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Form **990-PF** 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

<u>F</u>	or c	aler	idar year 2012 or tax yea	r beginning				, and e	nding					
Ī	Nan	10 01	f foundation .				-			A Em	ployer identification	on number		
	F	ΙV	E MILE CHIL	DRENS	FOUNDA	TIO	N			4	8-119887	5		
ī	Nurr	ber a	and street (or P O box number	If mail is not de	elivered to street	t address			Room/suite	B Tele	ephone number			
_	С	<u>/o</u>	JOHN T. AR	CHER,	927 MI	LIT	ARY			6	20-856-4	400		
(own, state, and ZIP code						<u> </u>	C If ex	emption application is	pending, chec	k here	
_	В.	AX	TER SPRINGS	, KS	66713]			_	_
G	C	heck	call that apply	Initial retur			Initial return of a fo	rmer public c	harity	D 1. F	Foreign organizatio	ns, check hei	re ⊾	┙
			<u></u>	J Final return		<u> </u>	Amended return			2.5	oreign omanizations r	meeting the 859	% test	_
-	_			Address ch			Name change			:	oreign organizations r check here and attach	computation	• tast,	┙
H	C	٦.					rivate foundation	4			rivate foundation s		_	\neg
	En		ction 4947(a)(1) nonexer arket value of all assets at				axable private founda nod X Cash	$\neg \neg \neg$		1	ler section 507(b)(_
,			Part II, col. (c), line 16)	end of year		ing men ther (sp		Accr	uai	1 .	ne foundation is in a			\neg
	•			5.163.			must be on cash l	pasis.)		uno	ler section 507(b)(T)(B), CHECK	nere 🖊	
l li	.,,	rt i	Analysis of Revenue a	nd Expenses) Revenue and	(b) Net in	veetment	1	c) Adjusted net	(d) D	sbursements	_
			(The total of amounts in coll necessarily equal the amou	umns (b), (c), ar nts in column (a	nd (d) may not a))	exi	penses per books	inco		\ \ \	income		itable purposes h basis only)	
		1	Contributions, gifts, gran	nts, etc , rece	ıved	3	,286,176.			1	N/A			
		2	Check I if the foundate		o attach Sch B									
		3	Interest on savings and temp cash investments	oorary			7.		7.			STATE	MENT 1	Ĺ
		4	Dividends and interest fr	om securities	3									
		5a	Gross rents					······		ļ			·····	
		b	Net rental income or (loss)			-				ļ				
(73)	a	6a	Net gain or (loss) from sale of Gross sales price for all	f assets not on	line 10			***************************************	······	ļ				
5	Revenue	70	assets on line 6a	- D-+N/ I 0					0.	 			····	
1 8 2013	8	7 8	Capital gain net income (from Net short-term capital ga			-			· ·	-	RECE	IVED		
		9	Income modifications	1111								- V &		
	ľ	10a	Gross sales less returns								NOV 1	4 00.40	18.	
2		b	Less Cost of goods sold								NOV 1	2 2013	3	
		C	Gross profit or (loss)			L							コ転	
À		11	Other income								OGDE	N. UT		
Z –	\neg		Total. Add lines 1 through	gh 11		3	,286,183.		7.	ļ	···			
SCANNED NOV		13	Compensation of officers, dia		s, etc		0.		0.					<u>.</u>
T	- 1	14	Other employee salaries	-			918,658.		0.	ļ		-) .
	ra l		Pension plans, employee Legal fees	e Denents			· · · · · ·	-						_
			Accounting fees	ST	MT 2		846.		0.				0) .
	Š		Other professional fees							-		1-	<u> </u>	•
	Š		Interest											
	ia i	18	Taxes	ST	'MT 3		87,041.		0.				0) .
	nist	19	Depreciation and depleti	on			29,425.		0.					
	Ē	20	Occupancy				42,300.		0.				0) .
	Ă۱	21	Travel, conferences, and	-			3,015.		0.				0) .
	(0)	22	Printing and publications				704 144					-		
	ē	23	Other expenses		MT 4	<u></u>	,704,144.		0.			 	0) <u>.</u>
	erat	24	Total operating and adm			1 2	705 420		0				0	
	ð	25	expenses. Add lines 13	-			,785,429. 0.		0.	ļ		-) <u>.</u>
	- 1		Contributions, gifts, gran Total expenses and disl					···		<u> </u>				<u>, .</u>
		20	Add lines 24 and 25			2	,785,429.		0.			1	n).
_	1	27	Subtract line 26 from line	e 12			, ,	··		1				÷
			Excess of revenue over expe		rsements		500,754.							
			Net investment income						7.		- 			,,,,
		r	Adjusted not income ///	nogativa enter	0.1			······································			N/A	I		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Ena oi	year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	1,532,893.	1,994,689.	1,994,689.
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less allowance for doubtful accounts ▶			
4 Pledges receivable ►			
Less allowance for doubtful accounts ▶		İ	
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other	-		
disqualified persons			
100 00F			······································
7 Other notes and loans receivable Less allowance for doubtful accounts 190,835.	180,599.	190,835.	190,835.
	100,333.	130,033.	1707033.
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
9 Prepaid expenses and deferred charges			
10a investments - 0.5 and state government obligations			- -
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment basis ► 628, 100.			
Less accumulated depreciation STMT 5 238,461.	399,064.	389,639.	389,639.
15 Other assets (describe ▶		- '	
16 Total assets (to be completed by all filers)	2,112,556.	2,575,163.	2,575,163.
17 Accounts payable and accrued expenses	2,112,556. 52,838.	14,691.	
18 Grants payable		,	
Deterred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe)			
23 Total liabilities (add lines 17 through 22)	52,838.	14,691.	
Foundations that follow SFAS 117, check here	327030.	14/071.	
·			
and complete lines 24 through 26 and lines 30 and 31. Unrestricted			
24 Unrestricted			
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	2,059,718.	2,560,472.	
30 Total net assets or fund balances	2,059,718.	2,560,472.	
31 Total liabilities and net assets/fund balances	2,112,556.	2,575,163.	
Part III Analysis of Changes in Net Assets or Fund Ba	lances		
Fart RE Analysis of Onlinges in Net Assets of Fund De			
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(must agree with end-of-year figure reported on prior year's return)		1	2,059,718.
2 Enter amount from Part I, line 27a		2	500,754.
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3		4	2,560,472.
5 Decreases not included in line 2 (itemize)		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	2,560,472.
Tarth, ou	1011		Form 990-PF (2012)

