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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

2013

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

| FOI C | alendar year 2013, or tax year beginning | , 2013 | , and ending | | | |
|-------------------|---|---------------------------------------|---------------------------------|--------------------|--|--|
| THO | MAS FAHEY FAMILY FOUNDATION | | | | loyer identification num 5–3938724 | nber |
| | l OVERBROOK NOOD, KS 66206 | | | B Tele | phone number (see the (316) 763-3010 | |
| | | _ | | C If ex | emption application is | pending, check here |
| G Ch | neck all that apply. Initial return | Initial return of a forr | | | | |
| | Final return Address change | Amended return Name change | | D 1 Fore | ign organizations, chec | k here |
| H | Check type of organization X Section 501 | (c)(3) exempt private f | | 2 Fore here | ign organizations meeti and attach computatio | ing the 85% test, check |
| | Section 4947(a)(1) nonexempt charitable t | | orivate foundation | | vate foundation status | |
| | (from Part II, column (c), line 16) | ounting method: $X C$ Other (specify) | | F If th | er section 507(b)(1)(A), e foundation is in a 60- | month termination |
| → | | column (d) must be or | n cash basis) | unu | er section 507(b)(1)(B) | , crieck fiere |
| Part | Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) | (a) Revenue and expenses per books | (b) Net investmen income | t (c | Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | (see instructions).) 1 Contributions, gifts, grants, etc, received (att sch) | 138,453. | | . , , | | 1 1 |
| | 2 Ck ► ☐ If the foundn is not req to att Sch B | 130,433. | 1,3 | | 7 | |
| ₹, | 3 Interest on savings and temporary cash investments | 2. | | 2. | 2. | TEF |
| 4107 | 4 Dividends and interest from securities | 14,078. | 14,07 | 8. | 14,078. | 14 d (45) (15) |
| 9 | 5 a Gross rents b Net rental income | | | | | · · · · · · · · · · · · · · · · · · · |
| ₹ R | or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 | 36,217. | , | | | , j |
| E V | b Gross sales price for all 90,876. | | | ,*(// p | - , | 734 - |
|) E | 7 Capital gain net income (from Part IV, line 2) | , (g) | 36,21 | 7. | | - 1 |
| N | 8 Net short-term capital gain . 9 Income modifications | | | | 142. | <u> </u> |
| NUE | 10 a Gross sales less returns and | , , , , , , , | | ` | | |
| • | allowances b Less Cost of | | | 11. | 1 | <u> </u> |
| • | goods sold | | } _ - | | | <u> </u> |
| • | c Gross profit/(loss) (att sch) 11 Other income (attach schedule) | | 2- -Ş | *** | | <u> </u> |
| | (allasii sailesais) | | | | | A STEER OF THE STATE OF THE STA |
| | 12 Total. Add lines 1 through 11 | 188,750. | 50,29 | 7. | 14,222. | 1 . |
| | 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages | 0. | | | | |
| | 15 Pension plans, employee benefits | | | | | -OFWED |
| Δ | 16 a Local food (attach cohodula) | | [| | - + RI | -CLIVED |
| A D M | D Accounting Ices (attach sen) DEE DE I | 750. | 75 | | | SS |
| N | c Other prof fees (attach sch) See St 2 | 4,368. | 4,36 | 8. | 18/ 11 | JN 1 2 2014 |
| O P E R A T | 17 Interest 18 Taxes (attach schedule)(see instrs). See Stm 3 | 1,578. | 1,57 | | | |
| RRA | 19 Depreciation (attach | 1,316. | 1,51 | * - | 10 | GDEN, UT |
| 1 (| sch) and depletion | | | | | SULIVI |
| N V G E | 20 Occupancy 21 Travel, conferences, and meetings | | | | | |
| A E N X D P | 22 Printing and publications | | | | ···· | |
| A E X P E N | 23 Other expenses (attach schedule) | | | | | |
| N S E | 24 Total operating and administrative | | 2 55 | | | |
| s | expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV | 6,696. 37,950. | 6,69 | 0. | | 37,950. |
| | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Add lines 24 and 25 | 44,646. | 6,69 | 6. | 0. | 37,950. |
| | 27 Subtract line 26 from line 12: a Excess of revenue over expenses | - | - | | - | - |
| | and disbursements | 144,104. | · | | | - |
| | b Net investment income (if negative, enter -0-) | | 43,60 | 1. | | |
| BAA F | C Adjusted net income (if negative, enter -0-) For Paperwork Reduction Act Notice, see ins | tructions | <u> </u> | TEEA0504L | 14,222. | Form 990-PF (2013) |
| PAM I | or raperwork neullclion ACL Nolice, see Ins | แนะแบบร. | . / | · CEMUSUAL | 10/10/13 | 1 01111 330-FF (2013) |

