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# Form **990-PF**

Department of the Treasury (77) 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

2008

	7	<del></del>	, and ending $11/3$		<del> </del>
G Che	eck all that apply: Initial return Fina	I return Amended			ne change
Use t	he Carrett INC INCOME THE K	OUDT POUNDAMTO		Employer identification nur	nber
IRS lat			<b></b>	48-1141441	<del></del>
Otherw prin	. ,   2000 2220 023023, 000	В	Telephone number (see the	instructions)	
or typ	De. WICHIIA, NO 07202			316-267-2000	
See Spe Instruct	ecific		c	If exemption application is	pending, check here
msuuct				1 Foreign organizations, chec	k here
H Č		(c)(3) exempt private f		2 Foreign organizations meet	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable tr			here and attach computation	
		ounting method: X C	ash Accrual	If private foundation status under section 507(b)(1)(A)	
(f	from Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60	· Ш
<b>&gt;</b> \$		column (d) must be or	n cash basis.)	under section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)				purposes
	(see the instructions).)				(cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	15,000.			*******
	2 Ck ► if the foundn is not req to att Sch B				4 4 7 4 7
	3 Interest on savings and temporary				
	cash investments	<u> </u>		N/A	
	4 Dividends and interest from securities .	3.	3.		1
	5a Gross rents	<del>,</del>			\$ 1
	b Net rental income or (loss).	* * * * * * * * *	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		***************************************
R	6a Net gain/(loss) from sale of assets not on line 10	<del>*************************************</del>			Same Branch St.
E	b Gross sales price for all assets on line 6a		· · · · · · · · · · · · · · · · · · ·		AND THE RESERVE OF THE PARTY OF
Σ	7 Capital gain net income (from Part IV, line 2)	· · · · · · · · · · · · · · · · · · ·	42 ( 3 )	************************************	· \$400-441
E N	• Net short-term capital gain	Sternier Sternier			
U	9 Income modifications			,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
E	10a Gross sales less returns and	. * * * *	· · · · · · · · · · · · · · · · · · ·	3 7 8 8 8	
	allowances		Marie Commence		
	b Less: Cost of				17 公共主动器的
	goods sold	Comp to the second			April 18 Comment of the Comment of t
	c Gross profit/(loss) (att sch)		<ul><li>サーブをよる。</li><li>ウンパンス等の</li></ul>		- A 17 Politic - WAS 12 SAZ AL
<b>-</b> 5	11 Other Income (attach schedule)				
<u>}</u>	12 Total. Add lines 1 through 11	15,003.	3.		THE STATE OF THE S
<del></del>	13 Compensation of officers, directors, trustees, etc.	0.		<del></del>	
<b>つ</b>	14 Other employee salaries and wages				-
<b>⇒</b>	15 Pension plans, employee benefits	_			
APR TO V	16a Legal fees (attacheschedule): 11/E				
A M	b Accounting fees (attach sch) . SEE .ST .1	1,827.	1,827.		
1	Other death from (officely cash)				
NS Ĭ	17 Interest Al.R. 1 2 2010				
OPERATING	1 18 Taxes (attach schedule)				
PR R	19 Depreciation (attach ⊈				in the second se
T T	sch) and departin EN UT				
N Y	20 Occupancy				
_	21 Travel, conferences, and meetings.				
A E N X D P	22 Printing and publications				
D P	23 Other expenses (attach schedule) SEE STATEMENT 2	40.	40.		
E N		40.	40.		
Ĕ	24 Total operating and administrative expenses. Add lines 13 through 23	1,867.	1,867.		
3	25 Contributions, gifts, grants paid PART. XV.	21,455.	7 7 7 7 7 7 N NA	All produces to the land	21,455.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	23,322.	1,867.		21,455.
	27 Subtract line 26 from line 12:		٠, ٠ - ١٠٠٠ ١٠٠٠ ١٠٠٠ ١٠٠٠ ١٠٠٠ ١٠٠٠ ١٠٠	\$ . # \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	* 3
	a Excess of revenue over expenses and disbursements	-8,319.			
	b Net investment income (if negative, enter -0-)	-0,319.	0.	* - 2 · 1 · 1 · 1 · 1 · 1 · 1	8 ** ;
	C Adjusted net Income (if negative, enter -0-)	2. T. F. Z. 3			-, 2 2 3 7 4 2 7 3
	Adjusted net income (il negative, enter -0-) ]		المريضين عامد والا المريسين	I	<u> </u>