	arehouse,	nd(s) of property sold (e g or common stock, 200 shs	, real estate, MLC Co)		P -	ow acquired Purchase Donation		acquired day, yr)	(d) Date sold (mo , day, yr)
1a					L				***
b NC	ONE	 -							
C									
d									
<u>e</u>					<u> </u>				
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss) us (f) minus (
<u>a</u>	1				_				
<u>b</u>	<u> </u>								
<u>C</u>	 								
<u>d</u>	 								
Complete only for accets observe	100 0010 10	solumn (h) and sured but	 	40/04/00					_
Complete only for assets show	Т .	· · · · · · · · · · · · · · · · · · ·						Col (h) gain not less than	
(i) F M V as of 12/31/69		J) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		·	Losses	s (from col (I	h))
<u> </u>	↓				_				
<u>b</u>	↓								
<u> </u>									
<u>d</u>	1	· · · · · · · · · · · · · · · · · · ·							
<u>e</u>	<u> </u>								
2 Capital gain net income or (net c	apital loss)	If gain, also enter If (loss), enter -0-	in Part I, line In Part I, line	7 7	} [2			
Net short-term capital gain or (lo	ss) as defi	•							
If gain, also enter in Part I, line 8			J (J)						
If (loss), enter -0- in Part I, line 8	3	•			<u> </u>	3			
Part V Qualification \	Jnaer S	ection 4940(e) for	Reduced	lax on Net	Inve	stment In	come		
f section 4940(d)(2) applies, leave t Was the foundation liable for the sec	•								
		section 4940(e) Do not co	mplete this pa	rt	_				Yes X No
f "Yes," the foundation does not qual Enter the appropriate amount in		section 4940(e) Do not co	mplete this pa	rt	_				
1 Enter the appropriate amount in (a) Base period years	each colur	section 4940(e) Do not co nn for each year, see the in (b)	mplete this pa istructions be	rt fore making any e	ntries (c)			Distrib	(d)
l Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn	each colur	section 4940(e) Do not co nn for each year, see the in	mplete this pa istructions be tributions	rt	ntries (c)			Distrib (col (b) divi	(d) ution ratio ided by col (c))
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2011	each colur	section 4940(e) Do not co nn for each year, see the in (b)	mplete this paristructions better tributions	rt fore making any e	ntries (c)		0.	Distrib (col (b) divi	(d) ution ratio ided by col (c))
1 Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2011 2010	each colur	section 4940(e) Do not co nn for each year, see the in (b) Adjusted qualifying dist	mplete this pa istructions be tributions 0 •	rt fore making any e	ntries (c)	(0.	Distrib (col (b) divi	(d) ution ratio ided by col (c)) . 0 0 0 0 0
Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2011 2010 2009	each colur	section 4940(e) Do not co mn for each year, see the in (b) Adjusted qualifying dist	mplete this parastructions betteributions 0. 0. 1,804.	rt fore making any e	ntries (c)	(0.	Distrib (col (b) divi	(d) ution ratio ided by col (c)) . 0 0 0 0 0 0 . 0 0 0 0 0 0
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Enter the appropriate amount in (a) Base period years Calendar year (or tax year beginn 2011 2010 2009	each colur	section 4940(e) Do not co mn for each year, see the in (b) Adjusted qualifying dist	mplete this parastructions betteributions 0. 0. 1,804.	rt fore making any e	ntries (c) ncharit	(0.	Distrib (col (b) divi	(d) ultion ratio ided by col (c)) • 0 0 0 0 0 0 • 0 0 0 0 0 0 • 0 0 0 0
Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007	each colur	section 4940(e) Do not co mn for each year, see the in (b) Adjusted qualifying dist	tributions 0. 0. 1,804. 2,433.	rt fore making any e	ntries (c) ncharit	(0.	Distrib (col (b) divi	(d) ultion ratio ided by col (c)) • 0 0 0 0 0 0 • 0 0 0 0 0 0 • 0 0 0 0
Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d)	each colur	section 4940(e) Do not co mn for each year, see the in (b) Adjusted qualifying dist	tributions 0. 1,804. 2,433. 2,430.	ort fore making any e Net value of no	ntries (c) ncharit	878,82°	0.	Distrib (col (b) divi	(d) ultion ratio ided by col (c)) • 0 0 0 0 0 0 • 0 0 0 0 0 0 • 0 0 0 0
Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the	each coluring in)	section 4940(e) Do not co mn for each year, see the in (b) Adjusted qualifying dist 30 1 2	tributions 0. 1,804. 2,433. 2,430.	ort fore making any e Net value of no	ntries (c) ncharit	878,82°	0.	Distrib (col (b) divi	(d) ution ratio ided by col (c)) .000000 .000000 .000000 .025523
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Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	each coluring in) 5-year basence if less	section 4940(e) Do not comn for each year, see the in (b) Adjusted qualifying dist 30 1 2 see period - divide the total of than 5 years	mplete this parastructions before tributions 0. 0. 1,804. 2,433. 2,430.	ort fore making any e Net value of no	ntries (c) ncharit	878,82°	0.	Distrib (col (b) divi	(d) ution ratio ided by col (c)) .000000 .000000 .000000 .025523
Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	each coluring in) 5-year basence if less	section 4940(e) Do not comn for each year, see the in (b) Adjusted qualifying dist 30 1 2 see period - divide the total of than 5 years	mplete this parastructions before tributions 0. 0. 1,804. 2,433. 2,430.	ort fore making any e Net value of no	ntries (c) ncharit	878,82°	2	Distrib (col (b) divi	(d)
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Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exists Enter the net value of noncharita Multiply line 4 by line 3 Enter 1% of net investment income	5-year basence if less	section 4940(e) Do not comin for each year, see the in (b) Adjusted qualifying dist 30 1 2 see period - divide the total of than 5 years	mplete this parastructions before tributions 0. 0. 1,804. 2,433. 2,430.	ort fore making any e Net value of no	ntries (c) ncharit	878,82°	2 3 4	Distrib (col (b) divi	(d) ultion ratio ided by col (c)) .000000 .000000 .000000 .025523 .025523
Base period years Calendar year (or tax year beginn 2011 2010 2009 2008 2007 Total of line 1, column (d) Average distribution ratio for the	5-year basence if less ble-use ass	section 4940(e) Do not comin for each year, see the in (b) Adjusted qualifying distinction and the following distinction are period - divide the total of than 5 years sets for 2012 from Part X, I	mplete this parastructions before tributions 0. 0. 1,804. 2,433. 2,430.	rt fore making any e Net value of no	ntries (c) ncharit	878,82°	0. 0. 0. 0. 7. 2 3	Distrib (col (b) divi	(d) ultion ratio ided by col (c)) .000000 .000000 .000000 .025523 .025523