| Form | 990- | PF (2013) THOMAS FAHEY FAMILY FOUNDATION | | 26-39: | |
|-----------------------|--------|---|---|--|--|
| Par | ŧ II | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | | f year |
| <u> </u> | | (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash — non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 43,729. | 16,317. | - |
| | 3 | Accounts receivable | - | - | |
| | | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | - | |
| | _ ا | Less allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) | | | |
| Δ | 7 | Other notes and loans receivable (attach sch) | | * | ' |
| ŝ | _ | Less allowance for doubtful accounts | | | |
| A S S E T | 8 | Inventories for sale or use Prepaid expenses and deferred charges | | 1 000 | |
| Ţ | 9 | | | 1,900. | |
| 5 | ł | a Investments — U.S and state government obligations (attach schedule) | | | |
| | 1 | b Investments — corporate stock (attach schedule) | 696,953. | 866,568. | |
| | | c Investments — corporate bonds (attach schedule) | | | |
| | 11 | Investments — land, buildings, and equipment basis | de en | Markey in the Markey American will be a second | and the second of the second o |
| | | Less: accumulated depreciation (attach schedule) | | | |
| | 12 | Investments – mortgage loans. | | | |
| | 13 | Investments — other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment. basis | | | |
| | | Less. accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe See Statement 4 | | 1. | |
| | 16 | Total assets (to be completed by all filers — | 740 600 | 004 706 | |
| | 17 | see the instructions. Also, see page 1, item I) Accounts payable and accrued expenses | 740,682. | 884,786. | 0. |
| Ţ | 18 | Grants payable | | | |
| A B | 19 | Deferred revenue | | | |
| 1 | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | ; |
| ī | 21 | Mortgages and other notes payable (attach schedule) | | | |
| Ţ | 22 | Other liabilities (describe ►) | | | |
| Ė | | Takel Cabillation (add lines 17 Absorbt 20) | | | |
| _ <u>s</u> _ | 23 | Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here | 0. | 0. | 100 |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| N F E U T N | 24 | Unrestricted | | | |
| ŤŇ | 25 | Temporarily restricted | | · · · · · · · · · · · · · · · · · · · | ' |
| A D | 26 | Permanently restricted | | | |
| A B A L A | ĺ | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. | | | 1 |
| ĚL | 27 | Capital stock, trust principal, or current funds | 740,682. | 884,786. | |
| SN | 28 | Paid-in or capital surplus, or land, building, and equipment fund | | | |
| o E | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| ŘS | 30 | Total net assets or fund balances (see instructions) | 740,682. | 884,786. | |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 740,682. | 884,786. | |
| Par | : [[[] | Analysis of Changes in Net Assets or Fund Balance | es | | |
| 1 | Total | net assets or fund balances at beginning of year – Part II, colui | mn (a), line 30 (must a | gree with | |
| | end- | of-year figure reported on prior year's return) | | 1 | 740,682. |
| | | r amount from Part I, line 27a | | 2 | 144,104. |
| | | increases not included in line 2 (itemize) | | | 004 706 |
| | | lines 1, 2, and 3. | | 5 | 884,786. |
| | | ases not included in line 2 (itemize). I net assets or fund balances at end of year (line 4 minus line 5). | = Part II column (b) | | 884,786. |
| ~~ | TOTAL | not assets of fund paralles at end of year (line 4 minus line 3) | r art ii, column (b), | | 5004,700. |

