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Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

Fo	or ca	lendar year 2011 or tax year beginning	0 6	5/01 ,2011	and endi	ng		05/31, 2012
		e of foundation				A E	mployer identi	fication number
	THE	STOWERS FOUNDATION				;	32-61768	05
	Numt	per and street (or P O box number if mail is not delive	ered to street address)		Room/su	ite B 1	elephone num	ber (see instructions)
							(9	13) 312-5667
	673	1 W 121ST STE 206						
_	City c	or town, state, and ZIP code			_			
						C	f exemption appli ending check he	cation is
	LEA	WOOD, KS 66209				'	rending Greck he	e
G	Che	ck all that apply X Initial return	Initial return	of a former p	ublic char	ity p 1	Foreign organiz	ations check here . >
		Final return	Amended re	turn				ations meeting the
		Address change	Name change	е		ł		here and attach
Н	Che	ck type of organization X Section 501	(c)(3) exempt private f	oundation			•	
ſ	ີ s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pr	vate foundat	ion	_	-	on status was terminated (b)(1)(A), check here
ī			ounting method X Ca	ash Acc	rual			is in a 60-month termination
	of y	ear (from Part II, col (c), line	ther (specify)					b)(1)(B), check here
	16)	▶ \$ 60,791,147. (Part I,	column (d) must be on	cash basıs)				
P	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(h) Nat		4-3-4-4		(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inve			justed net icome	for charitable purposes
		column (a) (see instructions)	books					(cash basis only)
\neg	1	Contributions, gifts grants etc., received (attach schedule) .	61,106,953.					
	2	Check					-	
	3	Interest on savings and temporary cash investments	19.		19.			ATCH 1
-	4	Dividends and interest from securities	2,428.		2,428.			ATCH 2
1	5 a	Gross rents						
İ		Net rental income or (loss)						
Revenue		Net gain or (loss) from sale of assets not on line 10		\perp RI	<u>-CEIV</u>	<u>(FL)</u>		
	b	Gross sales price for all assets on line 6a			-		C	
8	7	Capital gain net income (from Part IV, line 2)		12 CE	P 0 7 2	012	50	
~	8	Net short-term capital gain		点 "	1 0 . 4	V 1L	ψ)	
	9	Income modifications		⁻ L				
	10 a	Gross sales less returns and allowances · · · · ·		1 06	DEN.	<u>UI</u>		
	b	Less Cost of goods sold .						
ļ	С	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
_	12	Total. Add lines 1 through 11	61,109,400.		2,447.			
	13	Compensation of officers, directors, trustees, etc	0					
s	14	Other employee salaries and wages						ļ
3Se	15	Pension plans, employee benefits	17 75		0.36			0.076
þe	16a	Legal fees (attach schedule) ATCH, 3	17,752.		8,876.			8,876.
ŭ	b							
ve	C	Other professional fees (attach schedule)						
	15 16 a b c 7 8 19 0 1 2 2 3 4 N 5 8	Interest	850.		125			425.
\$	38	Taxes (attach schedule) (see instructions)	630.	<u> </u>	425.			425.
Ē	19	Depreciation (attach schedule) and depletion.						
P	\$30	Occupancy					·	
담	21	Travel, conferences, and meetings						
ę.	13 2	Printing and publications ATCH 5	41.		21.			20.
Ξ,	23	Other expenses (attach schedule) ATCH. 5.	71.					
era	24	Total operating and administrative expenses.	18,643.		9,322.			9,321.
0	Z	Add lines 13 through 23	10,043.		-, 522.			9,321
- 1		Contributions, gifts, grants paid	18,643.		9,322.			9,321.
_	236 227	Total expenses and disbursements Add lines 24 and 25	10,043.		,, ,,,,,,			9,321
	Į	Subtract line 26 from line 12	61,090,757.],			
	1	Excess of revenue over expenses and disbursements	01,000,707.	-	0		·	
	1	Net investment income (if negative, enter -0-)						
_		Adjusted net income (if negative, enter -0-) perwork Reduction Act Notice, see instructions	<u> </u>			A ** 7	ATCH 4	Form 990-PF (2011)
	ui ra	DELWOIR REGUCTION ACTIVACE, SEE MSUUCIONS	,		33	·	7 T C 11 H	FULL 330°FF (2011)

