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#### Form 990-PF

## **Return of Private Foundation**

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

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.

OMB No 1545-0052

2009

For e	alen	dar year 2009, or tax ye	ar beginning		, and e	nding		
G C	heck	all that apply:	Initial return	Initial return of a fo	ormer public (	charity	Final return	l
			Amended return	Address chan	ge		Name change	
Use	the I	IRS Name of foundation	า				A Employer identification	number
	abel.	-						
Oth	erwis	se, JAGODA FA	MILY FOUNDAT	ION			43-6884619	<u> </u>
	print	· ·	PO box number if mail is not de	elivered to street address)		Room/suite	B Telephone number	
	type		90				913-341-44	.11
	Spec ructio						C If exemption application is p	ending, check here
	uone	OVERLAND		204			D 1. Foreign organization:	
H_C	heck	type of organization:	X Section 501(c)(3) ex	cempt private foundation			Foreign organizations me check here and attach co	mputation
<u>L</u>	Se	ction 4947(a)(1) nonexei		Other taxable private founda	ation		E If private foundation sta	tus was terminated
l Fa	ır ma	irket value of all assets at	·	~	Acci	rual	under section 507(b)(1)	)(A), check here
		Part II, col. (c), line 16)		ther (specify)			F If the foundation is in a	
	\$		<del>- /   </del>	mn (d) must be on cash l	basis)		under section 507(b)(1	T
Pa	<u>irt l</u>	Analysis of Revenue a (The total of amounts in col necessarily equal the amou	lumns (b), (c), and (d) may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grain	nts, etc., received					
	2	Check X If the foundat						
	3	Interest on savings and temporal investments	porary					
	4	Dividends and interest fi		12,671.	1	2,109.	12,671.	STATEMENT 1
	5a	Gross rents						
	b	Net rental income or (loss)						_
a)	6a	Net gain or (loss) from sale o		<4,010.	>			
£ S	b	Gross sales price for all assets on line 6a	18,881.					
<b>CENNAPS</b>	7	Capital gain net income (from	m Part IV, line 2)			0.		
<b>E</b>	8	Net short-term capital ga	aın					
急	9	Income modifications	1					
	10a	Gross sales less returns and allowances						:
$\cup$	b	Less Cost of goods sold						
≽	C	Gross profit or (loss)						
AUG	11	Other income	•	200.	_	200.		STATEMENT 2
<u>~~</u>	12_	Total Add lines 1 throu	gh 11	8,861.	1	<u>2,309.</u>	12,871.	
<b>~</b>	13	Compensation of officers, di		0.		0.	0.	0.
2010sesu	14	Other employee salaries	=			_	· · · -	
₹,	15	Pension plans, employe	e benefits					
ense		Legal fees	amım a	2 000		2.000.		0.
ğ		Accounting fees	STMT 3	2,000.		2,000.	0.	<u> </u>
Ω Ω		Other professional fees				<u> </u>		-
ıtiv		Interest	STMT 4	122.		122.	0.	0.
Operating and Administrative Expe	18	Taxes  Depreciation and depleti		144.	<del> </del>	144.		
Ē	19 20	Occupancy	ion	<del></del>			RECE	VED
۱dπ	21	Travel, conferences, and	1 meetings			_	8	70
β	21	Printing and publication					AUG 1 9	<del>                                     </del>
gar	23	Other expenses	J				1-101 7VU 8	2010   0
ţį		Total operating and adi	ministrative				00==	178
ēra	27	expenses. Add lines 13		2,122.		2,122.	OGDE	1, UT 0.
Ö	25	Contributions, gifts, grai	-	35,000.		<u> </u>		35,000.
		Total expenses and dis		23,000				
		Add lines 24 and 25		37,122.		2,122.	0.	35,000.
	27	Subtract line 26 from lin	ne 12:	J. / L	-		<u> </u>	
		Excess of revenue over expe		<28,261.	>			
		Net investment income				0,187.		
	C	Adjusted net income (if					12,871.	
9235 02-02				Act Notice, see the instruc	tions.			Form <b>990-PF</b> (2009)

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Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

	2007		
	2006		
	2005		
_	2004		
2	2 Total of line 1, column (d)	2	.136187
3	3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number the foundation has been in existence if less than 5 years	r of years	.136187
4	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	509,538.
5	5 Multiply line 4 by line 3	5	69,392.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	102.
7	Add lines 5 and 6 .	. 7	69,494.
8	B Enter qualifying distributions from Part XII, line 4	8	35,000.
	If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part usin	ig a 1% tax rate.	

