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Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury,
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning JUL 1, 2009 and ending JUN 30, 2010

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization UMKC TRUSTEES Doing Business As		D Employer identification number 44-0546001
		Number and street (or P O box if mail is not delivered to street address) Room/suite 5100 ROCKHILL ROAD		E Telephone number 816-235-1349
		City or town, state or country, and ZIP + 4 KANSAS CITY, MO 64110		G Gross receipts \$ 2,879,358.
		F Name and address of principal officer: STEPHEN D. DUNN 5100 ROCKHILL ROAD, KANSAS CITY, MO 64110		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶

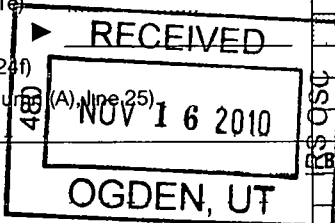
I Tax-exempt status 501(c) (3) (insert no) 4947(a)(1) or 527

J Website: ▶ N/A

K Form of organization Corporation Trust Association Other ▶ **L Year of formation** 1950 **M State of legal domicile** MO

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO ADD TO AND PROMOTE EXCELLENCE IN THE QUALITY OF THE HIGHER EDUCATIONAL PROGRAMS MAINTAINED AT THE			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	67	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	67	
	5	Total number of employees (Part V, line 2a)	5	0	
	6	Total number of volunteers (estimate if necessary)	6	104	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
	Revenue	8	Contributions and grants (Part VIII, line 1h)	3,301,674.	716,661.
		9	Program service revenue (Part VIII, line 2g)		
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	459,767.	383,166.	
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<3,913.>	64,950.	
12		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,757,528.	1,164,777.	
13		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,325,466.	646,773.	
		14	Benefits paid to or for members (Part IX, column (A), line 4)		
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			
		16a	Professional fundraising fees (Part IX, column (A), line 11e)		
17		b Total fundraising expenses (Part IX, column (D), line 25)	329,883.	293,922.	
		18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,655,349.	940,695.
19		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,102,179.	224,082.	
Assets & Fund Balances	20	Total assets (Part X, line 16)	20,188,466.	4,830,689.	
	21	Total liabilities (Part X, line 26)	828,562.	66,408.	
	22	Net assets or fund balances. Subtract line 21 from line 20	19,359,904.	4,764,281.	
			Beginning of Current Year	End of Year	



Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Stephen D. Dunn Signature of officer November 11, 2010 Date
 ▶ **STEPHEN D. DUNN, TREASURER & VICE CHAIR FINANCE**
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Charles S. Haviland Date 11/11/10 Check if self-employed Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ MILLER HAVILAND KETTER PC, PA
1901 W. 47TH PLACE, SUITE 204
WESTWOOD, KANSAS 66205

EIN ▶ Phone no ▶ (913) 432-2727

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission
TO ADD TO AND PROMOTE EXCELLENCE IN THE QUALITY OF THE HIGHER
EDUCATIONAL PROGRAMS MAINTAINED AT THE UNIVERSITY OF MISSOURI-KANSAS
CITY.

2 Did the organization undertake any significant program services during the year which were not listed on
the prior Form 990 or 990-EZ? [] Yes [X] No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O [] Yes [X] No

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 851,341. including grants of \$ 646,773.) (Revenue \$)
ALL GRANTS AND ALLOCATIONS ARE USED TO ADD AND PROMOTE EXCELLENCE IN
THE QUALITY OF HIGHER EDUCATION PROGRAMS MAINTAINED AT THE UNIVERSITY
OF MISSOURI-KANSAS CITY.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code.) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 851,341.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
<ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> • Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> • Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> • Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> 		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>		
	Yes	No
12A		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
14b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	X	
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	X	
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official		X
15b	b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization **ANDRY JOSWARA - 816-235-1156**
5100 ROCKHILL RD, AC 224, KANSAS CITY, MO 64110

