

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052 2010

epartment of the Treasury	Treated as a Private Foundation
itemal Revenue Service	Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Fo	r ca	ılendar year 2010, o	r tax year beg	inning				, 2010	, and end	ding			,	20
G	Che	eck all that apply	Initial retu	rn		Initial ref	turn (of a former p	ublic cha	arity		F	ınal return	
			Amended	return		Ad	ddres	ss change		l	Name change			
Na	me (of foundation									A Employer ide	ntificatio	on number	
-	_					EVIDI	CION 1	ATTACHED						
		REYNOLDS FO					PION	NI IAURDU	-				14359	
Nui	mbe	er and street (or P O box	c number if mail is n	ot delivere	ed to street a	address)			Room/s	uite	B Telephone nun	iber (see j	page 10 of the ii	nstructions)
Þ	0	BOX 219139									1,	0161	753-70	000
		town, state, and ZIP co	vde	_			_		l		C If exemption ap			
٥.,	, 0.	town, state, and 211 co	ac .								pending, check	here .		
KA	NS	AS CITY, MO 6	4121-9139								D 1. Foreign orga 2. Foreign orga			
		eck type of organizati		on 501	(c)(3) exe	emot priv	ate f	oundation			85% test, ch	ck here a	nd attach	
	_	Section 4947(a)(1) non			. —			vate founda	tion		computation			
$\overline{1}$		market value of all a				ethod			rual		E If private found under section 5			
		ear (from Part II, col			ther (spe									
	-		8,189.				e on	cash basis)			F If the foundation under section 5			. 1 1
Pa	art	Analysis of Reven	ue and Expens	ses (The	(a) B	evenue and	.			Γ			d) Disburse	
		total of amounts in co may not necessarily e				enses per	'	(b) Net inve		'	(c) Adjusted net income		for charita	
		column (a) (see page	11 of the instruc	tions))		books '		_					purpose cash basis)	
	1	Contributions, gifts, grants, e	tc , received (attach sc	hedule) .			0,	· ·	100			-		
	2	. Vi if the fo	undation is not req	uired to	, "-" ; " 1;			, , , , ,	-					A -
	3	Interest on savings and to				2,6			2,619.	L		I	ATCH-1	
-	4	Dividends and interes	t from securities			823,2	37	82	3,237.			I	ATCH 2	
	5 a	Gross rents											•	-
	b	Net rental income or (loss	s)			-				<u> </u>	·			
	6 a	Net gain or (loss) from sa				25,2	18,		<u>· </u>	Ĺ			-	,
Kevenue	В	Gross sales price for all assets on line 6a	2,967	,205.	ļ 					<u> </u>				
é	7	Capital gain net incom	ne (from Part IV,	line 2) .		<u> </u>		2	5,218.	<u> </u>				
	8	Net short-term capital	•		<u> </u>				-	ļ				
- 1	9 n =	Income modifications Gross sales less returns		• • • •			- 2	·		<u> </u>	<u> </u>			
l'		and allowances · · · ·			e in the second		-	<u> </u>			<u> </u>			
		Less Cost of goods sold				<u> </u>		7, 1 2, 1		ļ -	· · · · · · · · · · · · · · · · · · ·	- -		
		Gross profit or (loss) (· · · · · · · ·	├		- '		- 1
- 1	1 2	Other income (attach Total, Add lines 1 thro			<u> </u>	851,0	74	85	1,074.				, , - , - '	· · · · · · · · · · · · · · · · · · ·
_						001/0			1,014.	1	<u></u> .	+-	·	,
1.	4	Compensation of officers Other employee salari							_			_		<u> </u>
2 1	5	Pension plans, employ					1			 		+-		
۔ ا		Legal fees (attach sch				·			·· ··			_		
욹		Accounting fees (attach								-			 	 .
ē		Other professional fee		le).										
§ 1	7		SCIACI											
5 1	8	Taxes (attach schedule) (s	see page 14 of the ins	tyclions) *		20,0	00						·- ·	
Ē 1	9	Depreciation (attach	schedule) and de	pletion.										
5 2	0	Occupancy		SE.										
2	1	Travel conferences, a	ind meetings	- I										
2	2	Printing and publication	ons	لــــ										
<u>"</u> 2	3	Other expenses (attac				1,9	77.	····	1,977.					
2	4	Total operating and a	administrative ex	penses.		0.5								
5		Add lines 13 through				21,9			1,977.			\perp		
	5	Contributions, gifts, gi	rants paid	• • • • •		770,0			1 000	<u> </u>				70,000
		Total expenses and disburse		4 and 25		791,9			1,977.	1			77	70,000
2	7	Subtract line 26 from				F0 0			_				-	
		Excess of revenue over expe			\	59,0		0.4	9,097.	, .		_ _		
		Net investment incom			جَّے 'جَّے ' دَعُ * اُنْ اِنْ اِنْ اِنْ اِنْ اِنْ اِنْ اِنْ اِ		_5,4 -	84	J, UJ1.					<u>. </u>
	C	Adjusted net income	ur negative, entel	·-U-)			٠ ۽ ا	- r - r - r -		ı		ŀ		

Part II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year		
	- Dalanco Oncess	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bear	ing	84,392.	59,701.	59,701.		
2.		cash investments	52,241.	836,037.	836,037.		
3	Accounts receivable ▶		-				
	Less: allowance for dou	btful accounts ▶					
4					- , - , -		
	Less: allowance for dou	btful accounts ▶			•		
5							
6		officers, directors, trustees, and other					
		ach schedule) (see page 15 of the instructions)					
7		receivable (attach schedule)		<u>-</u> -			
		btful accounts ▶			•		
₀₀ 8		se					
Assets 10 a	Prenaid evnenses and d	eferred charges					
881103		e government obligations (attach schedule) **	2,293,525.	1,233,384.	1,282,080		
-		e stock (attach schedule)			1,202,000		
		bonds (attach schedule) ATCH 6	12,867,491.	13,227,625.	13,700,371		
11	Investments - land, building	s	12/00//151				
-	and equipment basis Less accumulated deprecia	ation	` '	` <i>3</i> '			
1	(attach schedule)						
12	Investments - mortgage	loans					
13 14	Land, buildings, and	ach schedule)) -				
	equipment basis Less accumulated deprecia	ation L		·			
	(attach schedule)						
15)	 -				
16		completed by all filers - see the	15 207 640	15 256 747	15 070 100		
 		age 1, item l)	15,297,649.	15,356,747.	15,878,189		
17		occrued expenses					
18					1 . *		
Liabilities 02 12 12							
<u>≅</u> 20		ors, trustees, and other disqualified persons			7, 277		
.팀 21		ites payable (attach schedule)					
22	Other liabilities (describe	• -)		_, ,			
1							
23		es 17 through 22)		0.			
		low SFAS 117, check here ▶					
	•	24 through 26 and lines 30 and 31.			- x		
8 24	Unrestricted						
<u>통</u> 25	Temporarily restricted .						
<u>කී</u> 26	Permanently restricted .						
Net Assets or Fund Balances 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		not follow SFAS 117,	ļ				
뢰	check here and com	plete lines 27 through 31. ▶ X			-		
ර් 27	Capital stock, trust principal	cipal, or current funds	5,943,911.	5,943,911.			
\$ 28	Paid-in or capital surplus, or	r land, bldg , and equipment fund					
29	Retained earnings, accumi	ulated income, endowment, or other funds	9,353,738.	9,412,836.			
₹ 30	Total net assets or i	fund balances (see page 17 of the					
ž	instructions)	<i>.</i>	15,297,649.	15,356,747.			
31	Total liabilities and ne	t assets/fund balances (see page 17					
	of the instructions)		15,297,649.	15,356,747.			
Part II		anges in Net Assets or Fund E	Balances				
1 Total	net assets or fund b	alances at beginning of year - Part I	I, column (a), line 30 (must agree with			
end-	of-year figure reported	d on prior year's return)		1	15,297,649		
2 Ente	r amount from Part I,	line 27a		2	59,097		
3 Othe	r increases not includ	line 27a ed in line 2 (itemize) ▶ATTACHI	MENT 7	3	1		
4 Add		· · · · · · · · · · · · · · · · · · ·		1 4 1	15,356,747		
	eases not included in			5			
		lances at end of year (line 4 minus li	ne 5) - Part II, column (b		15,356,747		