See the Part VI instructions. 923521 02-02-10

Forn		588461 <u>9</u>		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see instru	ction	<u>1s)</u>
1a	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		2	<u>04.</u>
	of Part I, line 27b			
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2		<u>2</u>	04.
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-		2	<u>04.</u>
6	Credits/Payments:			
	a 2009 estimated tax payments and 2008 overpayment credited to 2009			
	b Exempt foreign organizations - tax withheld at source			
	c Tax paid with application for extension of time to file (Form 8868)  6c 102.			
	d Backup withholding erroneously withheld		1	00
7	Total credits and payments. Add lines 6a through 6d			<u>02.</u>
8	Enter any penalty 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		Т	02.
10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11  art VII-A Statements Regarding Activities			
			Yes	No
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1a	103	X
,	any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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 published or	10		
	distributed by the foundation in connection with the activities			
	c Did the foundation file Form 1120-POL for this year?	10		x
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	- ''	-	
	(1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0.			
-	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
•	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
t	b If "Yes," has it filed a tax return on Form 990-T for this year?	/A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV.			
88	a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
	KS	<del></del>		
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	0.	х	
^	of each state as required by General Instruction G? If "No," attach explanation	8b	v	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10		10		X
-10	Did this policing gooding substitution of this butters during the tax year: If tes, attach a schedule listing their names and addresses	Form <b>990</b>	-PF (	

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

orm 990-PF (2009) JAGODA FAMILY FOUNDATION			43-68846	19 Page 6
Part-VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y <sub>t</sub>	es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			es 🗶 No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	·	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b
Organizations relying on a current notice regarding disaster assistance check hi				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?		I/A 📖 Ye	es L No	
If "Yes," attach the statement required by Regulations section 53.4945				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oay premiums on			į į
a personal benefit contract?		Ye	es 🗶 No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribute				7b
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Ma	nagers, Highly	<b>/</b>	
List all officers, directors, trustees, foundation managers and their calls.	compensation	<del>-</del>		
List all officers, directors, trustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid.	(d) Contributions to employee benefit plans and deferred	account, other
STEVEN D. JAGODA	to position TRUSTEE	`enter'-0-)'	compensation	allowances
PO BOX 4190	IKOSIEE			
OVERLAND PARK, KS 66204	0.00	0.	0.	0.
OVERHAND FARR, RD 00204		•	•	<u></u>
*				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
As Name and address of each ampleure and assess than 000 000	(b) Title, and average	4-> 0	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	'hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE	· ·			
			-	
		<u> </u>		
Total number of other employees paid over \$50,000			<b>.</b>	0
			Form	990-PF (2009)

 $\blacktriangleright$ 

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	494,853.
	Average of monthly cash balances	1b	22,444.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	517,297.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	517,297.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,759.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	509,538.
6	Minimum investment return. Enter 5% of line 5	6	25,477.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	25,477.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	204.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,273.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	25,273.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	25,273.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	35,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<del> </del>
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	35,000.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	35,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

4940(e) reduction of tax in those years.

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				25,273.
2 Undistributed income, if any, as of the end of 2009	·	_		7
a Enter amount for 2008 only			0.	
b Total for prior years:				-
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
<b>c</b> From 2006				
d From 2007				
e From 2008 25, 242.				
f Total of lines 3a through e	25,242.			
4 Qualifying distributions for 2009 from	23,242.			- ··
Part XII, line 4: ► \$ 35 , 000 .				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	-		<u> </u>	
years (Election required - see instructions)		0.		
· · ·		<u></u>		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			25,273.
d Applied to 2009 distributable amount	0 727			23,213.
e Remaining amount distributed out of corpus	9,727.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	34,969.			
b Prior years' undistributed income. Subtract	•			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract			<u> </u>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010			:	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	1			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	34,969.			
O Analysis of line 9:	,			
a Excess from 2005	İ			
b Excess from 2006	}			
c Excess from 2007				
d Excess from 2008 25, 242.				
e Excess from 2009 9,727.				
	<del></del>			

	FAMILY FOUN				384619 Page 10
Part XIV Private Operating F	<b>oundations</b> (see in	structions and Part V	II-A, question 9)	N/A	<del>_</del>
1 a If the foundation has received a ruling o	r determination letter tha	at it is a private operating	ı		
foundation, and the ruling is effective fo	r 2009, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found	dation is a private operati	ing foundation described	I in section	494 <u>2(j)(3)</u> or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a		<u> </u>			
c Qualifying distributions from Part XII,			-		
line 4 for each year listed					
d Amounts included in line 2c not	<del></del>	<del> </del>	_		
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					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
<b>b</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			<u></u>		
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
at any time during t	he year-see the	instructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	itributions received by th	ne foundation before the clo	se of any tax
year (but only if they have contributed in	nore than \$5,000). (See s	section 507(d)(2).)			
NONE					
<b>b</b> List any managers of the foundation wh	o own 10% or more of th	he stock of a corporation	(or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation has	s a 10% or greater intere	est.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., F	Programs:	<del>-</del>	
Check here ► 🗶 if the foundation o	nly makes contributions	to preselected charitable	e organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to who	m applications should b	e addressed:		
- · · , , ,	·				
b The form in which applications should b	e submitted and informa	ation and materials they	should include:		
c Any submission deadlines:					
			<del> </del>		
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		_
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Of Substantial Contributor	rodipion		
			;	
SEE STATEMENT 6				
Total		· · · · · · · · · · · · · · · · · · ·	▶ 3a	35,000.
b Approved for future payment				
NONE				
NONE				
Total .			<b>▶</b> 3b	0.