Form **990-PF** (2011) / PAGE 1

For Paperwork Reduction Act Notice, see instructions
1E1410 1 000 8268EA 757L 7/30/2012 11:49:02 AM

Par	+ 11	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
النظلا		Dalance Onces	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	(Cash - non-interest-beari	ng			
2	: 5	Savings and temporary	cash investments		33,376.	33,376
3	<i>A</i>	Accounts receivable 📐				
	L	ess allowance for dou	btful accounts ▶			
4						
			btful accounts ▶			
5						
6			officers, directors, trustees, and other			
			tach schedule) (see instructions)			
7		•	eceivable (attach schedule)			
'			btful accounts ▶			
رم 8		nventories for sale or us				
<u>ت</u> ا ي		Prenald expenses and d	e			
ess:		repaid expenses and d	eferred charges	······	1,603,030.	1,610,965
יין א			e government obligations (attach schedule). * .* _ stock (attach schedule) ATCH . 7		59,454,351.	59,194,222
					33/ 434/ 331.	33,134,222
11	l a L	Investments - land, buildings and equipment basis Less accumulated deprecia				
143		(attach schedule)	loans			
13			ach schedule)			
14	, L	and, buildings, and	>			
	L	equipment basis Less accumulated deprecia				
15		attach schedule)				
16		Total assets (describe)	completed by all filers - see the			
1.0			age 1, item I)	o	61,090,757.	60,838,563
-					02/030/10/1	
17			ccrued expenses			
18						
Liabilities 21						
∄ 20			rs, trustees, and other disqualified persons			
[21			tes payable (attach schedule)			
22		Other liabilities (describe	; ▶)			
			- 47 Ab 00)	0		
23			s 17 through 22)	- 0	<u>-</u>	
y,	a	and complete lines	low SFAS 117, check here ► 24 through 26 and lines 30 and 31.			
r Fund Balances	. (
[25	1					
<u>m</u> 26	F	-				
립	F	Foundations that do	not follow SFAS 117,			
ũ	(plete lines 27 through 31. ▶ X			
ōi 27	' (cipal, or current funds			
Net Assets	F	Paid-in or capital surplus, or	land, bldg , and equipment fund		61 000 353	
SS 29) F	• .	ulated income, endowment, or other funds		61,090,757.	
₹ 30	1		balances (see instructions)	0	61,090,757.	
ž 31	1	Fotal liabilities and	net assets/fund balances (see			
			<u></u>	0	61,090,757.	
			inges in Net Assets or Fund B		· · · · · · · · · · · · · · · · · · ·	
			alances at beginning of year - Part II			
			d on prior year's return)			
2 Er	nter	amount from Part I, I	line 27a		2	61,090,757
3 Of	ther	increases not include				
4 Ac	dd li	nes 1, 2, and 3			1 . 1	61,090,757
5 De	ecre	eases not included in	line 2 (itemize) ▶		5	
6 To	otal	net assets or fund ba	alances at end of year (line 4 minus lin	ne 5) - Part II, column (b)), line 30 6	61,090,757.
			**ATCH 6			Form 990-PF (2011)