Form 990-PF (2010)		44-60143	59		Page 3
Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
(a) List an	d describe the kind(s) of property sold (e	e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	rick warehouse, or common stock, 200 s	shs MLC Co)	P-Purchase D-Donation	(mo , day, yr)	(mo , day, yr)
1a SEE PART IV SCHE	EDULE				
<u>b</u>					
С					
d					<u> </u>
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a					
b			ļ		
<u>C</u>					
d					· · · · · · · · · · · · · · · · · · ·
<u>e</u>			ļ		
Complete only for assets	showing gain in column (h) and owned			Gains (Col (h) g	
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col	(k), but not less t Losses (from co	
a			<u> </u>		
b					
С					
d			L		
<u>e</u>		<u> </u>	ļ		
2 Capital gain net income or	(net capital loss)	gain, also enter in Part I, line 7			05 010
· -	, l	(loss), enter -0- in Part I, line 7	2		25,218.
	or (loss) as defined in sections 12				
	line 8, column (c) (see pages 13 a				
	line 8		3		
	Jnder Section 4940(e) for Rec				
(For optional use by domestic	private foundations subject to the	e section 4940(a) tax on net investi	ment inco	me)	
M (2.12(D/2)					
If section 4940(d)(2) applies,	leave this part blank				
Was the foundation liable for	the section 4942 tax on the distrib	utable amount of any year in the h	000 0050	₄₃	Yes X No
	not qualify under section 4940(e)		ase peno		_ res [No
	ount in each column for each year,		ofore mak	ing any entros	
(a)			lore mak	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra	
2009	750,000.	15,836,488.		(col (b) divided by	0.047359
2009	745,000.	15,360,272.			0.048502
2007	742,808.	15,159,814.			0.048998
2006	768,931.	15,142,176.			0.050781
2005	776,499.	15,550,832.			0.049933
	, 133.	10,000,002.	 		
2 Total of line 1, column (d)			2		0.245573
	for the 5-year base period - divide	the total on line 2 by 5 or by the			0.2400.0
	dation has been in existence if less		3		0.049115
number of years the lound	dation has been in existence in less	tilaii 5 years			0.043113
4 Enter the net value of non	charitable-use assets for 2010 from	m Part Y June 5	4	16	100,474.
4 Litter the net value of nor	ichantable-use assets for 2010 for	m Part X, line 5	-	10,	100,474.
5 Multiply line 4 by line 3			5		790,775.
womply line 4 by line 5			-	· · · · · · · · · · · · · · · · · ·	130,113.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		8,491.
Line: 170 of het myestille	in moonie (176 or rait i, illie 279).	• • • • • • • • • • • • • • • • • • • •	 		-,
7 Add lines 5 and 6			7		799,266.
. Add lines 5 and 0	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	 		
8 Enter qualifying distribution	ins from Part XII line 4		8		770,000.
If line 8 is equal to or gre	eater than line 7, check the box in	n Part VI, line 1b, and complete t	hat part	using a 1% tax	x rate See the
Part VI instructions on pag	e 18				

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)		16,9			
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check					
	here and enter 1% of Part I, line 27b		,			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2					
3	Add lines 1 and 2 3		16,9			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		16,9	82.		
6	Credits/Payments 10 707					
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 19,787.					
	Exempt foreign organizations-tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c 0.	-	-			
d	Backup withholding erroneously withheld		10 7	07		
7	Total credits and payments Add lines 6a through 6d		19,7	67.		
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2,8	0.5		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		2,0	05.		
11 Ros	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 2,805. Refunded ▶ 11 t VII-A Statements Regarding Activities			—		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	÷, -,	Yes	No.		
та		1a	res	No X		
	participate or intervene in any political campaign?	14				
U	of the instructions for definition)?	16	į	х		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	-10	1			
	published or distributed by the foundation in connection with the activities	,				
c	Did the foundation file Form 1120-POL for this year?	1c		Х		
d						
-	(1) On the foundation \blacktriangleright \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	٠,٠				
	on foundation managers > \$			ı		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities.			3 ·		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			, , (_10 (1-3		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
	If "Yes," attach the statement required by General Instruction T		-			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or	٠				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_		;		
	conflict with the state law remain in the governing instrument?	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х			
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	:	-			
	instructions) MO					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		· ·	•		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			v		
	27)? If "Yes," complete Part XIV	9		Х		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х		
	names and addresses	10		^		

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any, time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
	Website address N/A			
14	The books are in care of R. PHILIP BIXBY Telephone no 816-753	3-70	00	
	Located at 3520 BROADWAY KANSAS CITY, MO			
15	The books are in care of ▶ R. PHILIP BIXBY Located at ▶3520 BROADWAY KANSAS CITY, MO Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			TT
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter	100	<u> </u>	1
	the name of the foreign country			- ^
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	: -	Yes	No
1 a	During the year did the foundation (either directly)		. ,	= .
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	-,	٠,	*- 1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			- 1
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			i
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?] ``	, *
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1	-	
	the benefit or use of a disqualified person)?		1.	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1.5	14. 5 E-4. 5
	foundation agreed to make a grant to or to employ the official for a period after	-	.92	- ^
	termination of government service, if terminating within 90 days)	:		. ¥
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			,
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	16		
	Organizations relying on a current notice regarding disaster assistance check here	-		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2010?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	,		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	l. `:		
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and	-	. -	- T
	6e, Part XIII) for tax year(s) beginning before 2010? Yes X No	· -		
	If "Yes," list the years ▶			107
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	۱,۰	1 5	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- i	. `	\$ \$\frac{4}{7}_{-} =
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	, -	'	-
	>] . ,	- ´
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	, , , ,		
	at any time during the year?	-	<i>i.</i> - " ,	
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or	Ϊ.		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	١٠,	-	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		[
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		_	
	foundation had excess business holdings in 2010.)	3 b	<u> </u>	ļ
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4 b		X