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1		1990-PF (2012) FIVE MILE CHILDRENS FOUNDATION				<u> 1198</u>			Page 4
Date of ruling or determination letter	Pa	rt VI Excise Tax Based on Investment Income (Section 4940)	(a), 4940(b), 4940)(e), or 4	1948	- see i	nstru	ıctio	ns)
b Domestic Goundations that meet the section 4947(e) requirements in Part V, check here	1a	Exempt operating foundations described in section 4940(d)(2), check here and ent	er "N/A" on line 1)		-			
b Domestic Goundations that meet the section 4947(e) requirements in Part V, check here		Date of ruling or determination letter (attach copy of letter if neces	ssary-see instructions)						
a All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part I, Ine 12, col. (b) 2	b			•	1				0.
2 Tax under section S11 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 5 Credits Pyrements 2 012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations -1 tax withheld at source. 5 B 5 Credits Pyrements 2 012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations -1 tax withheld at Source. 5 B 6 C 6 C 6 S 7 O. 8 Exempt foreign organizations -1 tax withheld at Source. 6 B 7 To total credits and payments Add lines 6 through 64 8 Enter any penalty for underpayment of estimated tax. Exhibit the state of the second organizations -1 tax does. If the total of lines 5 and 6 is more than line 7, enter amount owed 8 Tax does. If the total of lines 5 and 6 is more than line 7, enter amount owed 9 O. 10 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment of the line of the lines o		of Part I, line 27b							
2 Tax under section S11 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 5 Credits Pyrements 2 012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations -1 tax withheld at source. 5 B 5 Credits Pyrements 2 012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations -1 tax withheld at Source. 5 B 6 C 6 C 6 S 7 O. 8 Exempt foreign organizations -1 tax withheld at Source. 6 B 7 To total credits and payments Add lines 6 through 64 8 Enter any penalty for underpayment of estimated tax. Exhibit the state of the second organizations -1 tax does. If the total of lines 5 and 6 is more than line 7, enter amount owed 8 Tax does. If the total of lines 5 and 6 is more than line 7, enter amount owed 9 O. 10 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid 1 Diverpayment of the line of the lines o	C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	of Part I, line 12, col. (b)	J					
3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) fruits and taxable foundations only Others enter -0-) 1 Taz based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 5 Credition Pyments 2 2012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations - tax withheld at source 1 Tax palaw that policization for credition and a source 1 Tax palaw that policization creditions of the fire of the fire masses of the fire of the fire masses of the fire of the fire masses of the fire					2				0.
4 0.0.5 Tax based on investment Income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/Pyments 2 2012 estimated tax payments and 2011 overpayment credited to 2012 6 Exempt foreign organizations - Lax withheld at source 6 Tax paid with application for extension of time to the (from 8868) 6 B B B B B B B B B B B B B B B B B B	_	•	· · · · · · · · · · · · · · · · · · ·						
S Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0-6 Credits/Payments 2 2012 estimated tax payments and 2011 overpayment credited to 2012 B Exempt foreign organizations - Lax withheld at source Tax paid with application for extension of time to the (Form 8868) B Eackup withholding erroneously withheld B Eackup withholding erroneously withheld B Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached B Tax due. If the lotal of lines 5 and 8 is more than line 7, enter amount owed D Tax due. If the lotal of lines 5 and 8 is more than line 7, enter amount owed D Tax due. If the lotal of lines 5 and 8 is more than line 7, enter amount owed D Tax HIV-A Is Statements Regarding Activities Is During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? D Old is spend more than \$100 dump the year (either directly or indirectly) for political puriposes (see instructions for defination)? If the answer is "Yes" to Taor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities C Did the foundation lie Form 112-POIL for this year? Enter the reimbursement (if any) paid by the foundation duming the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . Enter the reimbursement (if any) paid by the foundation duming the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . Enter the amount (if any) paid by the foundation duming the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . Enter the reimbursement (if any) paid by the foundation duming the year for political expenditure tax imposed on foundation managers ▶ \$ 0 . Enter the reimbursement (if any) paid by the foundation form the foundation foundation foundation foundation foundation foundation foundation foundation foundation f	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ers enter -0-)						
6 CreditcPayments a 2012 estimated tax payments and 2011 overpayment credited to 2012 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8988) d Seakou withholding erroneously withheld d Seakou withholding erroneously withheld c Set I and the state of the stat	5								
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2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 8 By language in the governing instrument, or 8 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? 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. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NONE 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 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 2012 or the taxable year beginning in 2012 (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	0		re tax imposed on found	tation					
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10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10 X				,			g		X
	10			esses					
		<u> </u>				Forr		-PF	2012)

0

Total number of other employees paid over \$50,000

Form **990-PF** (2012)

0.