Attached schedules and amounts in the description Beginning of year End of year Part II Balance Sheets column should be for end-of-year amounts only (See instructions ) (a) Book Value (b) Book Value (c) Fair Market Value Cash ► non-interest-bearing . . 17,286 8.969. 2 Savings and temporary cash investments 8,969 3 Accounts receivable Less: allowance for doubtful accounts ▶ 4 Pledges receivable . . . . . Less: allowance for doubtful accounts ! 5 Grants receivable. Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) 7 Other notes and loans receivable (attach sch) ASSETS Less: allowance for doubtful accounts ( 8 Inventories for sale or use . . . . 9 Prepaid expenses and deferred charges . **10a** Investments — U S. and state government obligations (attach schedule) . **b** Investments — corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment: basis .... Less: accumulated depreciation (attach schedule) . . . . . 12 Investments - mortgage loans 13 Investments – other (attach schedule) À 14 Land, buildings, and equipment basis 3,743. Less: accumulated depreciation (attach schedule) . . . SEE STMT. 3. 15 Other assets (describe ► Total assets (to be completed by all filers see instructions. Also, see page 1, item I) 17,286 8,969 8,969 L 17 Accounts payable and accrued expenses. . . . ī Grants pavable.. ... ... B 19 Deferred revenue..... 20 Loans from officers, directors, trustees, & other disqualified persons. . . . 21 Mortgages and other notes payable (attach schedule) . 22 Other liabilities (describe Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here. and complete lines 24 through 26 and lines 30 and 31. N E T 24 Unrestricted.... N Temporarily restricted . . . 26 ASSETS Foundations that do not follow SFAS 117, check here. BALANCE and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds . 17,286 8,969 28 Paid-in or capital surplus, or land, building, and equipment fund. 29 Retained earnings, accumulated income, endowment, or other funds 0 17,286 R S 30 Total net assets or fund balances (see the instructions) . . . 8,969 Total liabilities and net assets/fund balances 17,286 8.969 **Part III** Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 17,286. -8,319. Enter amount from Part I, line 27a. . . . 2 3 Other increases not included in line 2 (itemize) ... 3 4 Add lines 1, 2, and 3 ... 4 8,969. Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30.... 6 8,969.

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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.

21,455.

