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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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 07-01-2009 and ending 06-30-2010

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

WICHITA COMMUNITY FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

301 N MAIN No 100

City or town, state or country, and ZIP + 4

WICHITA, KS 67202

D Employer identification number

48-1022361

E Telephone number

(316) 264-4880

G Gross receipts \$ 12,271,253

F Name and address of principal officer

ROB ALLISON

301 N MAIN SUITE 100

WICHITA, KS 67202

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ 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:

WWW WICHITACF ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1986

M State of legal domicile

KS

Part I Summary

Activities & Governance

1

Briefly describe the organization's mission or most significant activities  
TO RECEIVE AND ACCEPT PROPERTY TO BE ADMINISTERED EXCLUSIVELY FOR CHARITABLE PURPOSES, PRIMARILY IN, OR FOR THE BENEFIT OF, THE COMMUNITY OF WICHITA, KANSAS AND SOUTHCENTRAL KANSAS AND TO DISTRIBUTE PROPERTY TO QUALIFIED CHARITABLE ORGANIZATIONS OR FOR CHARITABLE PURPOSES

2

Check this box ☐ 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)

15

4

Number of independent voting members of the governing body (Part VI, line 1b)

15

5

Total number of employees (Part V, line 2a)

4

6

Total number of volunteers (estimate if necessary)

0

7a

Total gross unrelated business revenue from Part VIII, column (C), line 12

0

7b

Net unrelated business taxable income from Form 990-T, line 34

0

Revenue			Prior Year	Current Year
			3,261,113	2,337,933
				0
			-1,419,376	1,113,607
			20,706	-184,614
			1,862,443	3,266,926
Expenses			9,557,627	3,087,157
				0
			300,657	289,577
				0
			313,805	250,745
			10,172,089	3,627,479
			-8,309,646	-360,553
Net Assets or Fund Balances			Beginning of Current Year	End of Year
			42,169,080	44,351,351
			10,204,030	9,523,915
			31,965,050	34,827,436

Part II Signature Block

Sign Here

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

\*\*\*\*\*

Signature of officer

2011-02-04

Date

ROB ALLISON PRESIDENT & CEO

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

ALBERT DENNY

Date

Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

Regier Carr & Monroe LLP

300 W Douglas Ave Ste 900

Wichita, KS 672022914

EIN

Phone no (316) 264-2335

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2009)

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

TO RECEIVE AND ACCEPT PROPERTY TO BE ADMINISTERED EXCLUSIVELY FOR CHARITABLE PURPOSES, PRIMARILY IN, OR FOR THE BENEFIT OF, THE COMMUNITY OF WICHITA, KANSAS AND SOUTHCENTRAL KANSAS AND TO DISTRIBUTE PROPERTY TO QUALIFIED CHARITABLE ORGANIZATIONS OR FOR CHARITABLE PURPOSES

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

☒

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?

Yes

☒

No

If “Yes,” describe these changes on Schedule O

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 \$ 3,087,157 including grants of \$ 2,951,818 ) (Revenue \$ )

GRANTS MADE TO VARIOUS CHARITABLE AND NON-PROFIT ORGANIZATIONS IN THE WICHITA, KANSAS AREA

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 \$ 3,087,157

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)? If "Yes," complete Schedule A 	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
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? If "Yes," complete Schedule D, Part I 	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8		No
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? If "Yes," complete Schedule D, Part IV 	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	• 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? If "Yes," complete Schedule D, Part VII.			
	• 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? If "Yes," complete Schedule D, Part VIII.			
	• 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? If "Yes," complete Schedule D, Part IX.			
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	• 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? If "Yes," complete Schedule F, Part I	14b		No
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 U S ? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Part IV

Checklist of Required Schedules (continued)

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> . . . . .	21	Yes	
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> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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> . . . . .	23		No
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 questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> 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> . . . . .	25a		No
b	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> . . . . .	25b		No
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> . . . . .	26		No
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> . . . . .	27		No
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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
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> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
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> . . . . .	32		No
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> . . . . .	33		No
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> . . . . .	34	Yes	
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> . . . . .	35		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
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> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .	1a4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .	2a4		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .	4a		No
b	If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	6b		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	7h		No
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	8		No
9	<b>Sponsoring organizations maintaining donor advised funds.</b>			
a	Did the organization make any taxable distributions under section 4966? . . . . .	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	9b		No
10	<b>Section 501(c)(7) organizations.</b> Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	<b>Section 501(c)(12) organizations.</b> Enter			
a	Gross income from members or shareholders . . . . .	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	11b		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . .	1a	15	
b	Enter the number of voting members that are independent . . . . .	1b	15	
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? . . . . .	2		No
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? . . . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	5		No
6	Does the organization have members or stockholders? . . . . .	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body? . . . . .	8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . . . .	8b	Yes	
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 . . . . .	9		No

