, etc.,
(a) No. from	contributions of \$1,000 or less for the ye  (b) Purpose of gift		information once. See in	structions.) > \$ 0  (d) Description of how gift is held
Part I				
		(e) T	ransfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationsh	nip of transferor to transferee
		•••••		••••••••••••
	For. Prov. Country			
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held
		,		
		(e) T	ransfer of gift	<u> </u>
	Transferee's name, address, and	ZIP + 4	Relationsh	nip of transferor to transferee
	For. Prov. Country			
(a) No. from Part I	(b) Purpose of gift	(с	) Use of gift	(d) Description of how gift is held
		(e) T	ransfer of gift	
	Transferee's name, address, and			sin of transferor to transferoe
	Transieree s name, address, and		Relationsi	nip of transferor to transferee
	For. Prov. Country	••••••		
(a) No. from Part I	(b) Purpose of gift	(с	) Use of gift	(d) Description of how gift is held
		(e) T	ransfer of gift	
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee

For, Prov. Country

### Line 18 (990-PF) - Taxes

	3	က	0	0	•
	Revenue			Disbursements	
	and Expenses	Net Investment	Adjusted	for Charitable	
Description	per Books	Income	Net Income	Purposes	
Real estate tax not included in line 20					
Tax on investment income	8	m			

## Line 23 (990-PF) - Other Expenses

on Expenses Net Investment Adjusted Net Expenses Income Income Income Income O O O O O O O O O O O O O O O O O O O		1,008	0	0	0
ment per Books Income income 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Expenses	Net Investment	Adjusted Net	Ulsbursements for Charitable
33 33 7 7 400 560	scription	per Books	Income	Income	Purposes
	thed statement	0	0	0	0
		33			
		7			
		8			
	ation Fee	400			
	Late Fees	260			

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

		Check "X"	7	į	0,000	7.50	Foreign	i i	Average
	Name	It business	Street	CIR	State	State 41p Code	Country	lille	Hours
-	Luke Denton		15537 Sandlands Circle	Noblesville	Z	46060	Tre	reasurer / Secre	7
7	Mark Denton		3921 Kamilche Point Rd SE	Shelton		98584		President	-
3	Barbara Denton		3921 Kamilche Point Rd SE	Shelton	WA	98584		Vice-Presiden	-
4	Ryan Denton		8141 Pelham Pl	Indianapolis	Z	46216		Director	-
S	Doug Denton		2 Denton Terrace	Clarksville	z	47129		Director	-
9	Susan Denton		15537 Sandlands Circle	Noblesville	Z	46060		Director	-
7	Danae Denton		8141 Pelham Pl	Indianapolis	Z	46216		Director	-
8									
6									
10									

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			Expense	
	Compensation	Benefits	Account	Explanation
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