8 Enter qualifying distributions from Part XII, line 4

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Par		tions)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.		£ .~
	Date of ruling letter (attach copy of ruling letter if necessary – see instructions)		
t	Domestic foundations that meet the section 4940(e) requirements in Part V,		0.
	check here ► X and enter 1% of Part I, line 27b		
•	: 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		
2	foundations only. Others enter -0-)		0.
3	Add lines 1 and 2		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		0.
6	Credits/Payments:	<del></del>	
a	2008 estimated tax pmts and 2007 overpayment credited to 2008 6a 386.	, 1997	
Ŀ	Exempt foreign organizations – tax withheld at source 6b	· ·	
	: Tax paid with application for extension of time to file (Form 8868)	est ac	** .
	Backup withholding erroneously withheld 6d	· ・ 等	. "
	Total credits and payments. Add lines 6a through 6d		386.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		386.
11	Enter the amount of line 10 to be: Credited to 2009 estimated tax 386. Refunded > 11		0.
	VII-A Statements Regarding Activities		
		" Ye	s No
1 2	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
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1ь	x
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , 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	Х
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1 2/2	
	(1) On the foundation $\triangleright$ \$ 0. (2) On foundation managers $\triangleright$ \$ 0.		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers $\triangleright$ \$ 0.		
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.	46 S 8 25	ारिका
	·	1.5	May 1
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	X
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	$\frac{\lambda}{X}$
	of Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
J	If 'Yes,' attach the statement required by General Instruction T.	13487	া ক্লি
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	12	
٠	By language in the governing instrument, or		
			7 98
	• 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	· 1077 1-35.2]
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	
	Enter the states to which the foundation reports or with which it is registered (see the instructions)	1 X 1 X V	- 338-
04	N/A	1 1	Carl obstant
			20 27 00 K
t	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b X	
_		11 64 14	
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 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If 'Yes,' complete Part XIV.	9	X
			<del>                                     </del>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.	10	Х
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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	Х	_
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	application? .	13	Х	_
14		no. ► 316-68 67206	3-8	249	_
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	▶ 15		$\overline{N}/R$	A
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.		3	Yes No	
1 a	a During the year did the foundation (either directly or indirectly):			·	٦
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? [	Yes X No	, •%	: 45	12
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	***	· ·	2300
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?.	Yes X No	ža.		Ì
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes XNo	· 🕸		٠
	(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	ر مالية وي م		1
	(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			175,171
ŧ	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)	ons)?	1 b	N/A	3
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	, ¥		1
•	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 2008?		1 c	X	1
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)):		NSW)		17.7
ā	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008?	Yes X No			
	If 'Yes,' list the years ▶ 20, 20, 20, 20				
t	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942( (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) to	2b	N/A	<u>;</u>
(	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere.			1
	► 20 , 20 , 20 , 20				
3a	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			17.75
ł	b If 'Yes,' did it have excess business holdings in 2008 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 2008.)		3b	N/A	***
			- 55	-1/11	-
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	X	_
ŀ	<b>b</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		240		1
	the tax year beginning in 2008?		4b	I X	

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Part VII-B Statements Regarding Activiti	es for Which Form	ı 4720 May Be Requ	uired (continued)	
5a During the year did the foundation pay or incu				
(1) Carry on propaganda, or otherwise attemp	t to influence legislatio	n (section 4945(e))? .	Yes X	No September 1
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?.			No
(3) Provide a grant to an individual for travel,			Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instri	rganization described uctions)	. Yes X	No "
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	. Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of 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 rega	rding disaster assistand	ce check here	▶ 🗍	8.1.2.7
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure responses if 'Yes,' attach the statement required by Region 1.	sibility for the grant?		N/A Yes	No was to red
6a Did the foundation, during the year, receive an on a personal benefit contract?			. ∐Yes X	No E
<b>b</b> Did the foundation, during the year, pay prem		ctly, on a personal benef	fit contract?	6b X
If you answered 'Yes' to 6b, also file Form 88.				[ [ [ ] ] ]
7a At any time during the tax year, was the found				NO 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b If yes, did the foundation receive any proceed  Part VIII Information About Officers, D	s or nave any net incor	Foundation Manage	ers. Highly Paid E	mplovees.
and Contractors				
1 List all officers, directors, trustees, foundation	n managers and their			
(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 account, other allowances
SAMMY H. KOURI	PRESIDENT	0.	0.	0.
619 N. ARMOUR	0			
WICHITA, KS 67206				
JACQUELINE KOURI 619 N. ARMOUR	SECR/TREAS. 0	0.	0.	0.
WICHITA, KS 67206	DIDECTOR			
DAVID S. ELKOURI	DIRECTOR 0	0.	0.	0.
1127B BANKS HOUSTON, TX 77006	U			
2 Compensation of five highest-paid employee	os (other than these in	cluded on line 1 – see in	estructions) If none e	nter 'NONE '
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances
NONE				
		<u> </u>		
Total number of other employees paid over \$50,000	)	00110700	<u>,</u> <b>&gt;</b>	Form <b>990-PF</b> (2008)