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? . . . . .	10a		No
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? . . . . .	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	12c	Yes	
13	Does the organization have a written whistleblower policy? . . . . .	13	Yes	
14	Does the organization have a written document retention and destruction policy? . . . . .	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official . . . . .	15a	Yes	
b	Other officers or key employees of the organization . . . . .	15b		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )			
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? . . . . .	16a		No
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? . . . . .	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶
18	Section 6104 requires an organization to make its Form 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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ WICHITA COMMUNITY FOUNDATION 301 N MAIN SUITE 100 WICHITA, KS 67202 (316) 264-4880

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization’s tax year Use Schedule J-2 if additional space is needed

- List all of the organization’s **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization’s **current** key employees See instructions for definition of "key employee "
- List the organization’s five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization’s **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization’s **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors , institutional trustees , officers , key employees , highest compensated employees , and former such persons

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Sharol Raspberry Board Chair	1 00	X						0	0	0
Sheryl Wohlford Vice Chair	1 00	X						0	0	0
Gayle Malone Secretary	1 00	X		X				0	0	0
Steve Houlik Treasurer	1 00	X		X				0	0	0
Phil Neff Immediate Past Chair	1 00	X						0	0	0
Gerald Aaron Board Member	1 00	X						0	0	0
Don Barry Board Member	1 00	X						0	0	0
Brian Black Board Member	1 00	X						0	0	0
W W Bill Hanna Board Member	1 00	X						0	0	0
Edward Healy Board Member	1 00	X						0	0	0
Al Higdon Board Member	1 00	X						0	0	0
Arneatha Martin Board Member	1 00	X						0	0	0
Ron Paulseen Board Member	1 00	X						0	0	0
Tony Madnral Board Member	1 00	X						0	0	0
Sam Solomon Board Member	1 00	X						0	0	0
Rob Allison President & CEO	40 00			X				119,610	0	0

1b	Total	119,610	0	0
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 1

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 0		

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	1a	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	2,337,933			
	g	Noncash contributions included in lines 1a-1f \$ 695,472					
	h	Total. Add lines 1a-1f . . . . .		2,337,933			
Program Service Revenue	2a		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) . . . . .		887,226		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties . . . . .					
6a		Gross Rents	(i) Real	(ii) Personal			
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss) . . . . .					
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b		Less cost or other basis and sales expenses					
c		Gain or (loss)					
d		Net gain or (loss) . . . . .			226,381		226,381
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .					
b		Less direct expenses . . . . .					
c		Net income or (loss) from fundraising events . .					
9a		Gross income from gaming activities See Part IV, line 19 . . . . .					
b		Less direct expenses . . . . .					
c		Net income or (loss) from gaming activities . .					
10a		Gross sales of inventory, less returns and allowances . . . . .					
b		Less cost of goods sold . . . . .					
c		Net income or (loss) from sales of inventory . .					
Miscellaneous Revenue		Business Code					
11a	CASH SURRENDER VALUE O	900,099	18,421				18,421
b	INVESTMENT INCOME - OT	900,099	-203,035				-203,035
c							
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .		-184,614				
12	Total revenue. See Instructions . . . . .		3,266,926	0	0		928,993