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	716,661.				
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f		716,661.				
	Program Service Revenue	2 a		Business Code				
b								
c								
d								
e								
f		All other program service revenue						
g		Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		17,424.			17,424.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross Rents	(i) Real	904527.				
		b	Less: rental expenses	(ii) Personal	846653.			
		c	Rental income or (loss)		57,874.			
	d	Net rental income or (loss)		57,874.			57,874.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	1,233,670.				
		b	Less: cost or other basis and sales expenses	(ii) Other	867928.			
		c	Gain or (loss)		365742.			
	d	Net gain or (loss)		365,742.	365,742.			
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events						
	9 a	Gross income from gaming activities See Part IV, line 19	a					
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	a						
b	Less: cost of goods sold	b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
11 a	WMN COUNCIL LUNCH		611710	6,477.	6,477.			
b	OTHER INCOME		611710	599.	599.			
c								
d	All other revenue							
e	Total. Add lines 11a-11d			7,076.				
12	Total revenue. See instructions			1164777.	372,818.	0.	75,298.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	605,421.	605,421.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	41,352.	41,352.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees).				
a Management				
b Legal	5,409.		5,409.	
c Accounting	30,112.		30,112.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	53,124.		53,124.	
g Other	709.		709.	
12 Advertising and promotion	4,023.	4,023.		
13 Office expenses	1,162.	1,162.		
14 Information technology	599.	599.		
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>DIASTOLE - HOSPITAL HIL</u>	104,247.	104,247.		
b <u>CONTRIBUTION ADJUSTMENT</u>	47,544.	47,544.		
c <u>BAD DEBT EXPENSE</u>	13,241.	13,241.		
d <u>MEALS & ENTERTAINMENT</u>	9,690.	9,690.		
e <u>ANNUAL LUNCHEON</u>	6,132.	6,132.		
f All other expenses _____	17,930.	17,930.		
25 Total functional expenses. Add lines 1 through 24f	940,695.	851,341.	89,354.	0.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	356,802.	1	408,459.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	910,483.	4	605,600.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	9,576.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 4,838,653.		
	b Less: accumulated depreciation	10b 1,724,065.	3,243,143.	10c 3,114,588.
	11 Investments - publicly traded securities	15,678,038.	11	692,466.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	20,188,466.	16	4,830,689.	
Liabilities	17 Accounts payable and accrued expenses	15,382.	17	412.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	757,596.	23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	55,584.	25	65,996.
	26 Total liabilities. Add lines 17 through 25	828,562.	26	66,408.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,943,731.	27	4,220,814.
	28 Temporarily restricted net assets	3,301,956.	28	542,967.
	29 Permanently restricted net assets	12,114,217.	29	500.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	19,359,904.	33	4,764,281.	
34 Total liabilities and net assets/fund balances	20,188,466.	34	4,830,689.	

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization UMKC TRUSTEES	Employer identification number 44-0546001
--	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	629,149.	810,438.	827,520.	3,301,674.	716,661.	6,285,442.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	629,149.	810,438.	827,520.	3,301,674.	716,661.	6,285,442.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,167,883.
6 Public support. Subtract line 5 from line 4						4,117,559.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	629,149.	810,438.	827,520.	3,301,674.	716,661.	6,285,442.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	816,343.	1,009,970.	993,393.	1,000,531.	921,951.	4,742,188.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)			13,538.	13,233.	7,076.	33,847.
11 Total support. Add lines 7 through 10						11,061,477.

12 Gross receipts from related activities, etc. (see instructions) 12

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	37.22 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	39.02 %
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Schedule D
(Form 990)

Department of the Treasury,
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

UMKC TRUSTEES

Employer identification number

44-0546001

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- | | |
|--|------------|
| (i) Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ |
| (ii) Assets included in Form 990, Part X | ▶ \$ _____ |
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items.
- | | |
|--|------------|
| a Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ |
| b Assets included in Form 990, Part X | ▶ \$ _____ |

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,114,217.	9154105.			
b Contributions	417,816.	2960112.			
c Net investment earnings, gains, and losses					
d Grants or scholarships	12,531,533.				
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	500.	12,114,217.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ .00 %
- b Permanent endowment ▶ 100.00 %
- c Term endowment ▶ .00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i) unrelated organizations		X
3a(ii) related organizations		X
3b		

- (i) unrelated organizations
- (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		913,155.		913,155.
b Buildings		3,925,498.	1,724,065.	2,201,433.
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))				3,114,588.