All other program-related investments. See instructions

Total. Add lines 1 through 3

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Part X Minim	um Investment Return (All domestic f	oundations must complete this part. For	eign foundations, see instr	uctions.)	
1 Fair market value of	assets not used (or held for use) directly in carryii	g out charitable, etc., purposes		· · · · · · · · · · · · · · · · · · ·	
	r market value of securities		1a	0.	
b Average of monthly	cash balances		1b	_	
c Fair market value of			10		
d Total (add lines 1a.	Total (add lines 1a, b, and c)				
•	or blockage or other factors reported on lines 1a a	nd			
1c (attach detailed e	-	1e	0.		
,	Iness applicable to line 1 assets		2	0.	
3 Subtract line 2 from	• •		3	0.	
-	or charitable activities Enter 1 1/2% of line 3 (for g	reater amount, see instructions)	4		
	aritable-use assets. Subtract line 4 from line 3 Er	•	5	0.	
	nt return. Enter 5% of line 5		6	0.	
Part XI Distrib	putable Amount (see instructions) (Sections)				
1 Minimum investmen	nt return from Part X, line 6		1	0.	
2a Tax on investment i	ncome for 2012 from Part VI, line 5	2a			
	? (This does not include the tax from Part VI.)	2b			
c Add lines 2a and 2b		<u> </u>	20	0.	
	it before adjustments. Subtract line 2c from line 1		3	0.	
	nts treated as qualifying distributions		4	0.	
5 Add lines 3 and 4			5	0.	
6 Deduction from dist	ributable amount (see instructions)		6	0.	
	nt as adjusted Subtract line 6 from line 5 Enter he	re and on Part XIII, line 1	7	0.	
	ring Distributions (see instructions)				
1 Amounts paid (inclu	iding administrative expenses) to accomplish char	table, etc , purposes			
a Expenses, contribut	ions, gifts, etc - total from Part I, column (d), line	26	1a	0.	
b Program-related inv	estments - total from Part IX-B		1b	0.	
2 Amounts paid to ac	quire assets used (or held for use) directly in carry	ng out charitable, etc., purposes	2		
3 Amounts set aside t	or specific charitable projects that satisfy the				
a Suitability test (prio	r IRS approval required)		3a		
	st (attach the required schedule)		3b		
	ions. Add lines 1a through 3b Enter here and on f	Part V, line 8, and Part XIII, line 4	4	0.	
· -	alify under section 4940(e) for the reduced rate of				
income Enter 1% o			5	0.	
	distributions. Subtract line 5 from line 4		6	0.	
	on line 6 will be used in Part V, column (b), in subs	equent years when calculating whether the for	<u> </u>		
	ction of tax in those years				

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Part XIII Undistributed Income (see Instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,		·		
line 7				0.
2 Undistributed income, if any, as of the end of 2012		, ,		
a Enter amount for 2011 only			0.	
b Total for prior years	·			
		0.		
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008 12,433.				
c From 2009 301,804.				
d From 2010				
e From 2011				
f Total of lines 3a through e	314,237.			
4 Qualifying distributions for 2012 from				
Part XII, line 4 ► \$ 0 .			•	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				0.
e Remaining amount distributed out of corpus	0.	· · · · · · · · · · · · · · · · · · ·		
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	314,237.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of		, , , , , , , , , , , ,		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.	······		
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	314,237.	·····	······	
O Analysis of line 9	1			
a Excess from 2008 12,433. b Excess from 2009 301,804.				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				L , _

Form 990-PF (2012) FIVE MILE CHILDRENS FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future 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 during the year						
NONE						
	-	-	^			
Total			▶ 3a	0.		
b Approved for future payment						
NONE						
-						
7-1-1			▶ 3h			
Total			▶ 3b i	0.		

Enter gross amounts unless otherwise indicated	Unrelated b	ousiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		∞de	Amount	
a					
b			 		
C					<u></u>
d					
e					
·					<u>-</u>
g Fees and contracts from government agenc	eles				
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			14	7.	
Investments	-		14	<u>'-•</u>	
4 Dividends and interest from securities	 				
5 Net rental income or (loss) from real estate			-		
a Debt-financed property	-		 		
b Not debt-financed property			 		
6 Net rental income or (loss) from personal					
property					
7 Other investment income 8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events		·			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
ab	1		 		
c	1		 		
d	i i				
e					
12 Subtotal Add columns (b), (d), and (e)		0.		7.	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		· · · · · · · · · · · · · · · · · · ·	13	7
(See worksheet in line 13 instructions to verify calc	culations)			· · ·	
	tivities to the Accom	plishment of Ex	kempt Pi	urposes	
Line No. Explain below how each activity for	r which income is reported in c	olumn (e) of Part XVI-A	contributed	importantly to the accom	olishment of
the foundation's exempt purposes	(other than by providing funds	for such purposes)			
					