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Pai	Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign foi	undations, —————
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	
ŧ	Average of monthly cash balances	1b	11,727.
	Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1 d	11,727.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	11,727.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	176.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	11,551.
6	Minimum investment return. Enter 5% of line 5	6	578.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► and do not complete this pa	ating fou	ndations
		1	578.
1	Minimum investment return from Part X, line 6	3.1	370.
		* 4. '	
	Williams tax for 2000 (this 2000 her metals the	2c	
•	c Add lines 2a and 2b	3	578.
3	Distributable amount before adjustments. Subtract line 2c from line 1	4	
4	Recoveries of amounts treated as qualifying distributions	5	578.
5	Add lines 3 and 4	6	370.
6	Deduction from distributable amount (see instructions)	7	578.
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1		576.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes:	. 22+	
•	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	21,455.
	b Program-related investments — total from Part IX-B	1 Ь	<u> </u>
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:	<u>.</u>	
	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required).	3a	
1	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	21,455.
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	21,455.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years	ther the fo	undation

## Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2007	<b>(c)</b> 2007	<b>(d)</b> 2008
1 Distributable amount for 2008 from Part XI, line 7.	,	3	,	578.
2 Undistributed income, if any, as of the end of 2007:		·		3,0.
a Enter amount for 2007 only		,	0.	***
b Total for prior years: 20, 20, 20			<del> </del>	, , , , , , , , , , , , , , , , , , ,
3 Excess distributions carryover, if any, to 2008: a From 2003 . 67, 929.			*	• • •
b From 2004 47,105.				
c From 2005 28,258.	·: .			
<b>d</b> From 2006 . 49,145.				
e From 2007 41,365.				
f Total of lines 3a through e	233,802.			
4 Qualifying distributions for 2008 from Part				
XII, line 4: ► \$ 21,455.  a Applied to 2007, but not more than line 2a.				
•		• • • • • • • • • • • • • • • • • • • •		y a grant was a second of the
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)	,	0.		
c Treated as distributions out of corpus (Election required – see instructions).	0.			
d Applied to 2008 distributable amount	1.13			578.
e Remaining amount distributed out of corpus	20,877.	182		
5 Excess distributions carryover applied to 2008	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				4.00
6 Enter the net total of each column as indicated below:	* * * * * * * * * * * * * * * * * * * *	* . ^		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	254,679.			
<b>b</b> Prior years' undistributed income. Subtract	go gradien o nation of the second			A A STATE OF THE S
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		n		
		<u> </u>		i Pro
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2007. Subtract line 4a from	<b>《罗维·</b> 克朗斯	*****		CANADA PARTY
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2008. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2009				^
7 Amounts treated as distributions out of	484- (1. 5 P. , 1. 15 P. )			0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2003 not				THE ROLL
applied on line 5 or line 7 (see instructions).	67,929.			
9 Excess distributions carryover to 2009.	106 750			
Subtract lines 7 and 8 from line 6a	186,750.	CONTRACTOR AND		AND THE PROPERTY OF THE PARTY O
a Excess from 2004 . 47,105.		POST CARLOR		
<b>b</b> Excess from 2005 28,258.				e: 13/4/67 # %
c Excess from 2006 49,145.				
<b>d</b> Excess from 2007 . 41, 365.	\$4.5°			
e Excess from 2008. 20,877.	7 N			

Form 990-PF (2008) SAMMY H. AND JAC Part XIV Private Operating Foundation				48-1141441	Page 10
1a If the foundation has received a ruling or is effective for 2008, enter the date of the	determination letter	that it is a private			
<b>b</b> Check box to indicate whether the foundation		erating foundation d	lescribed in section	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 each year listed	(a) 2008	<b>(b)</b> 2007	(c) 2006	(d) 2005	(e) Total
<b>b</b> 85% of line 2a					
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					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets		ļ			
(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 t	n (Complete this he year — see in	part only if the structions.)	organization ha	ad \$5,000 or mor	e in
Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have SEE STATEMENT 5	have contributed m	ore than 2% of the than \$5,000). (See	total contributions r section 507(d)(2).)	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater intere	poration (or an equ est.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gra	ant, Gift, Loan, Scho	larship, 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 numb	per of the person to	whom applications	should be addresse	d:	
SEE STATEMENT 6					
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	als they should inclu	ide:	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines:					
SEE STATEMENT FOR LINE 2A			<del></del>		
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of	institutions, or other	factors:
SEE STATEMENT FOR LINE 2A					