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,164,777.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	940,695.
3	Excess-or (deficit) for the year Subtract line 2 from line 1	3	224,082.
4	Net unrealized gains (losses) on investments	4	1,267,318.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	<16,087,023.>
9	Total adjustments (net) Add lines 4 through 8	9	<14,819,705.>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<14,595,623.>

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	3,225,624.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
	a Net unrealized gains on investments	2a	
	b Donated services and use of facilities	2b	
	c Recoveries of prior year grants	2c	
	d Other (Describe in Part XIV.)	2d	1,267,318.
	e Add lines 2a through 2d	2e	1,267,318.
3	Subtract line 2e from line 1	3	1,958,306.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	53,124.
	b Other (Describe in Part XIV.)	4b	<846,653.>
	c Add lines 4a and 4b	4c	<793,529.>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,164,777.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,734,224.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
	a Donated services and use of facilities	2a	
	b Prior year adjustments	2b	
	c Other losses	2c	
	d Other (Describe in Part XIV.)	2d	
	e Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	1,734,224.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	53,124.
	b Other (Describe in Part XIV.)	4b	<846,653.>
	c Add lines 4a and 4b	4c	<793,529.>
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	940,695.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: DURING THE YEAR, THE ORGANIZATION HAD OVER 50

DIFFERENT ENDOWMENT FUNDS EACH ESTABLISHED WITH A DIFFERENT PURPOSE. THE

MAJORITY OF THE FUNDS WERE FOR SCHOLARSHIPS FOR STUDENTS ATTENDING UMKC.

AT JUNE 21, 2010, A MAJORITY OF THE FUNDS WERE TRANSFERRED TO UMKC

FOUNDATION AS DESCRIBED IN SCHEDULE N.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

TRANSFER OF PERMANENTLY RESTRICTED ASSETS TO UMKC FOUNDATION: -16087023.

Part XIV Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

NET UNREALIZED GAIN ON INVESTMENTS: 1267318.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSES: -846653.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSE: -846653.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization **UMKC TRUSTEES** Employer identification number **44-0546001**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF MISSOURI - KANSAS CITY - 5100 ROCKHILL ROAD - KANSAS CITY, MO 64110	43-6003859	501(C)(3)	605,421.	0.	CASH	N/A	FUNDING FOR ENDOWED SCHOLARSHIPS/CHAIRS/PROG FELLOWS AND SCHOLARS PROGRAM MANAGED BY UMKC

2 Enter total number of section 501(c)(3) and government organizations **1.**

3 Enter total number of other organizations **0.**

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOOL OF BIOLOGICAL SCIENCES SCHOLARSHIPS	4	700.	0. CASH	N/A	
WOMEN'S COUNCIL GRADUATE ASSISTANT SCHOLARSHIPS	47	39,000.	0. CASH	N/A	
SCHOOL OF MEDICINE - GOODSON SCHOLARSHIP	1	1,652.	0. CASH	N/A	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE I, PART I, LINE 2: GRANTS ARE PROVIDED TO THE UNIVERSITY OF MISSOURI-KANSAS CITY (UMKC) WHO THEN APPLIES THE SELECTION CRITERIA TO AWARD GRANTS AND MAINTAIN RECORDS TO SUBSTANTIATE THE AMOUNT OF THE GRANTS. UMKC MONITORS THE USE OF FUNDS IN THE UNITED STATES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

UMKC TRUSTEES

Employer identification number

44-0546001

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
b Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
b Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
RICK ANDERSON	(i) 0.	(ii) 0.	(iii) 0.	0.	0.	0.	0.
	(ii) 161,374.	(iii) 0.	0.	0.	517.	161,891.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
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	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

Part I Liquidation, Termination, or Dissolution (continued)

Note. If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B) should equal 0.

- 3 Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III
- 4a Did the organization request or receive a letter from the IRS that the organization's exempt status was terminated?
- b If "Yes," provide the date of the letter. **▶** . Attach a copy of the letter and, if applicable, the organization's request for the letter.
- 5a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?
- b If "Yes," did the organization provide such notice?
- 6 Did the organization discharge or pay all liabilities in accordance with state laws?
- 7a Did the organization have any tax-exempt bonds outstanding during the year?
- b Did the organization discharge or defease tax-exempt bond liabilities in accordance with the Internal Revenue Code and state laws?
- c If "Yes," describe in Part III how the organization defeased or otherwise settled these liabilities. If "No," explain in Part III.