	990-PF (2010)		44-601			Page 6		
Pai	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)				
5 a	During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election	nce legislation (section		Yes X N	o -	-		
	directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other			Yes X No	·			
	(4) Provide a grant to an organization other than a charasection 509(a)(1), (2), or (3), or section 4940(d)(2)? (table, etc., organizatio	on described in			-		
	(5) Provide for any purpose other than religious, chantal purposes, or for the prevention of cruelty to children o	ole, scientific, literary,	or educational					
ь	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in							
-	Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? 5 b							
	Organizations relying on a current notice regarding disast		· · ·	. —				
С	If the answer is "Yes" to question 5a(4), does the foundabecause it maintained expenditure responsibility for the gr	ition claim exemption	from the tax		,			
	If "Yes," attach the statement required by Regulations sect							
6 a	Did the foundation, during the year, receive any funds, don a personal benefit contract?	lirectly or indirectly, to		Yes X N				
b	Did the foundation, during the year, pay premiums, direct				6ь	X		
	If "Yes" to 6b. file Form 8870	•	,		• • •			
7 a	At any time during the tax year, was the foundation a par	rty to a prohibited tax	shelter transaction?	Yes X N	0	-		
	If "Yes," did the foundation receive any proceeds or have							
	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,			
=	and Contractors List all officers, directors, trustees, foundation m	anagers and their	componentian lead	nage 22 of the instr	uctions)			
<u> </u>		(b) Title, and average	(c) Compensation	(d) Contributions to		se account,		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation		owances		
ĀT	TACHMENT 8		-0-	-0-		0-		
						<u></u>		
								
	Compensation of five highest-paid employees (ot If none, enter "NONE."	ner than those inc	luded on line 1 - se	e page 23 of the ins	tructions).			
	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens	se account, owances		
	NONE							
Tota	I number of other employees paid over \$50,000 .	<u> </u>	<u> </u>		<u></u>)	<u> </u>		

Form 990-PF (2010)

Part VIII Information and Contrac	About Officers, Directors, Trustees, Foundation Ma stors (continued)	nagers, Highly Paid Employ	rees,
	ependent contractors for professional services (see pag		ne, enter "NONE."
	nd address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A			
Total number of others rece	eiving over \$50,000 for professional services		NONE
Part IX-A Summary	of Direct Charitable Activities		
	t direct charitable activities during the tax year. Include relevant statistical ines served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
1 N/A			
2			
3			
<u> </u>			
4			
Part IX-B Summary	of Program-Related Investments (see page 24 of the	instructions)	
	m-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 N/A			
_			
2			
		·	
All other program-related investr	nents See page 24 of the instructions		
3 N/A	-		
T-4-L Add lines 4 Absorb			

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	i i	
а	Average monthly fair market value of securities	1a	15,282,761.
b	Average of monthly cash balances	1b	1,062,898.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	16,345,659.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Cubinant line O from the Ad	3	16,345,659.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	245,185.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	16,100,474.
6	Minimum investment return. Enter 5% of line 5	6	805,024.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	805,024.
2 a			
b	Income tax for 2010 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	16,982.
3	Distributable amount before adjustments. Subtract line 2c from line 1		788,042.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	788,042.
6	Deduction from distributable amount (see page 25 of the instructions)	6	·
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	788,042.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	_	
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	770,000.
Ь	Program-related investments - total from Part IX-R	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	· · · ·	
_	nurnoses	2	0.
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	0.
ь	Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	770,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Additional and the distributions Continued line & from time 4	6	770,000.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal		
	qualifies for the section 4940(e) reduction of tax in those years.	Culating Will	strier the loundation

Form 990-PF (2010)

Рa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
1	. Distributable amount for 2010 from Part XI.	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
•			,		788,042.
2	Undistributed income, if any, as of the end of 2010		-		
² a	Enter amount for 2009 only			764,126.	
a L	Total for pnor years 20 08 .20 07 .20 06				
3	Excess distributions carryover, if any, to 2010:	<u> </u>			
_	From 2005				
a					
		'-			
٦	From 2007	- <u>-</u>		-	;
u	5 0000			٠	
	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,	- 1		-	
•	line 4 ▶ \$ 770,000.		, , , , , , , , , , , , , , , , , , ,		
•	Applied to 2009, but not more than line 2a		,	764,126.	
	,,	2		, =	
Þ	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)			,	
d	Applied to 2010 distributable amount				5,874.
е	Remaining amount distributed out of corpus	0.	-		
5	Excess distributions carryover applied to 2010		-		
	(If an amount appears in column (d), the same amount must be shown in column (a).)	7		*	
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
_	Prior years' undistributed income Subtract	. ,	-	7.2	•
U	line 4b from line 2b	i		· , , , , ,	
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	,			/ · · · · · · · · · · · · · · · · · · ·
d	Subtract line 6c from line 6b. Taxable			•	1
	amount - see page 27 of the instructions	, , , , , , , , , , , , , , , , , , , ,			•
9	Undistributed income for 2009. Subtract line 4a from line 2a Taxable amount - see page		#-		
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2011.			· _ *	782,168.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)		<u> </u>	<u> </u>	
9	Excess distributions carryover to 2011.				
-	Subtract lines 7 and 8 from line 6a	0.	1	-	
10	Analysis of line 9:	- 1= -			
	Excess from 2006			-	
	Excess from 2007		,		
	Excess from 2008	4- ,	,		
d	Excess from 2009	<u>}</u>	•		
е	Excess from 2010 0 .	·		-	

Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Par	rt VII-A, question 9)	NOT APPLICABLE			
1 a	a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the rulin								
Ь	Check box to indicate wh		i private operating found		4942())(3) or 4942(j)(5)			
2 a	Enter the lesser of the ad-	Tax year	41,000	Prior 3 years		(e) Total			
	Justed net income from Part I or the minimum investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007				
	year listed								
b	85% of line 2a								
С	Qualifying distributions from Part XII, line 4 for each year listed								
d	Amounts included in line 2c not used directly for active conduct of exempt activities								
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the alternative test relied upon								
а	"Assets" alternative test - enter								
	(1) Value of all assets (2) Value of assets qualifying								
	under section								
b	4942(j)(3)(B)(i) *Endowment* alternative test-								
	enter 2/3 of minimum invest- ment return shown in Part X,								
	line 6 for each year listed								
С	"Support" alternative test - enter								
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)),								
	or royalties)								
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942								
	(j)(3)(B)(III)								
	port from an exempt organization								
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the founds	ation had \$5 000	or more in assets			
	at any time o	luring the year - see	e page 28 of the in	structions.)	ation had \$5,000	or more in assets			
1	Information Regarding								
а	List any managers of the before the close of any	the foundation who he tax year (but only if th	ave contributed more ley have contributed n	e than 2% of the total nore than \$5,000) (Se	l contributions receive ee section 507(d)(2))	ed by the foundation			
_	NONE								
D	List any managers of ownership of a partner					large portion of the			
_	NONE								
2	Information Regarding	-		•••					
	Check here ► X if the unsolicited requests for organizations under other contents.	or funds. If the found	dation makes gifts, g	rants, etc. (see page	able organizations a 28 of the instructio	nd does not accept ns) to individuals or			
a	The name, address, a	nd telephone number	of the person to whon	n applications should be	e addressed.				
b	The form in which appl	ications should be sub	omitted and information	on and materials they	should include				
c	Any submission deadli	nes:							
d	Any restrictions or lifactors.	mitations on awards,	such as by geogra	phical areas, charital	ble fields, kınds of i	nstitutions, or other			