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	2,829,319	2,829,319		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	257,838	257,838		
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 . . . . .	106,000		79,500	26,500
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	148,453		123,402	25,051
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	16,210		16,210	
9	Other employee benefits . . . . .	720		720	
10	Payroll taxes . . . . .	18,194		14,250	3,944
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	29,643		24,643	5,000
c	Accounting . . . . .	18,042		18,042	
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .	60,421		60,421	
g	Other . . . . .	20,673		20,673	
12	Advertising and promotion . . . . .	10,294			10,294
13	Office expenses . . . . .	20,614		13,190	7,424
14	Information technology . . . . .	10,910		10,910	
15	Royalties . . . . .				
16	Occupancy . . . . .	34,425		34,425	
17	Travel . . . . .	1,106		1,106	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	1,474		1,474	
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	11,207		11,207	
23	Insurance . . . . .	23,740		15,002	8,738
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	TRAINING	3,918		3,918	
b	DUES AND SUBSCRIPTIONS	2,756		2,756	
c	MINERAL TAX EXPENSE	1,522		1,522	
d	OVERHEAD ALLOCATED TO F	0		-13,193	13,193
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,627,479	3,087,157	440,178	100,144
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)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			46,192	1	175,873
	2	Savings and temporary cash investments . . . . .			9,787,156	2	9,043,531
	3	Pledges and grants receivable, net . . . . .				3	24,000
	4	Accounts receivable, net . . . . .			100,000	4	
	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 . . . . .			581,919	7	
	8	Inventories for sale or use . . . . .				8	
	9	Prepaid expenses and deferred charges . . . . .			33,066	9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	149,368	16,450	10c	67,263
	b	Less accumulated depreciation . . . . .	10b	82,105			
	11	Investments—publicly traded securities . . . . .			3,121,943	11	3,689,532
	12	Investments—other securities See Part IV, line 11 . . . . .			28,482,354	12	31,351,152
	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) . . . . .			42,169,080	16	44,351,351
Liabilities	17	Accounts payable and accrued expenses . . . . .			18,370	17	3,864
	18	Grants payable . . . . .			375,000	18	250,000
	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 . . . . .				23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .				24	
	25	Other liabilities Complete Part X of Schedule D . . . . .			9,810,660	25	9,270,051
	26	Total liabilities. Add lines 17 through 25 . . . . .			10,204,030	26	9,523,915
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 . . . . .			30,865,050	27	33,827,436
	28	Temporarily restricted net assets . . . . .			100,000	28	0
	29	Permanently restricted net assets . . . . .			1,000,000	29	1,000,000
	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 . . . . .			31,965,050	33	34,827,436
	34	Total liabilities and net assets/fund balances . . . . .			42,169,080	34	44,351,351

**Part XI Financial Statements and Reporting**

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b> If "Yes," to 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 . . . .	Yes	
<b>d</b> 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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b> 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? . . . . .		No
<b>b</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 . . .		

SCHEDULE A  
(Form 990 or 990EZ)

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  
WICHITA COMMUNITY FOUNDATION

Employer identification number  
48-1022361

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 **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 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 IRC 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.")	6,278,278	11,424,177	9,565,207	3,260,856	2,337,933	32,866,451
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	6,278,278	11,424,177	9,565,207	3,260,856	2,337,933	32,866,451
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)						14,042,722
6 Public Support. Subtract line 5 from line 4						18,823,729

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	6,278,278	1,257,974	9,565,207	3,260,856	2,337,933	32,866,451
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,040,224	1,257,974	1,482,965	766,824	887,226	5,435,213
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						38,301,664

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 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	49 150 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	44 010 %

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

b

33 1/3% support test—2008. If the organization did not check the 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

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

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

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

Part IIISupport Schedule for Organizations Described in IRC 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
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts 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						
cAdd lines 7a and 7b						
8Public 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
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 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		
b33 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		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. 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**  
WICHITA COMMUNITY FOUNDATION

**Employer identification number**  
  
48-1022361

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	88	
2 Aggregate contributions to (during year)	1,720,376	
3 Aggregate grants from (during year)	1,710,834	
4 Aggregate value at end of year	12,098,135	
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 checked="" 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)  
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 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 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 the 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 . . . . .	1,000,000				
b Contributions . . . . .					
c Investment earnings or losses . . . . .					
d Grants or scholarships . . . . .					
e Other expenditures for facilities and programs . . . . .					
f Administrative expenses . . . . .					
g End of year balance . . . . .	1,000,000				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ 100 000 % %

c

Term endowment ▶ %

3a

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

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

b

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

	Yes	No
3a(i)		No
3a(ii)		No
3b		

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 . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		24,851	2,071	22,780
d Equipment . . . . .		94,505	75,399	19,106
e Other . . . . .		30,012	4,635	25,377
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				67,263



Part XI

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,266,926
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,627,479
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-360,553
4	Net unrealized gains (losses) on investments	4	1,902,723
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	1,320,216
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	3,222,939
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,862,386

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	4,599,449
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	1,902,723
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	-570,200
e	Add lines 2a through 2d . . . . .	2e	1,332,523
3	Subtract line 2e from line 1 . . . . .	3	3,266,926
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	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	3,266,926

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	3,622,076
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	-5,403
e	Add lines 2a through 2d . . . . .	2e	-5,403
3	Subtract line 2e from line 1 . . . . .	3	3,627,479
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	
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	3,627,479

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, 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.