P	art IV Capital Gains	and Losses for Tax on Inv	restment Income			
	(a) List an 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a						
Ŀ						
d				ļ		
_ <u>e</u>						<u> </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						
_6						
_ <u>c</u>						
_ <u>d</u>						
е						
	Complete only for assets	showing gain in column (h) and owner	ed by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
	(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>b</u>						
_c						
_d						
<u>e</u>						
2	Capital gain net income or		gain, also enter in Part I, line 7 }	2		
3	Net short-term capital gair	n or (loss) as defined in sections 1:	· · · · · · · · · · · · · · · · · · ·			
	If gain, also enter in Pa	rt I, line 8, column (c) (see ins	tructions) If (loss), enter -0- in			
		<u> </u>	·	3		
	art V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment Ir	ncome		
_		c private foundations subject to th	ie section 4940(a) tax on net investr	ment incor	ne)	
٧-		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	
If s	section 4940(d)(2) applies,	leave this part blank NO	T AVAILABLE FOR INITIAL	YEAR F	RETURNS	
		,				
			butable amount of any year in the ba	ase period	15	Yes No
If '		not qualify under section 4940(e)		. 		
1		ount in each column for each yea	r, see the instructions before making	any entri		
c	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2010					
	2009					
	2008					
	2007					
_	2006					
2	Total of line 1, column (d))		2		
3	Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the			
	number of years the foun	dation has been in existence if les	s than 5 years	3		
4	Enter the net value of nor	ncharitable-use assets for 2011 fro	om Part X, line 5	4		
			.,,,,,,,,,			
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution	ons from Part XII line 4		8		
0	If line 8 is equal to or gr Part VI instructions	eater than line 7, check the box	in Part VI, line 1b, and complete th	hat part u	ising a 1% tax	rate See the

orm 9	90-PF (2011) THE STOWERS FOUNDATION 32-617			age 4
Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruc	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ and enter 1% of Part I, line 27b			
С	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			0
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			0
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations - tax withheld at source 6 b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			^
	Total credits and payments Add lines 6a through 6d			0
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
_	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 0 Refunded ▶ 11			
	VII-A Statements Regarding Activities	r		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	<u> </u>	Yes	No X
	or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			х
	instructions for definition)?	1 b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			Х
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$(2) On foundation managers ▶\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
2				
_	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	Ī		
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b	~//	A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
5	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			
Ü	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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 instructions)			
	MO,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names		.,	
	and addresses ATTACHMENT 8	10	X	

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	Ï		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_ <u>x</u>	
	Website address N/A			
14	The books are in care of ► WENDY B. MARVIN Located at ► 6731 W 121ST STE 206 LEAWOOD, KS Section 4947(a)(1) proposemnt charitable trusts filing Form 990-PE in liquid form 1041. Check here	-566	7	
	Located at ▶6731 W 121ST STE 206 LEAWOOD, KS ZIP+4 ▶ 66209			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, 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		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of		_	
	the foreign country			<u> </u>
Pai	rt 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 or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ĺ		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	- 1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	- 1		
	termination of government service, if terminating within 90 days) Yes X No	İ		
b	olf 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 instructions)?	1b	~ /	14_
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			,
	, , , , , , , , , , , , , , , , , , , ,	1c	N	A
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))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and	l		
	6e, Part XIII) for tax year(s) beginning before 2011? Yes X No			
	if "Yes," list the years (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		İ	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ł		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			Х
_	, , , , , , , , , , , , , , , , , , ,	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	ŀ		
٦.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
s a		1		
_	at any time during the year?			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	- 1		
	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			
		3 b	N	14
4 2		4a	-/ - /	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
		4 b		Х