Form 990-PF (2010)			44-6014359	Page 11
Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin	ng the Year or Appi		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid dunng the year ATTACHMENT 10				770,000.
MIRCHADAI IV				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		\ \ \ \ \		
Total	 		▶ 3a	770,000.
b Approved for future payment				
	L		<u> </u>	
Total	<u> </u>	<u></u>	<u>▶</u> 3b	L

Part XVI	-A Analysis of Income-Produ					
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related of exempt function income (See page 28 of the instructions)
_				 		the matractions /
_				 		
						· · · · · · · · · · · · · · · · · · ·
				 		
· -						
	and contracts from government agencies					
2 Member	rship dues and assessments					
	on savings and temporary cash investments			14	2,619.	
4 Dividen	ds and interest from securities			14	823,237.	
5 Net rent	tal income or (loss) from real estate		-	· ·	-	<u> </u>
a Debt	t-financed property					
	debt-financed property					
	al income or (loss) from personal property					
7 Other in	nvestment income					
8 Gain or (loss) from sales of assets other than inventory			18	25,218.	
9 Net inco	ome or (loss) from special events					·
IO Gross p	rofit or (loss) from sales of inventory					
11 Other re	evenue: a					
b						
c						
d						
e			-		051 074	
	Add columns (b), (d), and (e)			<u> </u>	851,074.	251 251
	dd line 12, columns (b), (d), and (e)				13	851,074
	heet in line 13 instructions on page 29 B Relationship of Activities			compt Burn		
Line No.	Explain below how each activit accomplishment of the foundation	y for which	n income is reported of purposes (other than	in column (e by providin	e) of Part XVI-A contrib g funds for such purpose	uted importantly to these. (See page 29 of the
lacktriangle	instructions.)		to propose (omer man	. b, p. c	g (aa.) (o. a.a.), pa/pao(,o, (eee page 20 e
N/A						
					· 	-
						
			······································			
						
						
,						
			,		<u> </u>	
	1					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempt Orga	inizations								
1 Did	the organization directl	y or indirectly	engage in any	of the followin	g with any	other org	anization descr	ibed -	Yes	No
įn s	section 501(c) of the C	ode (other than	section 501(c)(3) organizations) or in sec	tion 527,	relating to poli	tıcal		-
orga	inizations?									
a Trar	nsfers from the reporting f	oundation to a no	onchantable exemp	t organization of						
(1)	Cash							1a(1)	X
(2)	Other assets							1a(2)	X
b Oth	er transactions								ĺ	
(1)	Sales of assets to a noncl	haritable exempt c	organization					<mark>1ь(1</mark>		X
(2)	Purchases of assets from	a noncharitable e	xempt organization					1b(2	<u> </u>	X
(3)	Rental of facilities, equipm	nent, or other asse	ts					1b(3	<u> </u>	X
(4)	Reimbursement arrangeme	ents						1b(4	<u> </u>	X
(5)	Loans or loan guarantees							1b(5)	X
	Performance of services of								 	X V
	ring of facilities, equipmen									X
	he answer to any of									
	e of the goods, other		· ·							
	e in any transaction o	1		•						
(a) Line no	 	(c) Name of r	noncharitable exempt	torganization	(d) Descrip	tion of transf	ers, transactions, a	nd sharing an	angeme	ents
	N/A	 			N/A					
		 	-							
					*					
		 								
		<u> </u>								
		 								
					<u>-</u>					
										-
					_					
2a Is	the foundation directly	or indirectly at	ffiliated with, or	related to, o	ne or more	tax-exem	pt organizations			_
des	cribed in section 501(c) of	the Code (other t	han section 501(c)(3)) or in section	527?			□`	es _	X No
b_lf_"\	es," complete the following	ig schedule								
	(a) Name of organization	n	(b) Type	of organization			(c) Description of r	elationship		
					<u></u>					
	· · · · · · · · · · · · · · · · · · ·									
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						had of my	lea aceda	d
1 1	Under penalties of perjury, I do belief, it is true, correct, and co	mplete Declaration	examined this return of preparer (other tha	, including accomp an taxpayer or fiduc	ciary) is based o	n all informat	tion of which prepare	e dest of my erer has any k	nowled	ge.
Sign	* Mark	1/2/2		ı 🕅	0/1	111 >	2 ().	' 0	4	
Here	No of the second				8 12-60 1	ZZ	tle	eden	۷.	
<u></u> <u></u>	Signature of officer or trustor Print/Type preparers		Prepare s sig	Date	/	Date/		PTIN		-
	Fillio Type prepareza) Hallie	i repaid 3 Si			0/1/	Chark	٦,, '''``		
Paid	STANLEY H. HO	OUSE	I fam.	Elane	<u> </u>	1/20/1	/ Check _ self-empl	 oyed P00	6429	74
Prepare	er	OUSE PARK	€ DOBRATZ	P.C.	l	<u> </u>	Firm's EIN >	-		
Use Or							, am s Lin			
			S CITY, MC		6411	.2	Phone no 81	L6-931 -	3393	3
			,			-	1. 110110 110 0			(2010

J. B. REYNOLDS FOUNDATION

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVES Kind of Property Description				Р О	Date acquired	Date sold		
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of		Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	Ш	or (loss)	
						П		
		SCHEDULE A				₽	VAR	VAR
			YPE: SECURI	TIES		$\ \ $		
,967,205.		2,941,987.					25,218.	
						Ш		
NMAT CATN / T	088)	1				Ш	25 210	
TAL GAIN(L	oss)				• • • • • • • •	$\ \ $	<u>25,218.</u>	
		`				П		
						$\ \ $	}	
		1						
						$\ \ $		
						$\ \ $		
						Ш		
						H		
								-
								1
								i I
								ļ
								1
						Ш		
						Н		
								-
		•				- 1	•	

INVESTMENTS	
CASH	
EMPORARY	
ON TE	
INTEREST	
ı	
Η	
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	2,619.	2,619.
REVENUE AND EXPENSES PER BOOKS	2,619.	2,619.
		TOTAL
DESCRIPTION	MONEY-MARKET INTEREST	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	823,237.	823,237.
REVENUE AND EXPENSES PER BOOKS	823,237.	823,237.
		TOTAL
DESCRIPTION	BOND INTEREST	

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

2009 990-PF ESTIMATED TAXES

20,000.

TOTALS

20,000.

EXPENSES
- OTHER
•
Н
PART
990PF,
FORM

	NET	INVESTMENT	INCOME	1,977.	1,977.
REVENUE	AND	EXPENSES	PER BOOKS	1,977.	1,977.
					TOTALS
			DESCRIPTION	POSTAGE & MISCELLANEOUS	

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

44-6014359

CONTINUE TO COLUMN CONTINUE CO	ATTACHMENT 5	T 5	•
DESCRIPTION	ENDING BOOK VALUE	ENDING	
ATTACHMENT 9	1,233,384.	1,282,080.	
US OBLIGATIONS TOTAL	1,233,384.	1,282,080.	