3 Grants and Contributions Paid During the	ear or Approved for Fut	ure Paymen	t	
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		
Name and address (home or business)  a Paid during the year  SEE STATEMENT 7	substantial contributor	recipient		
	<u></u>	<u> </u>		
	·, · · · · · · · · · · · · · · · · · ·	<u></u>	<u> </u>	21,455.
b Approved for future payment			,	

# Part XVI-A Analysis of Income-Producing Activities

Enter grees	s amounts unless otherwise indicated.	Unrelate	ed business income	Evoluded by	section 512, 513, or 514	Γ
	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (see the instructions)
=				1		(see the instructions)
		<del> </del>	<u> </u>			<del></del>
		-				
f						
g Fees	and contracts from government agencies					
	bership dues and assessments					
3 Interes	st on savings and temporary cash investments.					
4 Divide	ends and interest from securities			14	3.	
5 Net re	ental income or (loss) from real estate				*	· 4 4 1
a Debt-	-financed property					
	lebt-financed property					
6 Net re	ntal income or (loss) from personal property			<del>                                     </del>	<del></del>	
7 Other	r investment income			<u> </u>		
	r (loss) from sales of assets other than inventory				<del> </del>	
	ncome or (loss) from special events	<u> </u>		<del>  </del>		
	s profit or (loss) from sales of inventory					
	r revenue:	ه ، ا ری <sup>ه</sup>	<u>(* - 字3 , 数                                 </u>	1 1 No. 1	and the said	K
			<del> </del>	<del> </del>  -		
		ļ.——	<del></del>			
				+ + +		<u> </u>
				<del>                                     </del>		
e	otal. Add columns (b), (d), and (e) .	(** '\) 1, <del>\</del> \		1 250	3.	
12 Subit				3		
13 Total	L Add line 12 columns (h) (d) and (e)				12	- 2
	I. Add line 12, columns (b), (d), and (e) speet in the instructions for line 13 to verify ca	alculations )			. 13	3.
(See works	sheet in the instructions for line 13 to verify ca				· · · · · · · · · · · · · · · · · · ·	3.
(See works			ishment of Exemp	ot Purpos	· · · · · · · · · · · · · · · · · · ·	3.
(See works Part XVI- Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	sheet in the instructions for line 13 to verify ca	Accompl			es	
(See works Part XVI- Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
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(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
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(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	
(See works  Part XVI-  Line No.	Relationship of Activities to the	Accompl			es	