Identifier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		ACTIVITY OF WCF SUPPORT FOUNDATION (FILES OWN RETURN) -509779 BANK FEES NETTED TO INVESTMENT REVENUES -60421
Part XIII, Line 2d - Other Adjustments		EXPENSES OF WCF SUPPORT FOUNDATION (FILES OWN RETURN) 55018 BANK FEES NETTED TO INVESTMENT REVENUES -60421

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," to 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  
WICHITA COMMUNITY FOUNDATION

Employer identification number  
48-1022361

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

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

**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 Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Arts/Culture	2	89,340			
Civic programs	1	176			
Higher Education	1	342			
Human Social Services	2	167,980			

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

[illegible]

**Software ID:**  
**Software Version:**  
**EIN:** 48-1022361  
**Name:** WICHITA COMMUNITY FOUNDATION

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
American Heart Association 8630 E 32nd Court North WICHITA, KS 672264007	13-5613797	501(c)(3)	5,600				General Purposes, Go Red for Women
Beran Concrete 8401 E Oak Knoll Wichita, KS 67207	48-1108753		52,650				For concrete work for memorial
Bishop Carroll Catholic High School 8101 W Central Ave WICHITA, KS 672123699	48-0543780	501(c)(3)	15,000				Stadium Turf Project
Butler Foundation (Community College) 901 S Haverhill Rd EL DORADO, KS 67042	48-6123855	501(c)(3)	10,000				Diversity Leadership Training
Catholic Diocese of Wichita 424 N Broadway WICHITA, KS 67202	48-0543780	501(c)(3)	26,000				TOGETHERvision
Central Plains Regional Health Care Fdn 1102 S Hillside WICHITA, KS 67211	48-1200868	501(c)(3)	8,000				To pay for consultants' time preparing and facilitating for the Strategic Plan by an anonymous donor
Cerebral Palsy Research Foundation of KS 5111 E 21st Street N WICHITA, KS 672080217	23-7314938	501(c)(3)	5,200				General Purposes
Chamber Music at the Barn 4041 N Maize Rd Suite 240 MAIZE, KS 67101	48-1193360	501(c)(3)	8,000				General Purposes
Christ The King Church 4411 W Maple WICHITA, KS 67209	48-0577641	501(c)(3)	20,500				Donations, classroom shelves
DeBoer Family Foundation 8621 E 21 St N Suite 250 WICHITA, KS 67206	48-0988194	501(c)(3)	5,000				For World Vision in Burma

**Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Envision610 N Main 4th Floor WICHITA,KS 67203	48-0543705	501(c)(3)	5,000				2010 Children's Initiative
Friends of the Wichita Library Inc223 S Main WICHITA,KS 67202	48-6129915	501(c)(3)	6,072				Yearly Distribution
Greater Wichita Economic Development Coalition350 W Douglas WICHITA,KS 67202	20-0461110	501(c)(3)	10,000				Forward Wichita Program
Holy Cross Lutheran Church600 N Greenwich WICHITA,KS 67206	48-0634291	501(c)(3)	10,000				Music Program
Kansas Humane Society of Wichita Kansas3313 N Hillside WICHITA,KS 67219	48-0554339	501(c)(3)	13,311				General Purposes, Guardian Circle, Annual Leadership Campaign
Kansas State University FoundationP O Box 47128 WICHITA,KS 672017128	48-0667209	501(c)(3)	14,750				School of Business, Coen Family Civil Engineering Scholarship, College of Education, College of Engineering
Killian Electrical Services Inc4121 W Walker WICHITA,KS 67209	48-1208750		51,363				General Purposes
Mental Health Assoc of South Central KS555 N Woodlawn Suite 3105 WICHITA,KS 67208	48-0990763	501(c)(3)	6,685				Annual Distribution
Mid-Kansas Jewish Federation400 N Woodlawn Suite 8 WICHITA,KS 67208	48-6119344	501(c)(3)	88,000				General Purposes, from Jill & Tom Docking
Music Theatre of Wichita Inc225 W Douglas Suite 202 WICHITA,KS 67202	48-0785658	501(c)(3)	14,250				General Purposes, "That's Entertainment" fundraising project, Celebration Project