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

ATTACHMENT 9

TOTALS

9
_
H
Z
ഥ
Σ
-
ਹ
Ā
\mathbf{H}
Ŀ
A

44-6014359

ENDING BOOK VALUE

ENDING FMV

13,227,625.

13,700,371.

13,227,625.

13,700,371.

ATTACHMENT 6

1 1 1

•								
FORM 990PF,	PART III	[- OTHER	INCREASES	IN NET	WORTH	OR	FUND	BALANCES

ROUNDING 1.

44-6014359

ATTACHMENT 8

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES PART VIII FORM 990PF,

TITLE AN	WEEK DEV
	D ADDRESS
	ANE
	NAME AND

ND AVERAGE HOURS PER VOTED TO POSITION

810 W. 52ND ST. KANSAS CITY, MO 64112 R. PHILIP BIXBY

VICE PRESIDENT 1.00

WALTER E. BIXBY III 3800 N.W. MULBERRY DR., APT. #402 KANSAS CITY, MO 64116-1685

425 BALDWIN CREEK ROAD LANDER, WY 82520

NANCY BIXBY HUDSON

SECRETARY & DIRECTOR

1.00

3810 N.W. MULBERRY DR., APT. #202 KANSAS CITY, MO 64116 LEE M. VOGEL

DIRECTOR

GRAND TOTALS

PRES., TREASURER, & DIRECTOR

J.B. Reynolds Foundation Notes To Financial Statements December 31, 2010

NOTE 1.	Marrow Market Fire da			.	Fair
NOTE 1:	Money Market Funds			Cost	Value
	Fidelity Government Port		\$	836,037	836,037
	Fidelity Treasury Portfolio		_	-	
	Total Money Market		-	836,037	836,037
NOTE 2:	Bonds Owned-U.S. Government				
Par Value		Coupon	Maturity	Cost	Fair Value
Tur varue		Coupon	Maturity	Cost	value
	00 FEDERAL HOME LOAN BANK	5.25	12/22/2016 \$	750,000	783,222
•	91 GNMA MOBILE D 401906	7.25	8/15/2015	37,720	41,432
	24 SBAP 2009-20F 1	4.95	6/1/2029	445,663	457,426
1,224,11	5 Total U.S. Government			1,233,384	1,282,080
	Bonds Owned—Corporate				
.		6	3.7	_	Fair
Par Value		Coupon	Maturity	Cost	Value
233,00	00 ABBOTT LABORATORIES	5.88	5/15/2016 \$	275,884	268,976
75,00	00 ALLTEL GA COMMUN CORP DEB	6.50	11/15/2013	74,438	<i>7</i> 7,563
•	00 BOEING CO	4.88	2/15/2020	502,679	538,245
•	00 BOTTLING GROUP LLC	5.50	4/1/2016	289,808	284,89 9
	00 BURLINGTON NORTHERN CORP DEB	6.88	2/15/2016	481,375	574,786
	00 CATERPILLAR FINANCIAL SE	7.15	2/15/2019	250,760	245,932
	00 CLOROX CO DEL	6.13	2/1/2011	5 4 8,919	501,981
	00 COCA COLA ENTERPRISES INC DEB	8.50	2/1/2012	574,309	541,105
	00 CONNECTICUT LIGHT & POWER	5.38	3/1/2017	491,945	544,181
	00 COUNTRYWIDE HOME LOAN	4 00	3/22/2011	474,120	503,646
	00 DISNEY WALT CO MTN TR 49	6.20	6/20/2014	498,620	571,156
	00 DOVER CORP NTS	6.50	2/15/2011	561,564	503,384
	00 FL PWR CORP 1ST	6.65 8.13	7/15/2011	465,244	428,014
	00 GE CAP CORP 00 HARRIS CORP	6.13	5/15/2012	549,729	540,214
=	00 HEWLETT PACKARD CO GLOBAL NT	6.50	6/15/2019 7/1/2012	218,913	216,633
	00 HONEYWELL INTERNATIONAL	5.00	2/15/2019	499,775 406,166	541,240 426,938
	00 ILLINOIS TOOL WORKS INC	6.25	4/1/2019	569,144	582, 44 0
	00 IBM CORP	5.70	9/14/2017	409,994	401,714
	00 KELLOGG CO	4.45	5/30/2016	276,968	269,092
•	00 LEAVENWORTH KS IDR DEPT VA TAXABLE	6.80	6/1/2013	225,000	225,707
	00 MARATHON OIL	6.00	7/1/2012	495,870	534,245
500,0	00 NATIONAL OILWELL INC	6.50	3/15/2011	487,880	504,751
500,0	00 PECO ENERGY CO	5.35	3/1/2018	498,895	554,641
350,0	00 PRIVATE EXPORT FUNDING	4,30	12/15/2021	347,617	359,935
250,0	00 PUBLIC SERVICE COLORADO	5.13	6/1/2019	270,805	272,640
250,0	00 TARGET CORP	4.88	5/15/2018	249,308	268,990
280,0	00 UNITED TECHNOLOGIES CORP	5.38	12/15/2017	283,923	316,645
500,0	00 VERIZON PA INC	5.65	11/15/2011	470,265	520,241
•	00 VIRGINIA ELEC & PWR CO	5.40	4/30/2018	480,865	557,330
•	00 WAL MART STORES INC	4.13	2/15/2011	489,175	502,122
	00 WESTPAC BANKING CORP	3.00	8/4/2015	248,850	251,265
250,0	00 WISCONSIN POWER & LIGHT	5.00	7/15/2019	258,823	269,729
12,709,00	Total Corporate		-	13,227,625	13,700,371
13,933,11	15 Total All Bonds		\$_	14,461,009	14,982,451
				ATT	AUTMEIL O
					- —

J. B. Reynolds Foundation Notes To Financial Statements

December 31, 2010

NOTE 3: Contributions (1)	Amount
Alzheimer's Association	25,000
American Red Cross	25,000
American Royal	2,700
Autism Society of America	10,000
Avila University	10,000
The Barstow School	10,000
Boy Scouts of America-Heart of America	25,000
Boys & Girls Clubs of Greater Kansas City	5,000
Cato Institute	1,000
Changing Leads Equine Rescue	10,000
KCPT Channel 19	25,000
Children's Mercy Hospital	10,000
Christ the King Parish	4,000
City Union Mission	10,000
Columbia College	50,000
Conservation Federation of MO	10,000
Dare 2 Share	10,000
DeLaSalle	10,000
Folly Theater	5,000
Harry S. Truman Library Institute	10,000
Harvester's Kansas City	15,000
Horizon Academy	5,000
Jackson County Historical Society	5,000
Kansas City Art Institute	30,000
Kansas City Ballet	10,000
Kansas City Community Gardens	5,000
Kansas City Free Health Clinic	10,000
Kansas City Hospice	5,000
Kansas City Policy Care Team	7,500
Kansas City Repertory Theatre	10,000
Kansas City Rose Society	10,000
KC Sports Commission & Foundation	10,000
Kansas City Rescue Mission	5,000
Kansas City Symphony	25,000
Kansas City Young Audiences The Land Institute	1,000
Literacy Kansas City	5,600
Lyric Opera of Kansas City	5,000
Maison de Naissance	25,000
Missouri Colleges Fund, Inc.	10,000
Missouri Colleges Fund, Inc. Missouri Hunting Heritage Federation	2,000
Missouri Hunting Heritage Federation Missouri Hunting Heritage Federation	10,000
MOCSA	5,000
1110-011	10,000