| Pai | (a) List and describe | the kind(s) of property sold (e.g., ree, or common stock, 200 shares ML | eal estate, | (b) How acquired P — Purchase D — Donation | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|-----|---|--|--|--|---|--|
| 1: | See Statement 5 | | | | | |
| | o | | | | | |
| | 5 | | | | | |
| | d | | | | | |
| | e | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other base plus expense of sal | | (h) Gain or (e) plus (f) m | |
| |) | | | | | |
| | <u> </u> | | | | | |
| | : d | | | | | |
| — | | | | | | |
| | | I ing gain in column (h) and owned by | the foundation on 12/31/69 | | (I) Gains (Col | umn (h) |
| | (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column over column (j), if a | (1) | gain minus column (l lan -0-) or Losses (fi | k), but not less |
| | | | | | | |
| ! | | | | | | |
| _ | | | | | | |
| — | | | | | | · |
| 2 | | t capital loss). If gain, also lf (loss), en | enter in Part I, line 7 ter -0- in Part I, line 7 | . 2 | | 36,217. |
| 3 | Net short-term capital gain or (| (loss) as defined in sections 1222(5) | and (6) | <u>-</u> | | 30,217. |
| | If gain, also enter in Part I, line | e 8, column (c) (see instructions) If | - | . } | ì | |
| | in Part I, line 8 T. V. Qualification Under | r Section 4940(e) for Reduce | <u></u> | 3 | <u>l</u> | 142. |
| Was | es,' the foundation does not qual | ition 4942 tax on the distributable ar lify under section 4940(e) Do not co | omplete this part. | | Yes | ☐ No |
| _1 | | n each column for each year, see the | F | ig any entries | | |
| | (a) Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | (c) Net value of noncharitable-use as: | sets (co | (d) Distribution umn (b) divided | |
| | 2012 | | | | | |
| | 2011 | | | | | |
| | 2010 | | | | | |
| | 2009 | | | | | |
| | 2008 | <u> </u> | <u>L</u> | | | _ |
| 2 | Total of line 1, column (d) | | | 2 | | |
| 3 | Average distribution ratio for the number of years the foundation | ne 5-year base period – divide the to n has been in existence if less than | otal on line 2 by 5, or by the 5 years | 3 | | |
| 4 | Enter the net value of nonchari | table-use assets for 2013 from Part | X, line 5 | 4 | | |
| 5 | Multiply line 4 by line 3 | | | 5 | | |
| 6 | Enter 1% of net investment inc | come (1% of Part I, line 27b) | | 6 | <u> </u> | · |
| 7 | Add lines 5 and 6 | | | 7 | | |
| 8 | Enter qualifying distributions from | om Part XII, line 4 | | 8 | | |
| | If line 8 is equal to or greater the Part VI instructions | han line 7, check the box in Part VI, | line 1b, and complete that | part using a 1 | % tax rate See | the |

| Form 990-PF (2013) THOMAS FAHEY FAMILY FOUNDATION | | 26-3938724 | | F | Page 4 |
|---|---|--|----------------|-------------|--------------|
| Part VI Excise Tax Based on Investment Income (Sec | | 4948 - see instruction | ns) | | |
| 1 a Exempt operating foundations described in section 4940(d)(2), check here | and enter 'N/A' on line 1 | <u> </u> | | | |
| | etter if necessary – see instrs) | | | | |
| b Domestic foundations that meet the section 4940(e) requirement | s in Part V, | 1 | | { | 872. |
| check here ► and enter 1% of Part I, line 27b | | | | | |
| ${f c}$ All other domestic foundations enter 2% of line 27b. Exempt foreign organizations | enter 4% of Part I, line 12, column (b) | | ~ | | - |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and ta | xable | | | | |
| foundations only Others enter -0-). | | 2 | | | 0. |
| 3 Add lines 1 and 2 | | 3 | | | 872. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and t | | enter -0-) 4 | | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3 If | zero or less, enter -0- | 5 | | 8 | <u>872.</u> |
| 6 Credits/Payments | | | | | |
| a 2013 estimated tax pmts and 2012 overpayment credited to 2013 | 6a | 1,044. | | | ٠, |
| b Exempt foreign organizations — tax withheld at source | 6 b | | | | 7 |
| c Tax paid with application for extension of time to file (Form 8868 |) 6c | 859. | | | 4 |
| d Backup withholding erroneously withheld | 6 d | | <u> </u> | | |
| 7 Total credits and payments Add lines 6a through 6d | | 7 | | 1,9 | <u>903.</u> |
| 8 Enter any penalty for underpayment of estimated tax. Check her | e X if Form 2220 is attached | 8 | | | 1. |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | ▶ 9 | | | 0. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount of | · · | ▶ 10 | | | <u>030.</u> |
| 11 Enter the amount of line 10 to be: Credited to 2014 estimated tax | 872. Refund | ded • 11 | | | <u> 158.</u> |
| Part VII-A. Statements Regarding Activities | · | | , | | |
| 1 a During the tax year, did the foundation attempt to influence any participate or intervene in any political campaign? | national, state, or local legislation | n or did it | 1 a | Yes | No X |
| b Did it spend more than \$100 during the year (either directly or in (see the instructions for definition)? | directly) for political purposes | | 1 b | | Х |
| If the answer is 'Yes' to 1a or 1b, attach a detailed description of the ac | ivities and copies of any materials p | ublished | | , : | 7 |
| or distributed by the foundation in connection with the activities. | | | | = | |
| c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section) | 4955) imposed during the year: | | 1 c | | X |
| (1) On the foundation >\$ 0. (2) On | foundation managers. | | . | | - " |
| e Enter the reimbursement (if any) paid by the foundation during the ye | | sed on | - | | - 1 |
| foundation managers • \$0. | | | | _ | |
| 2 Has the foundation engaged in any activities that have not previous | ously been reported to the IRS? | | _2 | | X |
| 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, ar | ticles | | | |
| of incorporation, or bylaws, or other similar instruments? If 'Yes, | • • | changes | 3 | | X |
| 4 a Did the foundation have unrelated business gross income of \$1,0 | 00 or more during the year? | | 4a | X | ↓ |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year? | | | 4 b | X | <u> </u> |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during | he year? | | 5 | | X |
| If 'Yes,' attach the statement required by General Instruction T | | | | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 • By language in the governing instrument, or | through 4945) satisfied either | | | | |
| By state legislation that effectively amends the governing instrument with the state law remain in the governing instrument? | so that no mandatory directions the | nat conflict | 6 | - | X |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yo | | | 7 | Х | |
| 8 a Enter the states to which the foundation reports or with which it | | ▶ | | | |
| N/A | | | | | |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PI (or designate) of each state as required by <i>General Instruction G? If 'No,' attach exp</i> | to the Attorney General | | 8 b | X | |
| 9 Is the foundation claiming status as a private operating foundation for calendar year 2013 or the taxable year beginning in 2013 (see | n within the meaning of section | 4942(j)(3) or 4942(j)(5 'es,' complete Part XIV | | | X |
| 10 Did any persons become substantial contributors during the tax year? | | | | | |
| and addresses | | | 10 | DE # | X |
| BAA | | F | orm 990 | -rr (2 | 4U13) |