				·-	
					
					
			·		· =
					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

						$\overline{}$		
1		•	rectly engage in any of the following	•			Yes	No
	the Code	(otḥer than section 501(c)	(3) organizations) or in section 52	27, relating to political organi	zations?			
a	Transfers	s from the reporting founda	ation to a noncharitable exempt or	ganization of		,		
	(1) Cast	h				1a(1)		X
	(2) Othe	er assets				1a(2)		X
b	Other tra	nsactions						
	(1) Sale:	s of assets to a noncharital	ble exempt organization			1b(1)		<u>X</u>
	(2) Puro	chases of assets from a nor	ncharitable exempt organization			1b(2)		X
	(3) Rent	tal of facilities, equipment, (or other assets			1b(3)		X
	(4) Rein	mbursement arrangements				1b(4)		X
	(5) Loar	ns or loan guarantees				1b(5)		X
	(6) Perf	ormance of services or me	mbership or fundraising solicitation	ons		1b(6)		X
C	Sharing	of facilities, equipment, mai	iling lists, other assets, or paid em	nployees		10		X
	-			· ·	rays show the fair market value of the goods,	other ass	ets,	
		•	-	* *	e in any transaction or sharing arrangement,			
			other assets, or services received					
a) L	ine no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	ents
			N/A	· · · · · · · · · · · · · · · · · · ·				
			,					
		-						
	<u> </u>							
_	-							
								
					<u> </u>			
								
		·						
<u> </u>	1-41-4-				<u> </u>			
2 a			ly affiliated with, or related to, one		ations described	_ 1,,	T	٦
			than section 501(c)(3)) or in section	tion 52/7	L	Yes	<u> </u>	No
D	if Yes, c	complete the following sche (a) Name of org		(h) Tune of examination	(a) Description of relations			
		N/A	anization	(b) Type of organization	(c) Description of relations	anp		
		IV / A		 				
		<u>.</u>						
			· - · · · · · · · · · · · · · · · · · ·	 				
				 				
	Unde	or nonalties of nanuny I declare t	that I have examined this entire include	a a a a a manuar a a hadulaa and a	statements, and to the best of my knowledge			
e:	0.04 6				tion of which property has any knowledge	ay the IRS of	iscuss	this
	gn re	900 1	1/4.	l.a —	sh	own below	(see ins	tr)?
	 	Mely	Mass	_ 11-7-13	CHAIRMAN	X Yes	L	J No
	Sig	nature of officer or trustee		Date	Title			
		Print/Type preparer's na	me Preparer's s	ignature	Date Check If PTIN			
ь.	اما	\		11 ~ 1	self- employed			
	id	MICHAEL J.				1337		
	eparer	Firm's name MIC	HAEL J. MESSINA	A, P.C.	Firm's EIN ► 43-1	5795	03	
US	e Only							
		Firm's address ► 11						
		KA	NSAS CITY, MO 6	4114-5734	Phone no 816-	<u> 333–</u>	<u>970</u>	7
					_			

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

\$

2012

48-1198875 FIVE MILE CHILDRENS FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to

religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

FIVE MILE CHILDRENS FOUNDATION

48-1198875

Part | Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BEBE DUNNICLIFFE CHARITABLE LEAD TRUST 1 C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$64,348.	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	TRUST C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$85,671.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WILLIAM A. ABERNATHY CHARITABLE AGENCY C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$670,812.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	WILLIAM A. ABERNATHY CHARITABLE LEAD TRUST C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$ <u>1,362,254.</u>	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
5	WILLIAM A. ABERNATHY TESTAMENTARY CHARITABLE TRUST C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$ 925,362.	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
6	MARK LUMBARD 1217 CAPE CORAL PKWY E CAPE CORAL, FL 33904	\$18,000.	Person X Payroll

Name of organization

Employer identification number

FIVE MILE CHILDRENS FOUNDATION

48-1198875

Part I	Contributors	(see instructions). Use duplicate co	pies of Part I if additiona	space is needed
--------	--------------	-------------------	---------------------	-----------------------------	-----------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	ELIZABETH ANN BRANDOM CHARITABLE LEAD TRUST AGENCY C/O COMMUNITY BANK OF RAYMORE PO BOX 200 RAYMORE, MO 64083	\$\$ <u></u>	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	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
	Trumo, dudinosa, uno Ele T T	\$	Person Payroll Ocomplete 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 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
	Training ductions, unto air T 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
23452 12-2	1-12	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2012)

Employer identification number

FIVE MILE CHILDRENS FOUNDATION

48-1198875

Part II	Noncash.Property (see instructions). Use duplicate copies of Pa	art 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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

FIVE M	ILE CHILDRENS FOUNDATI	ON		48-1198875			
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc.	he following line entry. For organization c., contributions of \$1,0 <mark>00 or less f</mark> or t	s completing Part III, enter				
(a) No	Use duplicate copies of Part III if addition	al space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
-				-			
	- y	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	sferor to transferee			
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
		(e) Transfer of gift					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	sferor to transferee			
(-) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT
SOURCE				AMOUNT
AMERICAN BANK			_	7
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	7
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
PROFESSIONAL FEES	846.	0.		C
TO FORM 990-PF, PG 1, LN 16B	846.	0.		C
FORM 990-PF	TAX		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
PAYROLL TAXES OTHER TAXES	72,577. 14,464.			0
TO FORM 990-PF, PG 1, LN 18	87,041.	0.		0
FORM 990-PF	OTHER E	XPENSES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABI E PURPOSES
AUTO EXPENSE CAMP SUPPLIES CONTRACT LABOR INSURANCE OFFICE EXPENSE PROGRAM EXPENSES	219,543. 850,497. 200. 159,376. 6,975. 196,997.	0. 0. 0. 0.		
REPAIRS & MAINTENANCE UTILITIES	75,080. 162,112.			(

FIVE MILE CHILDRENS FOUNDAT	ION		48-1198875
TELEPHONE WASTE DISPOSAL	22,087. 11,277.	0.	0.
TO FORM 990-PF, PG 1, LN 23	1,704,144.	0.	0.