Pa	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	i red (continued)						
5 a	During the year did the foundation pay or incur any amou	int to								
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	1 4945(e))?	. Yes X No	0					
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry o	n,						
	directly or indirectly, any voter registration drive?			. Yes X No	0					
	(3) Provide a grant to an individual for travel, study, or ot	her sımılar purposes?		. Yes X No	o					
	(4) Provide a grant to an organization other than a charitable, etc., organization described in									
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes X No									
	(5) Provide for any purpose other than religious, ch	naritable, scientific,	literary, or education	al						
	purposes, or for the prevention of cruelty to children of			1 1 11	o					
b	If any answer is "Yes" to 5a(1)-(5), did any of the				n					
	Regulations section 53 4945 or in a current notice regard				5b	N/A_				
	Organizations relying on a current notice regarding disas	ter assistance check h	nere	▶ □						
С	If the answer is "Yes" to question 5a(4), does the									
	because it maintained expenditure responsibility for the g			[[]	o					
	If "Yes," attach the statement required by Regulations sec		, ,							
6 a	Did the foundation, during the year, receive any fund		ectly, to pay premium	s						
-	on a personal benefit contract?				,					
b	Did the foundation, during the year, pay premiums, direct				6 Б	X				
	If "Yes" to 6b, file Form 8870	ony or midmoonly, and			' · ·					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	,					
	If "Yes," did the foundation receive any proceeds or have				76	N/A				
	Information About Officers, Directors					<u> </u>				
	and Contractors		_							
1	List all officers, directors, trustees, foundation r	(b) Title, and average	(c) Compensation (see	(d) Contributions to	(a) Eva-au					
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	se account, owances				
AT'	ACHMENT 9		0	d		0				
		į į								
					4					
2	Compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instruction	ons). If no	one, enter				
	"NONE."	T								
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expens					
,-	, ,	devoted to position	, ,	plans and deferred compensation	other all	owances				
	NONE									
		}								
										
Tota	I number of other employees paid over \$50,000 .					0				
		<u> </u>	<u> </u>	<u>· · · · · · · · · · · · · · · · · · · </u>		0-PF (2011)				
					_	· · · /				

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter	r "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of the statistical information such as the number of the statistical information.	mber of Expenses
organizations and other beneficianes served, conferences convened, research papers produced, etc	
1 THE PRIMARY ACTIVITY OF THE FOUNDATION IS TO PROVIDE	
FINANCIAL SUPPORT TO STOWERS INSTITUTE FOR MEDICAL RESEARCH	
FOR PUBLIC OUTREACH, EDUCATION, AND COMMUNICATION PROGRAMS. FINANCIAL SUPPORT IS PROVIDED TO PROGRAMS WHICH ARE APPROVED	
IN ADVANCE BY THE TRUSTEES IN THEIR ABSOLUTE DISCRETION.	
IN ADVANCE BY THE INOSTEES IN THEIR ADSOLUTE DISCRETION.	
THERE WERE NO DIRECT EXPENSES INCURRED IN MAKING THESE	
DONATIONS.	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3 NONE	
Total Add lines 1 through 3	

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ıgn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	8,596,334.
b	Average of monthly cash balances	1b	30,825.
C	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	8,627,159.
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	
3		3	8,627,159.
4	Subtract line 2 from line 1d		
		4	129,407.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,497,752.
6	Minimum investment return. Enter 5% of line 5	6	424,888.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this	part)	
1	Minimum investment return from Part X, line 6	1	424,888.
2 a	Tax on investment income for 2011 from Part VI, line 5		
b		1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		424,888.
4	Recoveries of amounts treated as qualifying distributions	4	·····
5	Add lines 3 and 4	5	424,888.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	424,888.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		0 221
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	9,321.
b	· · · · · · · · · · · · · · · · · · ·	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0.301
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	9,321.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	•
	Enter 1% of Part I, line 27b (see instructions)	5	0 201
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,321.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	culating wl	nether the foundation

THE STOWERS FOUNDATION

Page 9 Form 990-PF (2011) Part XIII Undistributed Income (see instructions) (c) (d) (a) Years prior to 2010 2011 Corpus 2010 Distributable amount for 2011 from Part XI, 424,888. Undistributed income, if any, as of the end of 2011 Enter amount for 2010 only . . . Total for pnor years 20 09 20 08 20 07 Excess distributions carryover, if any, to 2011 a From 2006 **b** From 2007 c From 2008 From 2009 From 2010 Total of lines 3a through e Qualifying distributions for 2011 from Part XII, 9,321. line 4 ▶ \$ a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 9,321. d Applied to 2011 distributable amount e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract b line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2010 Subtract line f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be 415,567. distributed in 2012 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2012. O Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2007 . . . b Excess from 2008 . . . c Excess from 2009 . . d Excess from 2010 . . .