W . ID . I (WCD!: D .	
Mounted Patrol of KC Police Dept	2,200
National Multiple Sclerosis Society	5,000
National Wild Turkey Federation - WY	15,000
NAIA	10,000
National Forensic League	1,000
Niles Home for Children	5,000
Ozanam	5,000
Parkinson Foundation of the Heartland	5,000
Pembroke Hill	10,000
Pilgrim Center	1,000
Police Athletic League of Kansas City	10,000
Powell Gardens	5,000
Redemptorist Center	10,000
Research Foundation	25,000
ReStart, Inc	5,000
Riverside Fire and Police Athletic League	5,000
The Salvation Army	20,000
Seton Center	15,000
Shadow Buddies	5,000
St Paul's Episcopal Day School	5,000
Swope Health Services	5,000
Synergy Services	5,000
Truman Medical Center Charitable Foundation	10,000
University of Missouri - Columbia	27,000
University of Missouri - Kansas City	5,000
Urban Rangers	5,000
United States Squash Racquets Association	10,000
VFW Unmet Needs	25,000
YMCA of Greater Kansas City	15,000
Youth Symphony of Kansas City	5,000
	·
	\$ 770,000

To retain the Foundation's tax exempt status, contributions required for 2010 were \$764,126.

Organization	Address1	City	2010
Alzheimer's Association	3846 W 75th Street	Praine Village, KS 66208	25,000 00
American Red Cross, Greater KC Chapter	211 W Armour Boulevard	Kansas City, MO 64111	25,000 00
American Royal Autism Society of America	3520 Broadway 7910 Woodmont Avenue, Suite 300	Kansas City, MO 64111	2,700 00
Avila University	11901 Wornall Road	Bethesda, Maryland 20814-3015 Kansas City, MO 64145	10,000 00 10,000 00
Barstow School	11511 State Line Road	Kansas City, MO 64114	10,000 00
Boy Scouts of America	6201 College Blvd, Suite 500	Overland Park, KS 66211-2423	25,000 00
Boys & Girls Clubs of Greater Kansas City	6301 Rockhill Road #303	Kansas City, MO 64131	5,000 00
Cato Institute Changing Leads Equine Resque	1000 Massachusetts Ave , NW P O Box 901343	Washington, DC 20001	1,000 00
Channel 19 - KCPT	125 East 31st Street	Kansas City, MO 64190 Kansas City, MO 64108	10,000 00
Children's Mercy Hospitals and Clinics	2401 Gillham Road	Kansas City, MO 64108	25,000 00 10,000 00
Christ the King Parish	8510 Wornall Road	Kansas City, MO 64114-2997	4,000 00
City Union Mission	1100 East 11th Street	Kansas City, MO 64106-3095	10,000 00
Columbia College	3520 Broadway	Kansas City, MO 64111	50,000 00
Conservation Federation of MO Dare 2 Share	728 West Main Street P O Box 745323	Jefferson City, MO 65101-1559	10,000 00
DeLaSalle	3740 Forest Avenue	Arvada, CO 80006-5323 Kansas City, MO 64109	10,000 00 10,000 00
Folly Theater	P O Box 26505	Kansas City, MO 64196	5,000 00
Harry S Truman Library Institute - Wild About Harry	500 W US Highway 24	Independence, MO 64050	10,000 00
Harvesters	3801 Topping	Kansas City, MO 64129	15,000 00
Horizon Academy Jackson County Historical Society	4901 Reinhardt Drive, Suite A	Roeland Park, KS 66205	5,000 00
Kansas City Art Institute	129 West Lexington 4415 Warwick Boulevard	Independence, MO 64050 Kansas City, MO 64111-1874	5,000 00 30,000 00
Kansas City Ballet	1616 Broadway St	Kansas City, MO 64108	10,000 00
Kansas City Community Gardens	6917 Kensington	Kansas City, MO 64132	5,000 00
Kansas City Free Health Clinic	3515 Broadway	Kansas City, MO 64111	10,000 00
Kansas City Hospice House	9221 Ward Parkway, Suite 100	Kansas City, MO 64114	5,000 00
Kansas City Police Care Team Kansas City Repertory Theatre	3520 Broadway 4949 Cherry Street	Kansas City, MO 64111	7,500 00
Kansas City Rescue Mission	1520 Cherry Street	Kansas City, MO 64110 Kansas City, MO 64108	10,000 00 5,000 00
Kansas City Rose Society	8209 Roe Avenue	Prairie Village, KS 66208	10,000 00
Kansas City Sports Commission & Foundation	1308 Pennsylvania Ave	Kansas City, MO 64105	10,000 00
Kansas City Symphony	1020 Central, Suite 300	Kansas City, MO 64105-1672	25,000 00
Kansas City Young Audiences Land Institute	5601 Wyandotte 2440 E Water Well Road	Kansas City, MO 64113	1,000 00
Literacy Kansas City	211 West Armour Boulevard	Salına, KS Kansas City, MO 64111	5,600 00 5,000 00
Lync Opera of Kansas City	1029 Central	Kansas City, MO 64105-1677	25,000 00
Maison de Naissance	5000 West 134th Street	Leawood, KS 66209	10,000 00
Missouri Colleges Fund	3401 West Truman Blvd, Ste 202	Jefferson City, MO 65109	2,000 00
Missouri Hunting Heritage Federation MOCSA	24801 E 219th Street 3100 Broadway, Suite 400	Pleasant Hill, MO 64080	15,000 00
Mounted Patrol of Kansas City Police Department	1125 Locust Street	Kansas City, MO 64111 Kansas City, MO 64106	10,000 00 2,200 00
Multiple Sclerosis Society	7611 State Line Road, Ste 100	Kansas City, MO 64114	5,000 00
National Association of Intercollegiate Athletics	1200 Grand Boulevard	Kansas City, MO 64106	10,000 00
National Forensic League	1909 6th Avenue	St. Joseph, MO 64505	1,000 00
National Wild Turkey Federation Niles Home for Children	P O Box 2806 1911 E 23rd St	Cody, WY 82414	15,000 00
Ozanam	421 East 137th Street	Kansas City, MO 64127 Kansas City, MO 64145	5,000 00 5,000 00
Parkinson Foundation of the Heartland	8900 State Line Road	Leawood, KS 66206	5,000 00
Pembroke Hill School	400 West 51st Street	Kansas City, MO 64112	10,000 00
Prigram Center	P O Box 32383	Kansas City, MO 64171	1,000 00
Police Athletic League of Kansas City, MO Powell Gardens	1328 Agnes 1609 NW US Highway 50	Kansas City, MO 64127	10,000 00
Redemptorist Center	207 W Linwood	Kingsville, MO 64061-9000 Kansas City, MO 64111	5,000 00 10,000 00
Research Foundation	2316 East Meyer Blvd	Kansas City, MO 64111	25,000 00
ReStart, Inc	918 East 9th Street	Kansas City, MO 64106-3072	5,000 00
Riverside Fire and Police Athletic League	2990 NW Vivion Road	Riverside, MO 64150	5,000 00
Salvation Army - Kansas City, MO Seton Center	3637 Broadway 2816 East 23rd Street	Kansas City, MO 64111	20,000 00
Shadow Buddies	14700 W 107th Street State 100	Kansas City, MO 64127 Lenexa, KS 66215	15,000 00 5,000 00
St. Paul's Episcopal Day School	4041 Main Street	Kansas City, MO 64111-2312	5,000 00
Swope Health Services	3801 Blue Parkway	Kansas City, MO 64130-2807	5,000 00
Synergy Services	400 E South Street	Parkville, MO 64152	5,000 00
Truman Medical Center Charitable Foundation University of Missouri-Columbia	2310 Holmes, Suite 735	Kansas City, MO 64108	10,000 00
University of Missouri-Columbia University of Missouri-Kansas City	3520 Broadway 5100 Rockhill Road	Kansas City, MO 64111	27,000 00
Urban Rangers	5908 Swope Parkway	Kansas City, MO 64110 Kansas City, MO 64130	5,000 00 5,000 00
USRAA, Squash	555 Eighth Avenue, Ste 1102	New York, NY 10018-4311	10,000 00
VFW Unmet Needs	406 West 34th St., Suite 514	Kansas City, MO 64111	25,000 00
YMCA of Greater Kansas City	3100 Broadway, Suite 1020	Kansas City, MO 64111	15,000 00
Youth Symphony of Kansas City	5960 Dearborn St., #206	Mission, KS 66202	5,000 00
			770,000 00