FORM 990-PF DEPRECIATION OF ASSE	CTS NOT HELD FOR	INVESTMENT	STATEMENT 5
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
AUTOMOBILE	24,400.	24,400.	0.
LAND, BUILDINGS AND EQUIPMENT	311,723.	0.	311,723
TRACTOR	49,750.	49,750.	0.
EQUIPMENT	2,712.	2,712.	0.
BUS	2,500.	2,500.	0.
HORSE TRAILER	6,500.	6,500.	0.
KUBOTA RTV 900-W	12,300.	12,300.	0.
BUSHWACKER SIDEBOOM	20,700.	20,700.	0.
TOYOTA 4RUNNER	.26,937.	16,135.	10,802.
COMPUTER - TREEHOUSE	972.	916.	56.
COMPUTER - TREEHOUSE	1,176.	1,108.	68.
COPY MACHINE - TREEHOUSE PLAYGROUND EQUIPMENT -	2,135.	2,012.	123.
TREEHOUSE	29,606.	23,000.	6,606
2008 TOYOTA PICKUP	22,097.	15,060.	7,037.
CLASSROOM FURNITURE -	22,057.0	10,000	,,00,
TREEHOUSE	8,602.	6,683.	1,919.
2009 ТОУОТА	16,488.	12,685.	3,803.
2009 FORD VAN	20,514.	14,606.	5,908.
FORD DIGGER TRUCK	10,000.	7,120.	2,880.
2011 FORD F-250 TRUCK	38,988.	20,274.	18,714.
2012 - LOT 10 BLOCK 9 BAXTER	•	·	•
SPRINGS KS	20,000.	0.	20,000.
TOTAL TO FM 990-PF, PART II, LN 14	628,100.	238,461.	389,639.

TO FORM 990-PF, PART IX-A, LINE 1

	ST OF OFFICERS, D D FOUNDATION MANA		STATI	EMENT 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JOHN T ARCHER 927 MILITARY BAXTER SPRINGS, KS 66713	CHAIRMAN 2.00	0.	0.	0.
JAMES C CHRISTMAN 110 HUGHES HALL, 1701 SOUTH BROADWAY PITTSBURG, KS 66762	DIRECTOR	0.	0.	0.
JIM HUND PO BOX 54390 LUBBOCK, TX 79453	DIRECTOR 1.00	0.	0.	0.
MICHAEL J MESSINA 111 W 75TH STREET KANSAS CITY, MO 64114	DIRECTOR 1.00	0.	0.	0.
DENNIS BURKE 1520 CLEVELAND BAXTER SPRINGS, KS 66713	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.
FORM 990-PF SUMMARY OF DI	RECT CHARITABLE A	CTIVITIES	STATI	EMENT 7
ACTIVITY ONE MEEKLONG CAMPS DURING SUMMER MON CHILDREN ADDITIONAL LEARNING EXP CONSIST OF THERAPUTIC HORSEBACK & CRAFTS.	ERIENCES. ACTIVI	TIES		

EXPENSES

2,481,551.

2012 DEPRECIATION AND AMORTIZATION REPORT FORM $990-\mathrm{PF}\ \mathrm{PAGE}\ 1$

990-PF

Current Year Deduction		Ó	0	0	o	0	Ó	290.	549.	924.	1,775.	112.	135.	246.	2,642.	1,875.	767.
Current Sec 179	<u> </u>		0	<u>.</u>				<u></u>									
Accumulated Depreciation		17,080.	17,080.		24,875.	1,356.	1,250.	6,210.	11,751.	19,776.	14,360.	804.	973.	1,766.	20,358,	13,185.	5,916.
Basis For Depreciation		17,080.	17,080.	311,723.	24,875.	1,356.	1,250.	6,500.	12,300.	20,700.	26,937.	972.	1,176.	2,135.	29,606.	22,097.	8,602.
Reduction In Basis		7,320.	7,320.		24,875.	1,356.	1,250.										
Bus % Excl			<u></u>			•		**.				<u> </u>					
Unadjusted Cost Or Basis		24,400.	24,400.	311,723.	49,750.	2,712.	2,500.	6,500.	12,300.	20,700.	26,937.	972.	1,176.	2,135.	29,606.	22,097.	8,602.
Se e		17			13	17	17	17	17	17	77 77	17	17	17	17	21	17
Life		00*5			4.00	00.7	00*5	00.	00.	00.	00.3	00.5	00.5	00.9	00.	00.5	00.
Method		200DB		. 7	300DB	200DB	adoos	200DB	SOODE.	200DB	adoo?	OODB	ECOODS	200DB	1000B	SOODB	adoo?
Date Acquired		030603200085.00		123102L	071403200DB7.00	071103200DB7.00	022504200DB5.0	060205200DB7.0	0728052000117.00	081905	070207200DB5.00	080608200DB5.00	103108200DB5.00	111308200DB5.00	0527082	102708200DB5.00	061708200DB7.00
Description	TRANSPORTATION EQUIPMENT	L ECE	Z	OTHER LAND, BUILDINGS AND 2EQUIPMENT	3TRACTOR	4EQUIPMENT	5BUS	6HORSE TRAILER	TKUBOTA RTV 900-W	8BUSHWACKER SIDEBOOM081905200DB7.00	9TOYOTA 4RUNNER	l E		I L	REQUIPMENT - TREEHOU052708200DB7.00	ra PICKUP	- TREEHOUSE
Asset		,l		2	m	4	Ŋ	9	<u> </u>	∞	סת	10	, -1	12	₩.	14	15

228102 05-01-12

(D) - Asset disposed

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Current Year Deduction	1,775.	1,920.	29,425.		
Current Sec 179	<u></u>		0 0		
Accumulated Depreciation	10,910.	5,200.	157,155.		
Basis For Depreciation	16,488.	38,988, 20,000.	593,299.		
Reduction in Basis		-	27,481. 34,801.		
Bus % Excl				········	
Unadjusted Cost Or Basis	16,488.	10,000. 38,988. 20,000.	603,700. 628,100.		
No o	21	17			
Life	00.	00.			
Method	052109200DB5.00 082510200DB5.00	1001110200DB5.00 021811200DB5.00 020912L			
Date Acquired	052109	1001102 0218112 020912L			
Description	162009 TOYOTA 172009 FORD VAN	18FORD DIGGER TRUCK 2011 FORD F-250 19TRUCK 2012 - LOT 10 BLOCK 209 BAXTER SPRINGS K	* 930-FF FG i TOIAL OTHER * GRAND TOTAL 990-PF PG 1 DEPR		
Asset No	1	18			:

(D) · Asset disposed

228102 05-01-12

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

4562

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

▶ See separate instructions.