Form 990-PF (2011)

e Excess from 2011 . . .

Pa	rt XIV Private Oper	rating Foundations	see instructions an	d Part VII-A, questic	on 9)	NOT APPLICABL
1 a	If the foundation has				rating	
	foundation, and the ruling				🏲 🗀	
b	Check box to indicate wh		private operating found		n 4942	(J)(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T	— (e) Total
	justed net income from Part I or the minimum investment	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	return from Part X for each					
b	85% of line 2a			-		
~	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 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
-	(1) Value of all assets	<u></u>				
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"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 secunties loans (section 512(a)(5))					
	or royalties)					
	public and 5 or more exempt organizations as provided in section 4942					
	(j)(3)(B)(III)					
	port from an exempt organization					
	(4) Gross investment income.		1			
Pa	Supplement at any time of	ary Information (C during the year - se	omplete this part e instructions.)	only if the found	lation had \$5,000	or more in assets
1	Information Regardin					
а	List any managers of before the close of any	the foundation who h y tax year (but only if th	nave contributed mor ney have contributed	e than 2% of the tota more than \$5,000) (S	al contributions recei See section 507(d)(2)	ved by the foundation
	NONE					
b	List any managers of ownership of a partner					y large portion of the
	NONE					
2	Information Regardin	-				
	Check here ► X if t unsolicited requests fo other conditions, comp	or funds If the found	ation makes gifts, gra	to preselected char ants, etc (see instruc	itable organizations in the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the street of the st	and does not accept or organizations under
a	The name, address, a	and telephone number	of the person to who	m applications should t	be addressed	
b	The form in which app	olications should be su	bmitted and informati	on and materials they	should include	
C	Any submission dead	lines				
d	Any restrictions or li	imitations on awards	, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	factors		- -			

Form 990-PF (2011)

Page 11

Part XV Supplementary Information (continuea)			
3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for f	uture Payment	Ţ
3 Grants and Contributions Paid During Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
a Paid during the year NONE				
NONE				
Total			▶ 3a	Nene
b Approved for future payment				7.2.77
NONE				
Tatal	J	<u> </u>	N 01:	
Total	 	<u></u>	▶ 3b	J/UNE_

Form 990-PF (2011)

Page **12**

er gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•						
d						
е						
f						
g Fees	and contracts from government agencies					
Member	ship dues and assessments		······································			
	on savings and temporary cash investments			14	19.	
	ds and interest from securities			14	2,428.	
	tal income or (loss) from real estate					
	-financed property					
	debt-financed property					
	al income or (loss) from personal property .					
	vestment income					
	loss) from sales of assets other than inventory		 			
	ome or (loss) from special events					
•	rofit or (loss) from sales of inventory					
	evenue a					
b						
				 		
		1 1				
				- 1		
е					2 447	
e Subtotal	Add columns (b), (d), and (e)				2,447.	2.44
e Subtotal Total. A e worksl	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calcu	ulations)			13	2,44
e Subtotal Total. A	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calcu	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to
e Subtotal Total. A e worksl Irt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to
e Subtotal Total. A e worksl Irt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to
e Subtotal Total. A e worksl Irt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	ited importantly to
e Subtotal Total. A e worksl Irt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
eSubtotal Total. Are worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
Subtotal Fotal. Ar worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
Subtotal Fotal. Ar worksl rt XVI- le No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
Subtotal Fotal. Ar worksl rt XVI- le No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
Subtotal Fotal. Ar worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
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eSubtotal Total. Are worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
eSubtotal Total. Ar e worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
eSubtotal Total. Are worksl rt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to
e Subtotal Total. A e worksl Irt XVI- ne No.	I Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated Relationship of Activities Explain below how each activity	ulations) to the Ac	complishment of E	xempt Purp in column (e by providing	oses e) of Part XVI-A contribu	ited importantly to