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Newman University3100 McCormick Ave WICHITA,KS 672132097	48-0556716	501(c)(3)	35,349				General Purposes, Summer Science Camp, Scholarships
Pittsburg State University 1701 S Broadway Room 112 Horace Mann PITSBURG,KS 66762	48-6104332	501(c)(3)	10,000				Automotive technology paint booth
Rainbow Marble & Granite Inc 702 N Hydraulic WICHITA,KS 67214	74-2818898		10,412				Final payment for bench for memorial
St George Orthodox Christian Cathedral7515 E 13th St WICHITA,KS 672061223	48-0792210	501(c)(3)	100,000				Endowment for Iconograph
St James Episcopal Church 3750 E Douglas WICHITA,KS 67208	48-0556717	501(c)(3)	19,400				General Purposes, Episcopal Social Services, After School Program, Old English Tea, NTO Offerings
St Michael Orthodox Church 1109 N Bedford Circle WICHITA,KS 67206	20-2372935	501(c)(3)	5,000				General Purposes
St Thomas Aquinas Catholic Church1321 Stratford Lane WICHITA,KS 67206	48-0650425	501(c)(3)	20,000				Stewardship, General Purposes
Stone Masons Inc6609 N Woodlawn KECHI,KS 670679000	48-0788243		107,460				Labor, material & equipment for laying masonry at the Law Enforcement Memorial
Stonescapes LLC230 S Laura Suite 106 WICHITA,KS 67211	20-1334091		24,417				For paving bricks and felt for the memorial, Deposit on granite product & shop drawings
The Independent School 8301 E Douglas WICHITA,KS 67207	48-0914282	501(c)(3)	12,000				Giving for Excellence, TIS Community Campaign, Tuition

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 Central MissouriWard Edwards 1100 - Scholarships WARRENSBURG,MO 64093	43-1181566	501(c)(3)	6,000				Tuition
USD 259 Wichita Public Schools201 N Water Rm 430 WICHITA,KS 672023720	48-6000351	501(c)(3)	92,972				General Purposes, Mini-grants, Disbursement, Healthy Cooking Show
Wesley Medical Center550 N Hillside WICHITA,KS 67214	62-1762545	501(c)(3)	13,003				Scholarship Reimbursements
Wichita Area Technical College Foundation4004 N Webb Rd Suite 100 WICHITA,KS 67226	13-4360469	501(c)(3)	250,000				General Purposes
Wichita Art Museum Inc1400 W Museum Blvd WICHITA,KS 67203	48-1157680	501(c)(3)	63,842				General Purposes, Reimbursement of Library acquisitions, Norman Rockwell Museum expenses, Murdock Society, Reimbursements for Howard Wooden Lectures at the Museum
Wichita Children's Home810 N Holyoke WICHITA,KS 67208	48-0547706	501(c)(3)	20,657				General Purposes, Yearly Distribution, Final Distribution, in memory of George Fahnestock, Kids Club appeal
Wichita Grand O pera Inc225 W Douglas WICHITA,KS 67202	48-1239185	501(c)(3)	8,000				General Purposes
Wichita State University Foundation1845 Fairmount WICHITA,KS 672600002	48-6121167	501(c)(3)	190,157				General Purposes, President's Discretionary Fund, Donald D Sbarra Scholarship Fund, Scholarships, NAC unrestricted gifts, Gordon Parks Lecture Series
Wichita State University- Office of Financial Operations 1845 Fairmount Street Box 38 WICHITA,KS 672600038	48-6029925	501(c)(3)	16,244				Tuition and fees
Wichita Symphony Society 225 W Douglas Suite 207 WICHITA,KS 67202	48-0671518	501(c)(3)	33,082				General Purposes, Program Support, Special Performance Underwriting