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

		•								Yes No
	1 Did t	he organization directly	or indirectly e	engage in any of the	following with a	any other org	ganization			103 110
	relati	ribed in section 501(c) on ng to political organizat	of the Code (o ions?	ther than section 50	r(c)(3) organiza	ations) or in	section 527	,		-
		sfers from the reporting		a noncharitable exe	empt organization	on of:				
	_								1a(1)	X
	` '	Other assets							1a (2)	X
	` '	r transactions:				• -		••	. ,	
		Sales of assets to a non	charitable eve	mnt organization					1b(1)	Х
		Purchases of assets from		· -	- ation	•••		•	1 b (2)	X
	<b>\-</b> / ·	*** *		, ,	ation.	•	• •			X
	• •	Rental of facilities, equip		a assets	•			•	1 b (3)	
	• •	Reimbursement arrangei			•	-	• •	•	1 b (4)	X
	• •	oans or loan guarantee				•			1 b (5)	X
	,	Performance of services		•					1b(6)	X
	<b>c</b> Shar	ing of facilities, equipme	ent, mailing lis	sts, other assets, or	paid employees	5.	• • • •		1c	<u> </u>
	مطفاط اسم	answer to any of the a	hove is 'Ves '	complete the follow	ing schodulo. C	olumn (b) sh	ould alway	c chow that	air markat val	uo of
	the o	oods, other assets, or s	ervices given	by the reporting fou	ındatıon. If the t	foundation re	eceived less	than fair m	arket value in	ne oi
_	any t	ransaction or sharing at	rrangement, s	how in column (d) the	ne value of the	goods, other	assets, or	services rec	eived	
(;	a) Line no.	(b) Amount involved	(c) Name	of noncharitable exempt o	rganization	(d) Descript	on of transfer	s, transactions,	and sharing arrar	igements
N	/A									
_										
			. — —					<del></del>		
					<u> </u>					
										<del></del>
_										
_										
_						<del></del>				
_										
		<u> </u>	L							
	2a Is the	foundation directly or i	indirectly affili	ated with, or related	to, one or mor	e tax-exemp	t organizati	ons	_	
	desci	ribed in section 501(c) of	of the Code (o	ther than section 50	1(c)(3)) or in se	ection 527?.			Yes	X No
_	<b>b</b> If 'Ye	s,' complete the follows	ng schedule.							
		(a) Name of organization	on	(b) Type of	organizatıon		(c) D	escription o	f relationship	
N	/A									
							*			
	Under pen	altres of perjury, I declare that I	have examined th	us return, including accomi	panving schedules ai	nd statements, as	nd to the best o	of my knowledge	and belief, it is tru	e correct and
	complete	Declaration of preparer (other to	han taxpayer or fic	luciary) is based on all info	rmation of which pre	parer has any kr	nowledge	,		o, coco., a
		$\Omega$	C -							
s	<b>&gt;</b>	wel	8000	· ·		04-02	<i>-10</i> ►	DIRECT	OR	
G	Sign	ature of officer or trustee		<del> </del>		Date		Title		
N		_ ^	Λ	0.11		Date	1		Preparer's Identify	ing number
H	Paid	Preparer's signature	S nal	L. 11.01	•	3-22-	. In sel	eck if	(See Signature in	the instrs)
R	Pre-	200	nu 'v	Maring	~ ~	12/1	-		N/A	
-	parer's Use	Firm's name (or HINK)		I LAW FIRM L	T.C.		EIN	• <u>N/A</u>	<u> </u>	
	Only	employed), 8621			TE 200	<del> </del>				
		ZIP code WICH	LTA, KS 6	7206			Ph	one no	(316) 267	-2000
_				·						A DI (0055)

#### 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 and 990-PF ► See separate instructions. OMB No 1545-0047

2008

Name of the organization		Employer identification number			
SAMMY H. AND JACQUELINE KOURI	FOUNDATION	48-1141441			
Organization type (check one).					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a 527 political organization	private foundation			
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a priv 501(c)(3) taxable private foundation	ate foundation			
Check if your organization is covered by the General I boxes for both the General Rule and a Special	Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) or Rule. See instructions.)	irganization can check			
General Rule –  X For organizations filing Form 990, 990-EZ, contributor. (Complete Parts 1 and II.)	or 990-PF that received, during the year, \$5,000 or more (in	money or property) from any one			
Special Rules -					
509(a)(1)/170(b)(1)(A)(vi) and received from any	orm 990, or Form 990-EZ, that met the 33-1/3% support tes one contributor, during the year, a contribution of the greater of (1 % of the amount on Form 990-EZ, line 1. Complete Parts I	) \$5,000 or (2) 2% of the			
aggregate contributions or bequests of mor	ation filing Form 990, or Form 990-EZ, that received from a e than \$1,000 for use <i>exclusively</i> for religious, charitable, so ildren or animals. Complete Parts I, II, and III.	ny one contributor, during the year, cientific, literary, or educational			
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some 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 <b>General Rule</b> applies to this organization because it received nonexclusively					
religious, charitable, etc, contributions of \$5	5,000 or more during the year.)	\$			
990-PF) but they <b>must</b> answer 'No' on Part IV.	the General Rule and/or the Special Rules do not file Schelline 2 of their Form 990, or check the box in the heading of neet the filing requirements of Schedule B (Form 990, 990-E	their Form 990-EZ, or on line 2 of			
BAA For Privacy Act and Paperwork Reducti for Form 990. These instructions will be issue		<b>B</b> (Form 990, 990-EZ, or 990-PF) (2008)			