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Form 99	0-PF (2	· . 2011)	THE STO	WERS FOUN	DATION			32-617	6805	Pa	ge 13
Part 2	XVII	Information F Exempt Orga	•	ansfers To	and Transact	ions and	d Relation	ships With Non	chari	table	•
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		n any transaction o									
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	· ·	cription of transf	ers, transactions, and sha	ring arrai	ngemer	nts
		N/A				N/A		· · · · · · · · · · · · · · · · · · ·			
			 								
											
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d	escrit	foundation directly bed in section 501(o	c) of the Code (Ye	s X] No
<u>b</u> !t	"Yes	," complete the follo		T							
		(a) Name of organization	on	(0) 1	ype of organization		9	c) Description of relations	inip		
				ļ							
											
	Unde	r penalties of perjury, I dec	clare that I have exam	nined this return, in	cluding accompanying so	chedules and	statements, and t	o the best of my knowledg	e and b	elief, it	is true,
Sign	corre	ct, and complete Declaration	of preparer (other than	taxpayer) is based or	all information of which	preparer has ar	ny knowledge				
-		Warney a	\mathcal{M}_{α}	. 1 9	121/12	Tai	11+0.	_ ·	discuss		
Here		siving 6 1	IJWWW	\sim 1 $_{\nu}$	131/100	Tale	wice_	with the pr			below
	Sigi	nature of officer or trustee	,	Date		Title		(see instruction	s)? [^	Yes	No
	<u> </u>	<u> </u>		- A			I Doi:		TIL!		
Paid		Print/Type preparer	s name	Preparer's	signature		Date		PTIN		
		ERIN S. MORGA	AN	Mun	11011100	901-	<u> </u>	self-employed			5
Prepa	arer	Firm's name ▶ J	MW & ASSOC	IATES, LLO	C (7		Firm's EIN ▶ 57-1	2245	92	
Use C	Only	Firm's address ▶ 6			100					-	
	•	1	VERLAND PA			662	202	Phone no 913-4	99-4	920	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	, 1.0							2011
								۲	orm 99 (7-FF	(2011)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization	TT ON		Employer identification number
THE STOWERS FOUNDA	TION		32-6176805
Organization type (check o	ne)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated	as a private fou	ndation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a	a private foundat	tion
	501(c)(3) taxable private foundation		
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the Gene	eral Rule and a S	Special Rule See
X For an organizati	on filing Form 990, 990-EZ, or 990-PF that received, during th ny one contributor. Complete Parts I and II	e year, \$5,000 d	or more (in money or
Special Rules			
under sections 50	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 09(a)(1) and 170(b)(1)(A)(vi) and received from any one contri \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line and II	butor, during the	e year, a contribution of
during the year, t	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that total contributions of more than \$1,000 for use exclusively for represes, or the prevention of cruelty to children or animals. Con	eligious, charita	ble, scientific, literary,
during the year, of not total to more year for an exclus	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that contributions for use exclusively for religious, charitable, etc., pithan \$1,000. If this box is checked, enter here the total contributively religious, charitable, etc., purpose. Do not complete any organization because it received nonexclusively religious, charitally year.	urposes, but the outions that were of the parts unles ble, etc, contrib	ese contributions did e received during the es the General Rule outions of \$5,000 or
990-EZ, or 990-PF), but it n	nat is not covered by the General Rule and/or the Special Rules nust answer "No" on Part IV, line 2, of its Form 990, or check to 90-PF, to certify that it does not meet the filing requirements of	the box on line H	of its Form 990-EZ or on
For Paperwork Reduction Act No	otice, see the Instructions for Form 990, 990-EZ, or 990-PF	Schedule I	3 (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number 32-6176805

Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	JAMES E STOWERS 400 WEST 49TH TERRACE KANSAS CITY, MO 64112	\$50,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _	RYAN CONTILLO 4060 GLENCOE AVE., APT. 320 MARINA DEL RAY, CA 90292	\$8,220,962.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_	LAUREN CONTILLO 4711 S. DOWNING STREET CHERRY HILLS VILLAGE, CO 80113	\$8,220,962.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ALEX JOHNSON 317 W. 51ST TERRACE KANSAS CITY, MO 64112	\$8,220,962.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	LAYNE STOWERS 6534 WENONGA MISSION HILLS, KS 66208	\$8,220,963.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6 _	JAMES STOWERS, IV 6534 WENONGA MISSION HILLS, KS 66208	\$8,220,963.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution)