	Yes	No
3		
4a		
5a		
5b		
6		
7a		
7b		

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" to Form 990, Part IV, line 32, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt or type of entity)
ENDOWMENT FUNDS		06/21/10	16,087,023	FAIR MARKET VALUE STATED BY INVESTMENT BROKER	26-0840496	UMKC FOUNDATION 333 ADMINISTRATIVE CENTER, 510 KANSAS CITY, MO 64110	501(C)(3)

- 2 Did or will any officer, director, trustee, or key employee of the organization:
 - a Become a director or trustee of a successor or transferee organization?
 - b Become an employee of, or independent contractor for, a successor or transferee organization?
 - c Become a direct or indirect owner of a successor or transferee organization?
 - d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?
 - e If the organization answered "Yes" to any of the questions in this line, provide the name of the person involved and explain in Part III.

	Yes	No
2a	X	
2b	X	
2c	X	
2d	X	

Part III **Supplemental Information.** Complete to provide the information required by Part I, lines 2e, 7c; Part II, line 2e; and any additional information.

PART II, LINE 2E: ALAN ATTERBURY, THOMAS BLOCH, LEO MORTON, B. JOHN READEY III, ELIZABETH SOLBERG, CHARLES SOSLAND, HUGH ZIMMER, JOHN SHERMAN

PART II, LINE 2E: THE INDIVIDUALS LISTED ARE BOARD MEMBERS OF BOTH UMKC TRUSTEES AND UMKC FOUNDATION.

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	Yes	No
(1)	UMKC FOUNDATION	Q	16,087,023.		X
(2)					
(3)					
(4)					
(5)					
(6)					

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

UMKC TRUSTEES

Employer identification number

44-0546001

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNIVERSITY OF MISSOURI-KANSAS CITY.

FORM 990, PART V, LINE 3B: THE ORGANIZATION RECEIVES RENTAL INCOME FROM
DEBT FINANCED RENTAL PROPERTY. THE ORGANIZATION IS NOT REQUIRED TO FILE
FORM 990-T BECAUSE ACQUISITION INDEBTEDNESS FOR PURPOSES OF THE 990-T, DOES
NOT INCLUDE DEBT INCURRED BY A TAX-EXEMPT SCHOOL UNDER SECTION
170(B)(1)(A)(II) AND ITS AFFILIATED SUPPORT ORGANIZATIONS (UNDER SECTION
509(A)(3)). UMKC TRUSTEES IS AN AFFILIATED SUPPORT
ORGANIZATION (UNDER SECTION 509(A)(3)) OF THE UNIVERSITY OF MISSOURI-KANSAS
CITY (A TAX EXEMPT SCHOOL UNDER 170(B)(1)(A)(II)).

FORM 990, PART VI, SECTION A, LINE 2: NEIL AND CHARLES SOSLAND ARE BOTH
MEMBERS OF THE BOARD OF DIRECTORS. NEIL SOSLAND IS CHARLES SOSLAND'S
UNCLE.

FORM 990, PART VI, SECTION A, LINE 3: THE ORGANIZATION USES COPAKEN WHITE
BLITT FOR THE MANAGEMENT OF RENTAL PROPERTIES.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE OF THE BOARD
OF DIRECTORS REVIEWS THE FORM 990 BEFORE IT IS FILED.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST FROM ANDRY JOSWARA AT 816-235-1156.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

UMKC TRUSTEES

Employer identification number

44-0546001

FORM 990, PART XI, LINE 2C

THE ORGANIZATION'S FINANCE COMMITTEE ASSUMES RESPONSIBILITY FOR THE
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNTANT.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: JOHN DAVIS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

EX-OFFICIO MEMBER OF BOARD OF DIRECTORS

(D) DESCRIPTION OF TRANSACTION: AN EX-OFFICIO MEMBER OF THE BOARD OF

DIRECTORS AND MEMBER OF THE UMKC TRUSTEES' EXECUTIVE COMMITTEE, JOHN

DAVIS, IS A PARTNER AT THE LAW FIRM STINSON, MORRISON, HECKER. THE

ORGANIZATION PAYS LEGAL FEES TO STINSON, MORRISON, HECKER FOR SERVICES

RENDERED TO THE ORGANIZATION BY PARTNERS AND STAFF OF STINSON, MORRISON,

HECKER.

FORM 990, SCHEDULE R, PART V, LINE 1Q

ON JUNE 21, 2010, UMKC TRUSTEES BEGAN TRANSFERRING PERMANENTLY

RESTRICTED NET ASSETS TO THE UMKC FOUNDATION. THE FAIR MARKET VALUE OF

THE ASSETS TRANSFERRED WAS \$16,087,023 AS DETERMINED BY THE INVESTMENT

BROKER. THE FOUNDATION PROVIDES ACCOUNTING AND OTHER SERVICES TO THE

UMKC TRUSTEES.