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Form 990-PF (2009) JAGODA FAMILY	FOUNDATIO	ON		43-6	5884619 Page 12
Part XVI-A Analysis of Income-Produ					
Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
ď					
e					
f					
g Fees and contracts from government agencies	_	. <u>-</u>			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					12,671.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					200.
8 Gain or (loss) from sales of assets other					
than inventory		<del></del>			<4,010.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					·
b					
c					
d					
e			<u> </u>		
12 Subtotal. Add columns (b), (d), and (e)			).	0.1	8,861.
13 Total. Add line 12, columns (b), (d), and (e)				13	8,861.
(See worksheet in line 13 instructions to verify calculations.)	-				
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt F	Purposes	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than				ed importantly to the accomp	plishment of
	-,,				
		-			
	<u> </u>		_		

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Form 9	90-PF (2009) <b>JAGOD</b>	A FAMILY FOUNDATION	43-688	4619	Pa	ige 13
Part		egarding Transfers To and Transactions				
1 D		rectly engage in any of the following with any other organiz	ation described in section 501(c) of		Yes	No
	*	(3) organizations) or in section 527, relating to political org				
	•	lation to a noncharitable exempt organization of:	-			
	) Cash	, ,		1a(1)		х
•	?) Other assets			1a(2)		Х
•	ther transactions:					
(	) Sales of assets to a noncharita	able exempt organization		16(1)		х
•	) Purchases of assets from a no			1b(2)		х
•	) Rental of facilities, equipment,	· -		1b(3)		х
•	) Reimbursement arrangements			1b(4)		Х
(!	i) Loans or loan guarantees			1b(5)		Х
•	•	embership or fundraising solicitations		1b(6)		Х
c S	haring of facilities, equipment, ma	ailing lists, other assets, or paid employees		1c		Х
d If	the answer to any of the above is	"Yes," complete the following schedule. Column (b) should	always show the fair market value of the goods,	other ass	ets,	
0	r services given by the reporting f	oundation. If the foundation received less than fair market v	value in any transaction or sharing arrangement, s	show in		
C	olumn (d) the value of the goods,	other assets, or services received.				
(a) Line	no (b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	nts
		N/A				
2a Is	the foundation directly or indirec	tly affiliated with, or related to, one or more tax-exempt organic	anizations described			

2a	a Is the foundation directly or indirectly affiliated with, or related to, on	e or more tax-exempt organiza	ations described	
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	ction 527?		Yes X No
b	o If "Yes," complete the following schedule.			
	(a) Name of organization	(b) Type of organization	(c) Description of re	lationship
	N/A			<u>.</u>
	<u> </u>			
	Under penalties of perjury, I declare that I have examined this return, including acc			lief, it is true, correct,
	and complete Declaration of prepare (other than taxpylyer or fiduciary) is based or	n all information of which preparer ha	as any knowledge	
		6/15/200	► TRUSTEE	
Fere	Signatu/e of officer or trustee	Date	Title	
Ĭ	Preparer's	Dat		Preparer's identifying number
Sign	Signature V	·   6	SISTEMO Self-	
"	Firm's vame (or yours SENTINEL WEALTH ADV	/ISORS, LLC	EIN ▶	
- [	1901 W 47TH PL, SU	-		
ŀ	address, and ZIP code WESTWOOD, KS 66205	<del></del>	Phone no. 9	13.647.1340

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECT	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A	)
FIDELITY	_		12,109.		0.	12,10	09.
FIDELITY - NONDIVIDEND DISTRIBUTION			562.		0.	56	62.
TOTAL TO FM 990-PF, PART I, I	-N 4 =		12,671.		0.	12,6	71.
FORM 990-PF	O'.	THER I	NCOME			STATEMENT	2
DESCRIPTION		:	(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME		
FIDELITY - CAPITAL GAIN DISTRIBUTIONS				200.	200.	. 20	00.
TOTAL TO FORM 990-PF, PART I,	LINE	11		200.	200.	20	00.
FORM 990-PF	ACC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE		(B) NET INV MENT IN	EST-			
SENTINEL WEALTH ADVISORS		2,000.	2	,000.	. 0	).	0.
TO FORM 990-PF, PG 1, LN 16B		2,000.	2	,000		).	0.
FORM 990-PF		TAX	ES			STATEMENT	4
			(B)		(C)	(D)	
DESCRIPTION	EXPEI PER I		NET INV MENT IN		ADJUSTED NET INCOME	CHARITAI E PURPOSI	
DESCRIPTION  FOREIGN TAXES	EXPE	NSES	NET INV		NET INCOME		