Attach to your tax return.

Business or activity to which this form relates

OMB No 1545-0172

Identifying number

48-1198875 FIVE MILE CHILDRENS FOUNDATION FORM 990-PF PAGE 1 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, (c) Elected cost (b) Cost (business use only) (a) Description of property 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 24,000. 17 MACRS deductions for assets placed in service in tax years beginning before 2012

Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation(business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
С	7-year property						
_d	10-year property						
_е	15-year property						
f	20-year property	[
9	25-year property			25 yrs.		S/L	
L	Decidential restal arrayativ	/		27.5 yrs	MM	S/L	
h	Residential rental property	/		27.5 yrs	MM	S/L	
	Nonnesidential veel average.	/		39 yrs	MM	S/L	
	Nonresidential real property	/			MM	S/L	
	Section C - Assets	Placed in Service	During 2012 Tax Year U	sing the Altern	ative Depre	iation Sys	stem
20a	Class life					S/L	
b	12-year			12 yrs.	1.	S/L	
							1

40-<u>year</u> 40 yrs. MM S/L

Part IV Summary (See instructions.)

5,425.21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

29,425. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the

23

portion of the basis attributable to section 263A costs

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

	m 4562 (2012)		r urrnr										1100		raye z
P	Listed Propert amusement.)	t y (Include a	utomobiles, c	ertaın otl	her vehicl	es, ce	rtain con	puters	s, and prop	perty use	ed for er	itertainn	nent, rec	reation,	or
	Note: For any	ehicle for wi	hich vou are u	sing the	standard	milea	ge rate o	r dedu	ctina lease	expens	e. comp	lete onl	y 24a, 24	ib, colui	nns (a)
	through (c) of S	Section A, all	of Section B,	and Sec	ction C if	applica	able.								
	Section A -	Depreciation	on and Other	Informa	ation (Ca										
<u>24</u> 2	Do you have evidence to s	support the bu	siness/investm	ent use cl	aimed?	Χı	res 🗌	_ No	24b If "Y	es," ıs th	ne evide	<u>nce writt</u>	ten? LX		No
	(a)	(b)	_ (c)	1	(d)		(e)		(f)	((g)	((h)		(i)
	Type of property	Date placed in	Business/ investment	.	Cost or		ısıs for depr usıness/inv		Recovery		thod/		eciation		cted on 179
	(list vehicles first)	service	use percenta		ther basis	(-	use onl		period	Conv	ention	deal	uction		ost
25	Special depreciation allo	owance for o	ualified listed	property	v placed i	n serv	ice durin	g the ta	ax year an	d					
	used more than 50% in	•						-	•		25				
26	Property used more tha			ess use:	:	*,**					•	•			
==				%											
				%											
รา	ATEMENT 8			%								5.	425.		
_	Property used 50% or le	ee in a qual	<u> </u>	·				-	L					Į.	
	1 Toperty used 30 % of R	Jos III a qual	i	%		-				S/L·		Γ			
_			i	%						S/L·		 			
				%		-				S/L·					
	A 1 1	//				04			<u> </u>	13/L.	28	5	425.		
	Add amounts in column	• •	_				, page 1					J,			
29	Add amounts in column	(I), line 26. E											29		
_			•		B - Inforr						_				
	mplete this section for ve												na thia a	ootion f	~
-	ou provided vehicles to y se vehicles.	our employe	es, first answ	er the qu	uestions i	n Seci	ion C to	see ii y	ou meet a	an excer	otion to t	completi	ng tilis s	ection	Oi
	Se verilcies.			,	-			1							
				((a)		(b)		(c)	(d)	"	e)	(1	f)
30	Total business/investment	miles driven d	uring the	Vel	hicle	Ve	hicle	V	'ehicle	Vet	ncle	Vet	nicle	Veh	ıcle
	year (do not include comr	nuting miles)													
31	Total commuting miles of	driven during	the year								_				
32	Total other personal (no	ncommuting) miles					İ		İ					
	driven														
33	Total miles driven during	the year.					<u>-</u>								
	Add lines 30 through 32														
34	Was the vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?	,										İ			
35	Was the vehicle used p	rimarily by a	more												
	than 5% owner or relate											İ			
36	Is another vehicle availa	-	nal												
	use?	.010 101 poroc	····a·												
		Section C	- Questions	for Emp	lovers W	ho Dra	vide Vel	hicles :	for lise h	v Their F	Employe				
Δne	wer these questions to			•	•					•			re not m	ore than	50%
	ners or related persons.	Jeterrille ir j	you meet an e	xceptioi	i to comp	Jenny	Section	D IOI V	enicies us	eu by ei	прюуее	S WIIU ai	ie not m	ore mai	370
		n nolicy stat	omont that n	robibito d	all naman	ol uoo	of vobial	00 100	ludina aar		hvere			Voc	Nia
31	Do you maintain a writte	n policy stat	ement that pi	OHIDIUS	ali person	ai use	or vertica	es, inc	lucing cor	ninuting	, by you	ı		Yes	No
20	employees?								.					-	
36	Do you maintain a writte			•							our				
	employees? See the ins					icers,	directors	, or 1%	or more	owners				-	
	Do you treat all use of ve					_								-	
40	Do you provide more that					ntorma	ition from	ı your e	employee	s about					
	the use of the vehicles,														
41	Do you meet the require		• .												
	Note: If your answer to	37, 38, 39, 4	<u>0, or 41 is "Ye</u>	s," do n	<u>ot comple</u>	ete Se	ction B fo	or the c	covered ve	hicles.				l	
P	art VI Amortization			40.5											
	(a) Description of	f costs	Date	(b) amortization		(C) Amortiza	able		(d) Code		(e) Amortiza	tion	Δε	(f) nortization	
				begins		amour	it		section		penod or per		fo	r this year	
42	Amortization of costs th	at begins du	ring your 201	2 tax yea	ar:		-	-							
					ļ										_
											. 				
43	Amortization of costs th	at began be	fore your 201	2 tax yea	ar						_	43			
	Total. Add amounts in o	saluma /A C	a the instruc	lana far	bara ta		,					44			-