**UMKC TRUSTEES
2009-2010**

John F. Anderson
Emeritus

Malcolm M. Aslin
2010

Alan L. Atterbury
2012
President
Midland Properties, Inc.

William H. Bates
Emeritus
Of Counsel
Lathrop & Gage, LC

G. Kenneth Baum
Emeritus
Chairman of the Board
George K. Baum Group

Jonathan E. Baum
2011
Chairman
George K. Baum & Company

Theodore C. Beckett, Jr.
Emeritus
Of Counsel
Baker Sterchi Cowden & Rice, L.L.C.

E. Bert Berkley
Emeritus
Chairman of the Board
Tension Envelope Corp.

William S. Berkley
2010
President and Chief Executive Officer
Tension Envelope Corporation

Steven A. Bernstein
**Vice Chair - Scholars Recruitment
Program**
2011
President
Bernstein Rein Advertising Inc.

R. Philip Bixby
2011
President, Chief Executive Officer and
Chairman
Kansas City Life Insurance Company

Henry W. Bloch
Emeritus
Honorary Chairman of the Board
H&R Block Incorporated

Thomas M. Bloch
**Co-Vice Chair - Board Development
and Engagement**
2011
President of the Board and Co-Founder
University Academy

John W. Bluford
2010
President and Chief Executive Officer
Truman Medical Centers

Barrett Brady
Emeritus

Mary Shaw Branton
Honorary

Damon K. Bryant
Community Trustee
Vice President, Marketing and Creative
Services
WDAF-TV4

J. Grant Burcham
2010
President and Chief Executive Officer
Missouri Bank

John W. Callison
2010
Vice President, Investments
Oppenheimer & Company, Inc.

Newton A. Campbell
Honorary
Executive in Residence
University of Missouri-Kansas City

Thomas S. Carter
Emeritus

Michael L. Carter
2012
Chief Executive Officer
Carter Broadcasting Group, Inc.

Wayne A. Cauthen
2011

Michael J. Chesser
2010
Chairman and Chief Executive Officer
Kansas City Power & Light

Dianne S. Cleaver
2010
President
Symmetry Consulting

Keith Copaken
2011
Principal
Copaken, White & Blitt

Lajuana M. Counts
Community Trustee
Assistant US Attorney
Western District of Missouri

Richard B. Cray
Emeritus
Trustee
Cray Foundation

Ellen Darling
2011
Chief Executive Officer
Zimmer Companies, Inc.

John C. Davis
Counsel, Ex-officio
Ex-Officio
Attorney at Law
Davis Law Kansas City

Richard E. Davis, Sr.
Emeritus
Founder
KC Masterpiece BBQ Products

Thomas E. Deacy, Jr.
Emeritus
Sr. Partner
Deacy & Deacy, LLP

Paul E. DeBruce
2010
Chief Executive Officer
DeBruce Grain, Inc.

E.H. "Trace" Devanny, III
2011
President
Cerner Corporation

Ann Dickinson
2012
Chairman
Dickinson Financial Corporation

Stephen D. Doyal
Vice Chair - Development
2010
Senior Vice President, Public Affairs and
Communications
Hallmark Cards, Inc.

Stephen D. Dunn
Treasurer and Vice Chair - Finance
2012
Chairman
J. E. Dunn Construction Company

E. Frank Ellis
2011
Chairman and Chief Executive Officer
Swope Community Enterprises

Anne Westlake Elsberry
2011

Warren K. Erdman
2012
Executive Vice President, Corporate Affairs
Kansas City Southern

Michael D. Fields
2012
Executive Director
William T. Kemper Foundation

Gary D. Forsee
Special Trustee
President
University of Missouri System

J. Scott Francis
2010
Owner
Francor, LLC

William J. French
Honorary

Fernando J. Gaitan
2012
Chief Judge
U.S. District Court

Sue Garnett
Community Trustee
Executive Director, Scientific Education
Celgene

Ollie Gates
Emeritus
Owner and Founder
Gates BBQ

Esther L. George
2012
First Vice President and Chief Operating
Officer
Federal Reserve Bank of Kansas City

Leonard J. Graham
2010
President
Taliaferro & Browne, Inc.