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Losses OMB No 1545-0092

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

2010

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 3 Net short-term gain or (loss) from partnerships, S. corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet 5 Net short-term gain or (loss), Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Carryover Worksheet 6 (B) Date acquire (Esample 100 abares 7% preferred of 72° Co) (B) Date acquire ((B)	Name	ame of estate or trust Employer				Employer identifi	lentification number		
Short-Term Capital Cains and Losses - Assets Held One Year or Less (6) Date space of the share 17% pieces of the color of the color of the share 17% pieces of the color of the col						44-60143	359	_	
(b) Description of property (Example 100 shares 7% preferred of "C Co) (b) Date sequence (mo, day, yr) (c) Date sequence (mo, day, yr) (d) Sales price (d) Sales price (de) S									
Example (Od shear 76, perferred of 12° Co) (no. day, yr)	Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less				
b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 2 Short-term capital gain or (loss) from Forms 4884, 6252, 6781, and 8824. 3 Net short-term gain or (loss) from partnerships, S. corporations, and other estates or trusts. 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet. 5 Net short-term gain or (loss). Combine lines 1a through 4 in column (1) Enter here and on line 13, column (1) on the back. Carryover Worksheet. 6 Loads and Losses - Assets Held More Than One Year (Esample 100 shares 7% preferred of 72 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 72 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 72 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 73 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 74 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (D Date sequence (Ind. of Say, yr)) (Esample 100 shares 7% preferred of 75 Co) (Esample 100		(a) Description of property (Example 100 shares 7% preferred of "Z" Co)			(d) Sales pnce			the entire year	
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	1a								
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824		——————————————————————————————————————							
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824		·							
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824						-		<u>-</u>	
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824									
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824							Ι.		
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Part III Long-Term Capital Gains and Losses - Assets Held More Than One Year (Example 100 shares 7% prefered of 72 Co) (B) Date acquired (mo. day, yr) (C) Date soft (mo. day, yr) (d) Sales price (e) Cost or other basis (see instructions) (Example 100 shares 7% prefered of 72 Co) (B) Date acquired (mo. day, yr) (D) Date acquired (mo. day, yr) (Example 100 shares 7% prefered of 72 Co) (D) Date acquired (mo. day, yr) (Example 100 shares 7% prefered of 72 Co) (Example 100 shares 7% prefered of 72 Co) (D) Date acquired (mo. day, yr) (Example 100 shares 7% prefered of 72 Co)	b	Enter the short-term gain or (loss), if any, f	rom Schedule D	-1, line 1b			1b		
A Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back Part III Long-Term Capital Gains and Losses - Assets Held More Than One Year (Example 100 shares 7% preferred of 'Z' Co) (B) Date acquired (c) Date sodi (d) Sales price (e) Cost or other basis (for the entire year Subtract (e) from (d) b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. Carryover worksheet Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back. 11 (25, 218.	2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2		
A Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet. Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back. Part III Long-Term Capital Gains and Losses - Assets Held More Than One Year (Example 100 shares 7% preferred of "2" Co) (b) Date acquired (mo. day, yr) (c) Date sold (mo. day, yr) (d) Sales price (e) see instructions) b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. (5b 25, 218.) Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7, Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 9 Capital gain distributions 9 Gain from Form 4797, Part I 1. 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet 11 (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back 12 25, 218.	3	Net short-term gain or (loss) from partners	ships, S corpora	tions, and other	estates or trusts		3		
Section of the back. Column (3) on the back Section of property (Example 100 shares 7% preferred of 12° Co) (b) Date acquired (mo. day, yr) (d) Sales prize (e) Cost or other basis (see instructions) (e) Cost or other basis (see instructions) (d) Sales prize (e) Co	4	Short-term capital loss carryover Enter the	e amount, if any	, from line 9 of	the 2009 Capital Loss	3		,	
column (3) on the back. Sart Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (b) Date acquired (mo, day, yr) (d) Sales price (d) Sales price (e) Cost or other basis (see instructions) (see instructions) (f) Gain or (loss) for the enture year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) (d) Sales price (e) Cost or other basis (see instructions) (see i	_	Carryover Worksheet					4)	
Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (mo, day, yr) (c) Date sold (mo, day, yr) (d) Sales price (e) Cost or other basis (see instructions) (f) Gain or (loss) for the entire year Subtract (e) from (d) b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 6b 25, 218. 7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824. 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 9 Capital gain distributions. 9 Gain from Form 4797, Part I. 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet. 11 () Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	5	- · · · · · · · · · · · · · · · · · · ·	_	• •			_		
(a) Description of property (Example 100 shares 7% preferred of "2" Co) (b) Date acquired (mo, day, yr) (c) Date sold (mo, day, yr) (d) Sales price (e) Cost or other basis (see instructions) (f) Gain or (loss) from (d) (g) Sales price (e) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (h) Sales price (see instructions) (g) Cost or other basis (see instructions) (g) Cost	Par	t II Long-Term Capital Gains and Losse	s - Assets Held	More Than Or	<u> </u>		<u> </u>		
b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 Capital gain distributions 9 Gain from Form 4797, Part I 1 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet, 2 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.						(e) Cost or other	basis		
b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b. 7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824. 8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 9 Capital gain distributions. 9 Gain from Form 4797, Part I 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet. 10 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.					(o) Sales price				
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	6a								
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.						1			
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.									
Tong-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.			J			1			
Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9	b	Enter the long-term gain or (loss), if any, fr	om Schedule D-	1, line 6b			6 b	25,218.	
9 Capital gain distributions 9 Gain from Form 4797, Part I 1 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet 2 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	7	Long-term capital gain or (loss) from Form	ıs 2439, 4684,	6252, 6781, aı	nd 8824		7		
O Gain from Form 4797, Part I Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	8	Net long-term gain or (loss) from partners	hips, S corporat	ions, and other	estates or trusts		8_		
Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back	9	Capital gain distributions					9		
Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back	10	Gain from Form 4797, Part I					10		
Carryover Worksheet Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back.	11	Long-term capital loss carryover. Enter the	amount, if any	, from line 14 c	of the 2009 Capital Los	ss			
2 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back		Carryover Worksheet					11	()	
	12	Net long-term gain or (loss). Combine line	s 6a through 11	in column (f)	Enter here and on lin	e 14a,		05 010	
or Paperwork Reduction Act Notice, see the Instructions for Form 1041.					<u> </u>			.	