Name of organization THE STOWERS FOUNDATION

Employer identification number 32-6176805

Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7 ~	JAMES E STOWERS 400 WEST 49TH TERRACE KANSAS CITY, MO 64112	\$ 19,952,141.	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer Identification number 32-6176805

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	200 SHS BPRXX, 5956 SHS TWUSX			
2	22673 SHS CPTNX, 18056 SHS AMVIX			
	50269 SHS TWCVX, 600422 SHS AVANTI			
		\$_	8,220,962.	05/07/2012
a) No.			(c)	
from	(b)		FMV (or estimate)	(d)
Part I	Description of noncash property given		(see instructions)	Date received
	200 SHS BPRXX, 5956 SHS TWUSX			
3	22673 SHS CPTNX, 18056 SHS AMVIX			
_ <u> </u>	50269 SHS TWCVX, 600422 SHS AVANTI			
		 	8,220,962.	05/07/2012
		Ψ =		
a) No.			(c)	
from	(b)		FMV (or estimate)	(d)
Part I	Description of noncash property given		(see instructions)	Date received
	200 SHS BPRXX, 5956 SHS TWUSX			
4	22673 SHS CPTNX, 18056 SHS AMVIX	 j		
	50269 SHS TWCVX, 600422 SHS AVANTI			
		s_	8,220,962.	05/07/2012
a) No.			(c)	
from	(b)		FMV (or estimate)	(d)
Part I	Description of noncash property given		(see instructions)	Date received
	200 SHS BPRXX, 5956 SHS TWUSX			
5	22673 SHS CPTNX, 18056 SHS AMVIX			
	50269 SHS TWCVX, 600422 SHS AVANTI			
		\$_	8,220,963.	05/17/2012
(a) No.			(c)	
from	(b)		FMV (or estimate)	(d)
Part I	Description of noncash property given		(see instructions)	Date received
	200 cue pppyy 5056 cue muney		(100	
c	200 SHS BPRXX, 5956 SHS TWUSX 22673 SHS CPTNX, 18056 SHS AMVIX			
6	50269 SHS TWCVX, 600422 SHS AVANTI			
	JUZUS SIIS THEVA, UUU4ZZ SIIS AVANIT		8,220,963.	05/07/2012
		\$_		03/07/2012
a) No.			(0)	
from	(b)		(C)	(d)
Part I	Description of noncash property given		FMV (or estimate) (see instructions)	Date received
	120000000000000000000000000000000000000		(see manuchons)	
7	1739506.617 SHS AVANTI FUND, LLC			
7				
			19,952,141.	02/16/2012
		\$_		

Name of organization THE STOWERS FOUNDATION

Employer identification number 32-6176805

that t For o contr	rengious, charitable, etc. cotal more than \$1,000 for the yarganizations completing Part III, established by the state of \$1,000 or less for the duplicate copies of Part III if additional copies of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th	rear. Complete columns (a) enter the total of exclusively e year. (Enter this information	o section 501(c)(7), (8), or (10) organizations through (e) and the following line entry religious, charitable, etc , on once See instructions) ▶\$
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Polations hip of transferor to transferor
	i ransieree's name, address, al		Relationship of transferor to transferee

ATTACHMENT 1 PAGE 19

INVESTMENTS
CASH
INTEREST ON TEMPORARY CASH IN
NO
INTEREST
1
PART 1
FORM 990PF, PART
FORM

NET INVESTMENT	INCOME	19.	19.
REVENUE AND EXPENSES	PER BOOKS	19.	19.
			TOTAL
	DESCRIPTION	INTEREST ON CHECKING ACCOUNT	

HILL

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

NET INVESTMENT INCOME	2,428.	2,428.
REVENUE AND EXPENSES PER BOOKS	2,428.	2,428.
		TOTAL
DESCRIPTION	AMERICAN CENTURY DIVIDENDS	