Richard C. Green, Jr.
2012
Chairman
The Calvin Group, LLC

Judith Haggard
Special Trustee
Chair
UM Board of Curators

Linda S. Hammer
2012
Regional Sales Manager
AT&T

B. Spencer Heddens, III
2012
President, Kansas City Region
Bank of America, Kansas City

Doranne M. Hudson
Co-Vice Chair - Board Development
and Engagement
2012
Retired, Hallmark Cards; Executive in
Residence
Bloch School, UMKC

Richard D. Johnson
2011
Founder and President
KC Pharma, LLC

George J. Korbelik
Emeritus

Gordon H. Lamb
Honorary
Executive Vice President

Pete S. Levi
2011
Attorney at Law
Polisinelli Shughart PC

Barbara H. Marshall
Honorary
Co-Founder
Toy and Miniature Museum

Chandler McCray
2012
President, Chief Executive Officer
McCray Lumber Company and Millwork

C. Patrick McLarney
Chair Elect
2011
Shook Hardy & Bacon L.L.P

Ann Mesle
Vice Chair - Scholar / Business
Connections
2013
Circuit Judge
State of Missouri

Leo E. Morton
UMKC Chancellor

William C. Nelson
2010
Chairman, George K. Baum Asset
Management
George K. Baum Holdings

Bert W. Oettmeier, Jr.
Community Trustee
Dentist
Private Dental Practice

David F. Oliver
2012
Partner
Berkowitz Oliver Williams Shaw &
Eisenbrandt LLP

Robert E. Peterson
Emeritus

George E. Powell, III
2010

Louis C. Rasmussen
Emeritus

B. John Readey, III
Chairperson
2010
Partner
Bryan Cave LLP

Jerry D. Reece
2010
Chief Executive Officer
Reece and Nichols

Ralph D. Reid
2011
Vice President, Corporate Social
Responsibility
Sprint Corporation

John H. Robinson, Sr.
Emeritus

Paul Rodriguez
2011
President
Rodriguez Mechanical Contractors

George A. Russell
Honorary

James A. Sangster
2012

President
UMB Bank

Lisa Schellhorn
Community Trustee

Andrew B. Schmitt
2012
President, Chief Executive Officer
Layne Christensen Company

John J. Sherman
2012
President and Chief Executive Officer
Inergy Propane LLC

Byron C. Shutz
Emeritus

Scott M. Smith
2011
Director of Strategic Initiatives
HNTB Corporation

Beth K. Smith
Honorary
Adjunct Professor
Center for Non-Profit Leadership

Elizabeth T. Solberg
2012
Interim General Manager
Fleishman-Hillard, Inc.

Neil N. Sosland
Emeritus
Executive Editor-Markets
Sosland Publishing Company

Charles S. Sosland
2010
President and Chief Executive Officer
Sosland Companies, Inc

Martha J. Starr
Honorary

Arthur H. Stoup
Emeritus
President
Arthur H. Stoup & Assoc., P.C.

Kent Sunderland
2011
Vice Chairman and Secretary
Ash Grove Cement Company

H. Stephen Talge
Emeritus

Avis G. Tucker
Emeritus
President
Star-Journal Publishing Company

Thomas J. Turner, III
Vice Chair - Real Estate
2011
Executive Vice President
Grandbridge Real Estate Capital LLC

Gene E. Voigts
Community Trustee
Partner, General Counsel
Shook, Hardy & Bacon

Joel B. Voran
2012
Chief Executive Officer
Lathrop & Gage LLP

Don Wagner
2011
Investor
Wagner Investments, L.P.

Kathryn Walker
2010
Managing Director
OPENAIR Ventures

Robert H. West
Emeritus
St. Luke's HealthSystem

David Westbrook
2012
Senior Vice President, Strategy and
Innovation
Children's Mercy Hospitals & Clinics

Joy D. Wheeler
Secretary & Vice Chair Trustee
Orientation/Training
2011
Vice President, Medical and Patient Relations
SimmonsCooper LLC

Peter K. Yelorda
2010
Executive Vice President and Chief
Community Affairs Officer
Blue Cross & Blue Shield of Kansas City

David B. Yost
2012
Executive Vice President
Midwest Trust Company

Hugh J. Zimmer
Emeritus
Chairman
Zimmer Companies, Inc.