Schedule	D (Form	1041)	2010

Dage	2

Pai	t III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(2) Total
	Caution: Read the instructions before completing this part.	(see instr.)	or trust's	(3) Total
13	Net short-term gain or (loss)		<u></u>	
14	Net long-term gain or (loss):			
а	Total for year			25,218.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b	<u>-</u> .		
C	28% rate gain			
	Total net gain or (loss). Combine lines 13 and 14a			25,218.
to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-7 if V, and <mark>do not</mark> complete Part IV If line 15, column (3), is a net loss, complete Part IV an	T, Part I, line 4a) If line and the Capital Loss Cal	es 14a and 15, column Twover Worksheet as	(2), are net gains, go
	t IV Capital Loss Limitation			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line	e 4c if a trust\ the er	naller of	
				١
Note	The loss on line 15, column (3) or b \$3,000. If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line over Worksheet on page 7 of the instructions to figure your capital loss carryover	22 (or Form 990-T, I	ne 34), is a loss, com	plete the Capital Loss
Par	•			
	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2) is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than:		nount is entered in	Part I or Part II and
	ion: Skip this part and complete the worksheet on page 8 of the instructions if.			
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or	•		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero			
	990-T trusts. Complete this part only if both lines 14a and 15 are gains			
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and c er line 14b, col. (2) or line 14c, col. (2) is more than zero.	complete the work	sheet on page 8 o	f the instructions if
		1. 1		
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17		
18	Enter the smaller of line 14a or 15 in column (2)			
4.0	but not less than zero	-		
19	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified			
	dividends included in income in Part I of Form 990-T) 19			
20	Add lines 18 and 19	⊣	,	
21	If the estate or trust is filling Form 4952, enter the	<u> </u>		
	amount from line 4g; otherwise, enter -0 ▶ 21			
22	Subtract line 21 from line 20 If zero or less, enter -0-	. 22		
23	Subtract line 22 from line 17 If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,300	. 24		
25	Is the amount on line 23 equal to or more than the amount on line 24?		ł I	•
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.			
	No. Enter the amount from line 23			
26	Subtract line 25 from line 24	. 26		
27	Are the amounts on lines 22 and 26 the same?		• -	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
20	Enter the amount from line 26 //f line 26 is black, anter 0.)	120		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	. 28		
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (15)		30	
31	Figure the tax on the amount on line 23 Use the 2010 Tax Rate Scher		· · · · · _ 	
	(see the Schedule Ginstructions in the instructions for Form 1041)		k I	
			· · · · · · · -	
32	Add lines 30 and 31		32	
33	Figure the tax on the amount on line 17. Use the 2010 Tax Rate Schen	dule for Estates ar	nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)		33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here an	id on Form 1041,	Schedule	
	G, line 1a (or Form 990-T, line 36)			
			Sahadu	le D (Form 1041) 2010

Employer identification number Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side J. B. REYNOLDS FOUNDATION 44-6014359 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (see page 4 of the instructions) (b) Date (e) Cost or other basis (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr) (see page 4 of the instructions) (mo, day, yr) 6a SCHEDULE ATTACHED VAR VAR 2,967,205. 2,941,987. 25,218. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b 25,218.

Schedule D-1 (Form 1041) 2010

J.B. Reynolds Foundation 2010 Capital Gains Reconciliation

11/15/10

Form 8868 (Re	v 1-2011)			Page 2		
If you are	filing for an Additional (Not Automatic) 3-Me	onth Exten	sion, complete only Part II and check	k this box		
	complete Part II if you have already been gra					
If you are	filing for an Automatic 3-Month Extension, o	complete c	only Part I (on page 1).	•		
Part II	Additional (Not Automatic) 3-Month Ex			opies needed).		
Type or	Name of exempt organization		E	Employer identification number		
print	J. B. REYNOLDS FOUNDATION			44-6014359		
File by the	Number, street, and room or suite no. If a P.O. bo	x, see instru	ctions.			
extended due date for	P.O. BOX 219139					
filing your	ng your City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
return, See Instructions	KANSAS CITY, MO 64121-9139					
Enter the Re	eturn code for the return that this application	is for (file a	a separate application for each return)	04		
Application		Return	Application	Return		
ls For		Code	is For	Code		
Form 990		01				
Form 990-B		02	Form 1041-A	08		
Form 990-E		03	Form 4720	09		
Form 990-PI		04	Form 5227	10		
	(sec. 401(a) or 408(a) trust)	05	Form 6069	11		
	(trust other than above)	06	Form 8870	12		
	ot complete Part II if you were not already					
The book	s are in the care of ▶ R. PHILIP BIXE	Y		providedly med to the edge.		
	e No ▶ 816 753-7000		FAX No. ▶ 816 753-1354			
	anization does not have an office or place of I					
	or a Group Return, enter the organization's for					
	e group, check this box	_	· · · · · · · — — — — — — — — — — — — —			
	names and EINs of all members the extension		int of the group, erroat the bex	und attacht a		
	est an additional 3-month extension of time ur		11/15 , 20	0 11		
•	lendar year 2010 , or other tax year beginni		, 20 , and ending	, 20 .		
	ax year entered in line 5 is for less than 12 m			Final return		
	change in accounting period	,				
	n detail why you need the extension ADDIT	I LAKOI	IME IS REQUIRED TO OBTAI	N ALL THE		
	RMATION NEEDED FOR THE PREPARA					
AND A	ACCURATE RETURN.					
		-				
8a If this	application is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the tentative tax,	less any		
nonref	undable credits. See instructions.			8a \$ 19,787.		
b If this	application is for Form 990-PF, 990-T,	4720, or	6069, enter any refundable cred	dits and		
estima	ted tax payments made. Include any pri	ior year o	verpayment allowed as a credit a			
	t paid previously with Form 8868.			8b \$ 19,787.		
c Balanc	e Due. Subtract line 8b from line 8a. Include	your paym	ent with this form, if required, by usin	ig EFTPS		
(Electr	onic Federal Tax Payment System). See instru	ctions.		8c\$ 0.		
			d Verification			
	s of perjury, I declare that I have examined this form, t, and complete, and that I am authorized to prepare this fo	including acc		the best of my knowledge and belief		
	$\rho/$ // ρ		OPA-	2//		
Signature 🛌	Hay Hour		Title CPA	Date /////		
	///			Form 8868 (Rev. 1-2011		

House Park & Dobratz, P.C. Certifled Public Accountants 605 West 47th Street, Suite 301 Kansas City, MO 64112 FED I D #43-1562209