FORM 990PF, PART I - LEGAL FEES

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ATTACHMENT 3 PAGE 21

CHARITABLE PURPOSES_	8,876.	8,876.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	8,876.	8,876.
REVENUE AND EXPENSES PER BOOKS	17,752.	17,752.
		TOTALS
DESCRIPTION	LEGAL FEES	

- TAXES FORM 990PF, PART I

CHARITABLE	425.	425.
NET INVESTMENT INCOME	425.	425.
REVENUE AND EXPENSES PER BOOKS	850.	850.
		TOTALS
DESCRIPTION	1023 FILING FEE	

425.

ATTACHMENT 4 PAGE 22

- OTHER EXPENSES PART I FORM 990PF, REVENUE AND

NET INVESTMENT INCOME

CHARITABLE PURPOSES

DESCRIPTION BANK FEE

EXPENSES PER BOOKS

41.

TOTALS

21.

ATTACHMENT 5 PAGE 23

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

ENDING BOOK VALUE

ATTACHMENT

ENDING

1,603,030.

1,603,030.

1,610,965. 1,610,965.

AMERICAN CENTURY BOND FUNDS

DESCRIPTION

US OBLIGATIONS TOTAL

ATTACHMENT 6 PAGE 24

ATTACHMENT 7 PAGE 25

ATTACHMENT

- CORPORATE STOCK FORM 990PF, PART II

DESCRIPTION

AMERICAN CENTURY SECURITIES AVANTI FUND, LLC

TOTALS

ENDING BOOK VALUE

ENDING FMV 4,760,449.54,386,357.

59,146,806.

59,454,351.

5,037,973.

CONTRIBUTORS
SUBSTANTIAL
- NEW
10
LINE
VII-A,
PART
990PF,
FORM

THE STOWERS FOUNDATION

DIRECT PUBLIC SUPPORT	50,000.	112 8,220,962.	112 8,220,962.	12 8,220,962.	112 8,220,963.	8,220,963.	19,952,141.	61, 106, 953.
DATE	06/17/2011	05/07/2012	05/07/2012	05/07/2012	05/17/2012	05/07/2012	02/16/2012	JTION AMOUNTS
NAME AND ADDRESS	JAMES E STOWERS 400 WEST 49TH TERRACE KANSAS CITY, MO 64112	RYAN CONTILLO 4060 GLENCOE AVE., APT. 320 MARINA DEL RAY, CA 90292	LAUREN CONTILLO 4711 S. DOWNING STREET CHERRY HILLS VILLAGE, CO 80113	ALEX JOHNSON 317 W. 51ST TERRACE KANSAS CITY, MO 64112	LAYNE STOWERS 6534 WENONGA MISSION HILLS, KS 66208	JAMES STOWERS, IV 6534 WENONGA MISSION HILLS, KS 66208	JAMES E STOWERS 400 WEST 49TH TERRACE KANSAS CITY, MO 64112	TOTAL CONTRIBUTION AMOUNTS

AND TRUSTEES
~
LIST OF OFFICERS, DIRECTORS,
OFFICERS,
OF.
LIST
1
VIII
PART
FORM 990PF, PART VIII
FORM

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0
CONTRIBUTIONS E TO EMPLOYEE BENEFIT PLANS	0	0	0	0
COMPENSATION	0	O	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 2.00	TRUSTEE 2.00	TRUSTEE 5.00	GRAND TOTALS
NAME AND ADDRESS	VIRGINIA G STOWERS 6731 W 121ST STE 206 LEAWOOD, KS 66209	LINDA STOWERS 6731 W 121ST STE 206 LEAWOOD, KS 66209	WENDY B MARVIN 6731 W 121ST STE 206 LEAWOOD, KS 66209	