FORM 990-PF	CORPORATE STOCK		STATEMENT 5	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
FIDELITY INVESTMENTS		601,425.	577,644.	
TOTAL TO FORM 990-PF, PART	II, LINE 10B	601,425.	577,644.	
FORM 990-PF	GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR		STATEMENT 6	
RECIPIENT NAME AND ADDRESS	RECIPIENT RELAT: AND PURPOSE OF		PIENT ATUS AMOUNT	
KOBREN FOR THE CURE	GENERAL USE	CHARIT	TABLE 1,000.	
CHILDREN'S MERCY HOSPITAL	GENERAL USE	CHARIT	TABLE 2,000.	
VILLAGE SHALOM	GENERAL USE	CHARIT	TABLE 1,000.	
CONGREGATION KOL AMI	GENERAL USE	CHARIT	PABLE 1,000.	
CYSTIC FIBROSIS	GENERAL USE	CHARIT	PABLE 1,000.	
TURNING POINT	GENERAL USE	CHARIT	PABLE 1,000.	

, JAGODA FAMILY FOUNDATION		43-	-6884619
HARVESTERS COMMUNITY FOOD NETWORK	GENERAL USE	CHARITABLE	1,000.
HOLOCAUST CENTER OF NORTHERN CALIFORNIA	GENERAL USE	CHARITABLE	1,000.
JEWISH LEADERS (JEWISH COMMUNITY FOUNDATION)	GENERAL USE	CHARITABLE	1,000.
JEWISH COMMUNITY CENTER OF GREATER KANSAS CITY	GENERAL USE	CHARITABLE	3,500.
TEMPLE B'NAI JEHUDAH	GENERAL USE	CHARITABLE	2,500.
JEWISH FEDERATION OF GREATER KANSAS CITY	GENERAL USE	CHARITABLE	4,000.
SYNERGY SERVICES	GENERAL USE	CHARITABLE	2,000.
UNIVERSITY OF UMKC (EDUCATION DEPARTMENT)	GENERAL USE	CHARITABLE	1,000.
MIDWEST CENTER HOLOCAUST EDUCATION	GENERAL USE	CHARITABLE	1,000.
WAYSIDE WAIFS	GENERAL USE	CHARITABLE	1,000.

JAGODÁ FAMILY FOUNDATION 43-6884619 CHARITABLE 10,000. KU WILLIAMS FUND GENERAL USE CHARITABLE SYNERGY SERVICES GENERAL USE THE TEMPLE CONGREGATION B'NAI CHARITABLE GENERAL USE CHARITABLE TONY GONZALES FOUNDATION GENERAL USE

35,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

### Form '8868

(Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

• If you	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box		<b>▶</b> 🗓			
•	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)					
Do not	complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed Fo	rm 8868.			
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)					
A corpo	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete				
Part I o		•	▶ □			
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ocome tax returns	exter	sion of time			
Electro noted b (not aut you mu	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension lelow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic omatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or const submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	cally if	(1) you want the additional ated Form 990 T Instead,			
Туре о	Name of Exempt Organization	Emp	loyer identification number			
print		_				
File by the	JAGODA FAMILY FOUNDATION	4	3-6884619			
due date for filing your PO BOX 4190						
return Se instruction						
	OVERLAND PARK, KS 66204					
Check	type of return to be filed (file a separate application for each return)					
F	orm 990 Form 990-T (corporation) Form 47	20				
F	orm 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52	27				
F	orm 990-EZ Form 990-T (trust other than above) Form 60	69				
X F	orm 990-PF	70				
Tele If the	books are in the care of   7031 W. 97TH TERRACE - OVERLAND PARK, K phone No.   913-341-4411  FAX No.   e organization does not have an office or place of business in the United States, check this box s is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this  If it is for part of the group, check this box   and attach a list with the names and EINs of all it	s is fo	r the whole group, check this			
_	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti- AUGUST 15, 2010 , to file the exempt organization return for the organization named all for the organization's return for:		The extension			
	▶ <mark>∑</mark> calendar year <u>2009</u> or					
	tax year beginning, and ending		_			
2 If	this tax year is for less than 12 months, check reason.		Change in accounting period			
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
_	onrefundable credits See instructions	3a	\$ 102.			
	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated					
	ax payments made. Include any prior year overpayment allowed as a credit	3b_	\$ 0.			
	alance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,					
	eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	2-	s 102.			
	ee instructions	3c_				
	n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	oo/9-				
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev. 4-2009)			