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Workforce Alliance of South Central Kansas150 N Main Ste 200 WICHITA, KS 67202	48-1246563	501(c)(3)	7,500				Summer Science Camp
YMCA - Community Development402 N Market WICHITA, KS 67202	48-0554440	501(c)(3)	27,372				Invoices, National Bike Month city-wide
Andover Advantage Foundation1432 N Andover Road Andover, KS 67002	43-1767238	501(c)(3)	5,000				General Purposes
Arts Partners201 N Water Suite 300 wICHITA, KS 67202	48-1197171	501(c)(3)	15,500				General Purposes
Berean Academy201 S Elbing Rd Elbing, KS 67041	48-0597101	501(c)(3)	5,500				Scholarships
Blessed Sacrament Church 124 N Roosevelt Wichita, KS 67208	48-0543780	501(c)(3)	15,000				General Purposes
Bombardier Aerospace Employees ClubOne Learjet Way Bldg 5 Dock 1 Wichita, KS 67209	48-6121732	501(c)(3)	14,756				Soaring to New Heights Running and Walking Club
Botanica The Wichita Gardens701 N Amidon Wichita, KS 672033199	48-1007736	501(c)(3)	30,500				General Purposes, Gallery in the Gardens Project
Boys & Girls Club of South Central Kansas2400 N Opportunity Dr Wichita, KS 672195529	48-1071303	501(c)(3)	6,100				General Purposes, in memory of George Fahnestock
Breakthrough ClubPO Box 47563 Wichita, KS 672017563	48-1124286	501(c)(3)	40,444				General Purposes, in memory of George Fahnestock, funds match

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Butler Community College 1810 N Andover Road Andover, KS 67002	48-0690383	501(c)(3)	8,623				Tuition, fees & books
CEDBR1845 Fairmount St 229 Devlin Hall Wichita, KS 672600121	48-6029925	501(c)(3)	5,000				Economic Outlook Conference
Central Plains Area Agency on Aging 2622 W Central Suite 500 Wichita, KS 67203	48-6000798	501(c)(3)	6,439				Walking Porgrams for Older Adults
Christ Community Evangelical Free Church 14200 Kenneth Road Leawood, KS 662244521	48-1058571	501(c)(3)	15,000				General Purposes
Communities In Schools of Wichita Sedgwick County 412 S Main Suite 212 Wichita, KS 67202	48-1093130	501(c)(3)	6,665				General Purposes, Technology upgrades
Fairmount United Church of Christ 1650 N Fairmount Wichita, KS 67208	48-0638260	501(c)(3)	15,715				Healthy Wichita- National Night Out grant award, Underwrite the expansion of existing program
FHS Society Inc 64 Grove Street BBR1 R353 Watertown, MA 02472	52-1762747	501(c)(3)	25,000				General Purposes
Friends University 2100 W University St Wichita, KS 67213	48-0547702	501(c)(3)	10,163				Scholarships
FUNDamental Learning Center Inc 917 S Glendale Wichita, KS 67218	31-1693508	501(c)(3)	31,124				General Purposes, to purchase the Where's Elmo teaching tool, intensive literacy training program w/USD259
Grinnell College 1103 Park Street Grinnell, IA 501121690	42-0680387	501(c)(3)	6,200				Tuition, fees & books

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Guadalupe Health Foundation 940 S St Francis Wichita,KS 67211	20-1344137	501(c)(3)	9,207				Betterment of organization in the area of greatest need, General Purposes
Hillside Christian Church 8330 E Douglas Wichita,KS 672062345	48-0576035	501(c)(3)	14,000				2010 Budget
Inter-Faith Ministries Wichita Inc 829 N Market Wichita,KS 672143519	48-0559085	501(c)(3)	22,426				General Purposes, Equipment, Repairs
Kansas Big Brothers Big Sisters 310 E Second St N Wichita,KS 67202	23-7056717	501(c)(3)	6,000				General Purposes, Executive Search fund
Kansas Elks Training Center for the Handicapped 1006 E Waterman Wichita,KS 67211	48-0683499	501(c)(3)	6,620				Nutrition Enhancement program
Kansas Foodbank Warehouse-Wichita 1919 E Douglas Wichita,KS 67211	48-0959213	501(c)(3)	30,800				General Purposes, Food 4 kids program, Research with KU School of Medicine, After School Program, summer food program, Cessna Golf Fundraiser
Kansas University Endowment Association 1010 N Kansas Wichita,KS 672143199	48-0547734	501(c)(3)	20,000				Scholorships
Kapaun-Mt Carmel High School 8506 E Central Wichita,KS 672069926	48-0778772	501(c)(3)	12,500				General Purposes, building fund
Kidzcope 9415 E Harry Suite 501 Wichita,KS 67207	48-1220062	501(c)(3)	7,153				General Purposes, technology equipment
Leadership Wichita Fund 350 W Douglas Wichita,KS 67202	74-2832913	501(c)(3)	9,014				Yearly Distribution