Schedule Name of org	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2008)	Page 1	of 1 of Part I
_	H. AND JACQUELINE KOURI FOUNDATION		141441
Part 1	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SAMMY H. KOURI  551 N. HILLSIDE, STE 550  WICHITA, KS 67214,	\$15,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(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 contributions	(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 contributions	(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 contributions	(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 contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
BAA	TEEA0702L 08/05/08	Schedule B (Form 990	), 990-EZ, or 990-PF) (2008)

Page 1

of 1 of P
Employer identification number

of Part II

Name of organization

SAMMY H. AND JACQUELINE KOURI FOUNDATION

48-1141441

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	~
		٧	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<del>                                     </del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
			<del> </del>

	000 000 F7 000 DF\ (0000\)		Dana 1	. 1	(5.411
	3 (Form 990, 990-EZ, or 990-PF) (2008)	· · · · · · · · · · · · · · · · · · ·	Page 1	of 1 Employer identificati	of Part III
Name of organ	H. AND JACQUELINE KOURI FOUNDA	ATTON		48-1141441	
			s to section 501(c)		
· artin	Exclusively religious, charitable, etc organizations aggregating more that				ng line entry)
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year. (E)  (b)	tal of <i>exclusively</i> religious, cha Enter this information once — s	ritable, etc, ee instructions)	▶\$	N/A
(a)	(b)				
No. from Part I	Purpose of gift	Use of gift	Desc	cription of how gift	t is held
<u> Parti</u>	N/A				
		(e)	L		
	Transferee's name, address,	Transfer of gift and ZIP + 4	Relationship of	transferor to trans	sfer <del>ee</del>
(a)	(b)	(c)		(d)	
No. from	Purpose of gift	Use of gift	Des	Description of how gift is held	
Part I	<u> </u>		<u> </u>		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
				<del>.</del>	
(a)	(b)	(c)		(d)	
No. from Part I	Purpose of gift	Use of gift	Dese	cription of how gift	t is held
, aiti				<del> </del>	
		(a)			<del></del>
	(e) Transfer of gift				
	Transferee's name, address,		Relationship of	transferor to trans	sferee
			-		
			<del></del>		
(a)	(b)	(c)		(d)	
No. from	Purpose of gift	Use of gift	Des	cription of how gift	t is held
Part I					<del></del>
			-		<del></del>
				<del> </del>	
		(e)			
		Transfer of gift			

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

2008	FEDERAL STATEMENTS	PAGE 1
CLIENT KOURI	SAMMY H. AND JACQUELINE KOURI FOUNDATION	48-1141441
3/15/10		04:35PM
STATEMENT 1 FORM 990-PF, PART I, LIN ACCOUNTING FEES	IE 16B	
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME	(D) CHARITABLE PURPOSES
HINKLE ELKOURI LAW F	IRM, LLC \$ 1,827. \$ 1,827. TOTAL \$ 1,827.	<u>\$ 0.</u>
STATEMENT 2 FORM 990-PF, PART I, LIN OTHER EXPENSES	IE 23	
SECRETARY OF STATE AN	(A)	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART II, LII LAND, BUILDINGS, AND E	NE 14 EQUIPMENT  ACCUM. BOOK	EXTD MADVET
CATEGORY	BASIS DEPREC. VALUE	FAIR MARKET VALUE
MACHINERY AND EQUIPME	ENT \$ 3,743. \$ 3,743. \$ 0. \$ TOTAL \$ 3,743. \$ 0. \$	0.
STATEMENT 4 FORM 990-PF, PART III, LI OTHER INCRÉASES	NE 3	
ROUNDING		<u>2.</u> <u>2.</u>
STATEMENT 5 FORM 990-PF, PART XV, L FOUNDATION MANAGERS	LINE 1A S - 2% OR MORE CONTRIBUTORS	
SAMMY H. KOURI JACQUELINE KOURI		

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2008

## FEDERAL STATEMENTS

PAGE 2

**CLIENT KOURI** 

SAMMY H. AND JACQUELINE KOURI FOUNDATION

48-1141441

04:36PM

3/15/10

STATEMENT 6 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION** 

NAME OF GRANT PROGRAM:

SAMMY H. AND JACQUELINE KOURI FOUNDATION

NAME:

SAMMY H. AND JACQUELINE KOURI FOUNDATION

CARE OF:

SAMMY H. KOURI

STREET ADDRESS:

619 N. ARMOUR

CITY, STATE, ZIP CODE:

WICHITA, KS 67206 316-683-8249

TELEPHONE:

FORM AND CONTENT:

NO FORMS REQUIRED.