FORM 4562, PART V	LISTED	PROPERTY	INFORMA	rion-mor	RE THAN S	50% STATE	EMENT 8
(A) (B) DESCRIPTION DATE	(C) BUS. %		(E) BASIS		(G) MTH/CV	(H) DEDUCTION	(I) 179 ELECTED
(J) (K) (I AUTO TOTAL BUSI NO MILES MI	NESS COM	(M) MUTING PI		(O) WAS VEH AVAIL.3	OWNER:	(Q) ANOTHER V AVAILABI Y N	
TOYOTA 07/02/0 4RUNNER	7	26,937.	26,937	. 5.00 2	200DB-HY	1,775.	·
2008 TOYOTA 10/27/0 PICKUP	8 100.00	22,097.	22,097	. 5.00 2	200DB-HY	1,875.	
2009 TOYOTA 05/21/0	9 100.00	16,488.	16,488	. 5.00 2	200DB-HY	1,775.	
TOTAL TO FORM 4562,	PART V,	LINE 26				5,425.	

Form **886**\$

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

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

OMB No. 1545-1709

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Form 8868 (Rev. 1-2013)

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print 48-1198875 FIVE MILE CHILDRENS FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your C/O JOHN T. ARCHER, 927 MILITARY return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions BAXTER SPRINGS, KS 66713 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application Application** Return Return Is For Code Code Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 990-BL 02 Form 1041-A Form 4720 (individual) 03 Form 4720 09 Form 990-PF Form 5227 10 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) Form 8870 12 JOHN T. ARCHER • The books are in the care of ▶ 927 MILITARY -BAXTER SPRINGS, KS 66713 Telephone No ► 620-856-4400 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2012 or tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

Form **8868** (Rev. 1-2013)

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Form 88	368 (Řev. 1·2013)						Page 2	
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box		•	X	
Note. C	Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously f	led Form	8868.			
If you	are filing for an Automatic 3-Month Extension, comple							
Part	Additional (Not Automatic) 3-Month E	xtensio	· · · · · · · · · · · · · · · · · · ·					
			Enter filer's			•		
Type or	Name of exempt organization or other filer, see instru	ctions		Employer identification number (EIN) of				
print	ETUD MILE QUIL DDENG EQUIDAM	T ())]			40 1	10007	E	
File by the	,			48-1198875				
filing your	Number, street, and room or some no. If a P O. box, s		tions.	Social se	curity num	iber (SSN)		
return Security								
	Ofty, town or post office, state, and ZIP code. For a for BAXTER SPRINGS, KS 66713	oreign add	iress, see instructions.					
	DANIER BERINGS, RS 00713		8					
Catarth	as Batura and for the return that this application is far /file		to application for each return)				0 4	
Enter th	ne Return code for the return that this application is for (file	e a separa	te application to each return)				المرام	
Applica	ation	Return	Application				Return	
Is For		Code	Is For				Code	
	90 or Form 990-EZ	01		***************************************				
Form 99		02	Form 1041-A				08	
Form 47	720 (individual)	03	Form 4720				09	
Form 99	90-PF	04	Form 5227				10	
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11	
Form 99	90-T (trust other than above)	06	Form 8870				12	
STOP!	Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	iously file	d Form 88	368.		
	JOHN T. ARCHER							
	books are in the care of ▶ 927 MILITARY -	BAXT	·	13				
	phone No ► 620-856-4400		FAX No. ▶					
	e organization does not have an office or place of business					•		
	s is for a Group Return, enter the organization's four digit	1	-					
box ▶			ach a list with the names and EINs of	all memb	ers the ext	tension is	for	
			BER 15, 2013.					
	or calendar year $\frac{2012}{100}$, or other tax year beginning		, and endin					
6 If	the tax year entered in line 5 is for less than 12 months, c Change in accounting period	neck reas	on: Initial return	Final r	eturn			
7 S	tate in detail why you need the extension							
	ADDITIONAL TIME IS REQUIRED TO	о овт	AIN THE INFORMATIO	N NEE	DED T	O PRE	PARE	
	THE 2012 TAX RETURN.	<u> </u>				<u> </u>		
_								
8a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any					
	onrefundable credits. See instructions.	,	,	8a	\$		0.	
b If	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		•			
	ax payments made. Include any prior year overpayment all	-						
_6	previously with Form 8868.	8b	\$		0.			
с В	alance due. Subtract line 8b from line 8a Include your pa	yment wit	h this form, if required, by using					
E	FTPS (Electronic Federal Tax Payment System) See instru	uctions.		8c	\$		0.	
			st be completed for Part II o	_				
Under pe it is true,	enalties of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo	ing accomp orm	panying schedules and statements, and to	the best o	f my knowle	edge and be	lief,	
Signatur	e ▶ Title ▶ (CHAIR	MAN	Date	•			