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Operation Holiday Inter-Faith Ministries829 N Market St Wichita, KS 672143519	48-0559085	501(c)(3)	6,900				General Purposes
Orpheum Performing Arts Centre Ltd200 N Broadway Suite 102 Wichita, KS 67202	48-0978508	501(c)(3)	8,105				General Purposes, hydraulic lift
Planned Parenthood Federation of America434 W 33rd St 12 New York, NY 100012601	13-1644147	501(c)(3)	10,000				General Purposes
Planned Parenthood of Kansas & Mid-Missouri4401 W 109th St Suite 200 Overland Park, KS 662119705	44-0565390	501(c)(3)	10,200				General Purposes
Prophecy CountdownPO Box 1844 Mount Dora, FL 32756	59-2489075	501(c)(3)	45,000				General purposes
Real Men Real Heroes2755 E 19th St North Wichita, KS 67214	26-4623977	501(c)(3)	10,000				Exand the Teen Heroes project
Remington USD 206200 E Ellis St Potwin, KS 67123	48-0690034	501(c)(3)	7,000				General Purposes
Salvation Army350 N Market Wichita, KS 67202	44-0545998	501(c)(3)	15,786				General Purposes, Boothe Children Family Service Center, Help feed the hungry
Salvation Army in El Dorado 141 N Gordy El Dorado, KS 67042	44-0545998	501(c)(3)	7,000				Medical Services Employees of Butler County
Sedgwick County Zoological Foundation Inc5555 Zoo Boulevard Wichita, KS 672123699	48-6120530	501(c)(3)	5,000				General Purposes, Winter Fund Appeal

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
Servant Christian Community Foundation706 N Lindenwood Drive Olathe, KS 66062	43-1890105	501(c)(3)	63,540				General Purposes
Steps To Life IncPO Box 782828 Wichita, KS 67278	48-1059059	501(c)(3)	45,000				General purposes
The Jane Goodall Institute 4245 N Fairfax Dr Ste 600 Arlington, VA 22203	94-2474731	501(c)(3)	10,000				General Purposes
The Lord's Diner520 N Broadway Wichita, KS 672143504	48-0543780	501(c)(3)	17,250				General Purposes, In memory of Rudolph Moeder, in memory of George Fahnestock
The Urban AlternativePO Box 4000 Dallas, TX 752080560	75-1835253	501(c)(3)	35,000				General Purposes
Union Rescue Mission Inc 2800 N Hillside St Wichita, KS 67219	48-0625837	501(c)(3)	31,081				General Purposes, Betterment of organization in the area of greatest need, ice cube machine, software tracking and registration system
United Way of the Plains Inc 245 N Water Wichita, KS 672029651	48-0547688	501(c)(3)	62,814				General Purposes, laid-off workers' center
University Congregational Church9209 E 29th Street N Wichita, KS 672262139	48-0954936	501(c)(3)	41,971				General Purposes, Music
University of Missouri at KC 5100 Rockhill Road AC 112 Kansas City, MO 641102499	43-6003859	501(c)(3)	6,146				Tuition and fees
Wichita Area Technical College301 S Grove Wichita, KS 672112099	20-1027060	501(c)(3)	13,440				Adult Literacy-Healthy Food, Healthy Families program, Tuition, Fees & Books