SUBMISSION DEADLINES:

NONE

RESTRICTIONS ON AWARDS:

AWARDS ARE GRANTED EXCLUSIVELY FOR CHARITABLE, RELIGIOUS,

SCIENTIFIC, LITERARY, EDUCATIONAL AND THE PREVENTION OF CRUELTY TO ANIMALS PURPOSES. UNIVERSITIES APPLYING FOR SCHOLARSHIP FUNDS WILL BE RESPONSIBLE FOR DETERMINING WHICH DESERVING STUDENTS WILL BE AWARDED THE SCHOLARSHIPS

AND THEY WILL DETERMINE THEIR OWN DEADLINES FOR

APPLICATIONS.

#### STATEMENT 7 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ST GEORGE ORTHODOX CHURCH 7515 E. 13TH ST. WICHITA, KS 67206	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	\$ 10,970.
WSU - ICAA 1845 FAIRMOUNT WICHITA, KS 67208	NONE	SCHOOL	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	200.
WICHITA ADVENTIST CHRISTIAN 3030 S. OSAGE WICHITA, KS 67207	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	580.
ST. MICHAEL ORTHODOX CHUR 5719 E. JUDSON AVE. LAS VEGAS, NV 89115	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	1,250.
WICHITA CTR FOR THE ARTS 9112 E. CENTRAL WICHITA, KS 67206	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	250.

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	H	u	

3/15/10

# **FEDERAL STATEMENTS**

PAGE 3

**CLIENT KOURI** 

#### SAMMY H. AND JACQUELINE KOURI FOUNDATION

48-1141441 04:35PM

STATEMENT 7 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
WICHITA ART MUSEUM 619 N. STACKMAN WICHITA, KS 67203	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	\$ 250.
VICTORY IN THE VALLEY 917 N. MARKET WICHITA, KS 67214	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	200.
ST. ELIJAH ORTHODOX CHURC 2101 NW 16TH ST. OKLAHOMA CITY, OK 75107	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	100.
ST. MARY ORTHODOX CHURCH 344 S. MARTINSON WICHITA, KS 67209	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	500.
WSU ALUMNI ASSOCIATION 1845 FAIRMOUNT WICHITA, KS 67208	NONE	SCHOOL	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	2,000.
MUSIC THEATRE OF WICHITA CENTURY II WICHITA, KS 67202	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	500.
ASSISTANCE LEAGUE OF WICH 2611 E. DOUGLAS WICHITA, KS 67211	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	300.
LEUKEMIA & LYMPHOMA SOCIE 600 3RD AVE. NEW YORK, NY 10016	NONE	PUBLIC	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	300.
WSU FOUNDATION 1845 FAIRMOUNT WICHITA, KS 67208	NONE	SCHOOL	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	3,030.
ST. RAPHEAL ORTH CHURCH 690 VILLA RD. PALM SPRING, CA	NONE	CHURCH	UNRESTRICTED SUPPORT FOR GENERAL OPERATIONS.	1,000.

2008 **FEDERAL STATEMENTS** PAGE 4 **CLIENT KOURI** SAMMY H. AND JACQUELINE KOURI FOUNDATION 48-1141441 3/15/10 04:36PM STATEMENT 7 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-DONEE ATION PURPOSE OF NAME AND ADDRESS <u>STATUS</u> RELATIONSHIP GRANT AMOUNT UNRESTRICTED SUPPORT FOR **AMVETS** NONE PUBLIC 25. 1827 E 47TH SOUTH WICHITA, KS 67216 **GENERAL** OPERATIONS. TOTAL \$ 21,455.