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Wichita Assn for the Motion Picture Arts5330 Crestview Wichita, KS 67208	86-1056098	501(c)(3)	5,000				Tallgrass Film Festival
Wichita Dream Center Inc2000 S Hillside Wichita, KS 67211	20-4580536	501(c)(3)	12,000				Underwrite food distribution
Wichita Habitat for Humanity Inc420 E English Ste B Wichita, KS 672010114	58-1735540	501(c)(3)	11,000				General Purposes, Women Build Day, Connie Gamm Memorial
Wichita Public Library Foundation Inc223 S Main Wichita, KS 672023715	48-1042418	501(c)(3)	25,750				from Brian & Emily Docking, purchase an Eco Master CD/DVD refinisher and 700 Beginning to Read books for Westlink Library
Wichita State University - College of Fine Arts1845 Fairmount Wichita, KS 672600151	48-6029925	501(c)(3)	7,500				Music Associates of WSU, Scholarships
Wichita Women's Initiative Network510 East Third Street Wichita, KS 67202	48-1189632	501(c)(3)	8,000				Underwrite professional fees associated with merger with Goodwill Industries
William Jewell College Office of Institutional Advancement500 College Hill Box 1032 Liberty, MO 64048	44-0545914	501(c)(3)	25,000				Scholarship
WSU - College of Engineering1845 N Fairmount Wichita, KS 672600044	48-6029925	501(c)(3)	15,000				for summer camps for girls & minorities to learn about science, technology, engineering and math
WSU-Office of Research & AdministrationPO Box 7 Wichita, KS 672600007	48-6029925	501(c)(3)	25,000				Compassion Kansas Match
YMCA Foundation of Wichita3330 N Woodlawn Wichita, KS 67220	48-0554440	501(c)(3)	5,814				General Purposes, Yearly Distribution, To benefit the youth

SCHEDULE M  
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.

Name of the organization  
WICHITA COMMUNITY FOUNDATION

Employer identification number  
48-1022361

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	12	695,472	MARKET PRICES
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ► ( )				
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .

32a

Yes

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
Third Party Use	Part I, Line 32b	ORGANIZATION USES BROKERAGES TO SELL NON-CASH CONTRIBUTIONS

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

WICHITA COMMUNITY FOUNDATION

Employer identification number

48-1022361

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		A copy of the tax return is provided to all Board Members prior to Finance/Audit Committee review meeting Any questions by Board Members are referred to the Chairman of the Finance/Audit Committee for discussion at the review meeting The Finance/Audit Committee then meets, along with the external auditors and certain foundation staff, to review the tax return After review , discussion, and resolution of outstanding questions, the Finance/Audit Committee approves the tax return
Form 990, Part VI, Section B, line 12c		ALL POTENTIAL OR ACTUAL CONFLICTS MUST BE DISCLOSED AND MEMBER MUST ABSTAIN FROM ALL DECISIONS REGARDING ENTITY CONFLICTS ARE MONITORED ANNUALLY BY THE BOARD OF DIRECTORS AND REPORTING COMMITTEES AND RECORDED IN MINUTES
Form 990, Part VI, Section B, line 15a		COMPENSATION OF PRESIDENT & CEO IS REVIEWED BY THE BOARD OF DIRECTORS AND COMPARED TO NATIONAL AVERAGE
Form 990, Part VI, Section C, line 19		UPON REQUEST
		PROCESS HAS NOT CHANGED FROM PRIOR YEAR

## Related Organizations and Unrelated Partnerships

OMB No 1545-0047

# 2009

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

**Name of the organization**  
WICHITA COMMUNITY FOUNDATION

Employer identification number

48-1022361

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a)  
Name, address, and EIN of disregarded entity

(b)  
Primary activity

(c)  
Legal domicile (state  
or foreign country)

(d)  
Total income

(e)  
End-of-year assets

(f)  
Direct controlling  
entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)  
Name, address, and EIN of related organization

**(b)**  
Primary activity

(c)  
Legal domicile (state  
or foreign country)

(d)  
Exempt Code section

(e)  
Public charity status  
(if section 501(c)(3))

(f)  
Direct controlling  
entity

WCF SUPPORT FOUNDATION

301 N MAIN SUITE 100

WICHITA, KS 67202  
20-0666242

RECEIVE/ACCEPT PROPERTY  
SUPPORTING PROGRAMS OF  
WICHITA COMMUNITY  
FOUNDATION

KS

501(C)(3)

WICHITA COMMUNITY  
TYPE I FOUNDATION

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
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Part V

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

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

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 (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)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

Yes

No

No

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	(b) Transaction type(a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2009

**Part VI**   **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No