| Far | t VII-A Statements Regarding Activities (continued) | | | |
|-------|---|------------------|------------|--|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | x |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address N/A | | ~ | |
| 14 | | 1 <u>6)</u> 763- | 3010 | |
| | Located at ► 9701 OVERBROOK LEAWOOD KS ZIP + 4 ► 66206 | | . _ | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | N/A | , - | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | N/A |
| 16 | At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | Yes | No |
| 1 a | During the year did the foundation (either directly or indirectly) | • | - | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 40 - | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes XI | No | _ | , |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes | No i | -] | , , , , , , , , , , , , , , , , , , , |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 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)? Yes X | No | | |
| | (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 termination of government service, if terminating within 90 days) Yes X | No . | | - 1 |
| 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)? | 1 b | - N | |
| | Organizations relying on a current notice regarding disaster assistance check here | F | - | -31 |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013? | 1 c | ' | |
| 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)): | , | | - 1 |
| а | At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? Yes XI | No | | 1 |
| | If 'Yes,' list the years ► 20 , 20 , 20 , 20 | | - | : |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | | | |
| _ | all years listed, answer 'No' and attach statement — see instructions). | 2 b | N | / A |
| С | : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20 | | | ٠, |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | No | | , |
| b | olf 'Yes,' did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013) | 3 b | N. | - /A |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | | Х |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4 b | | X |
| BAA | | Form 99 | 0-PF(| (2013) |

| Form 990-PF (2013) THOMAS FAHEY FAMIL | Y FOUNDATION | | 26-393 | 38724 | Page 6 |
|--|---|---|--|---------------------------|---------------------|
| Part VII-B Statements Regarding Activiti | | n 4720 May Be Req | uired (continued) | | |
| 5 a During the year did the foundation pay or incu | | | | | } |
| (1) Carry on propaganda, or otherwise attempt | ot to influence legislation | n (section 4945(e))? | Yes X | No | |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | ition drive? | | <u> </u> | No | |
| (3) Provide a grant to an individual for travel, | study, or other similar | purposes? | Yes X | No | |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | nan a charitable, etc, oi 4940(d)(2)? (see instri | rganization described uctions) | Yes X | No | ŧ |
| (5) Provide for any purpose other than religio educational purposes, or for the preventio | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to a current notice regard | qualify under the excep ding disaster assistance | tions : | 5 b | N/A |
| Organizations relying on a current notice rega | rding disaster assistand | ce check here | ▶ [] | | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon- | sibility for the grant? | | N/A Yes | No | |
| If 'Yes,' attach the statement required by Regi | ulations section 53 494 | 5-5(d) | | | 5 (1 |
| 6 a Did the foundation, during the year, receive ar on a personal benefit contract? | | | ∐Yes X | No | |
| b Did the foundation, during the year, pay premi | rums, directly or indirec | tly, on a personal bene | fit contract? | 6 b | X |
| If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the found | Hatian a narty to a prob | whited tay shelter transs | ection? Yes X | No | : |
| b If 'Yes,' did the foundation receive any procee | | | | 1/A 7b | أخلضت |
| Part VIII Information About Officers, D | rectors. Trustees. | Foundation Manage | gers, Highly Paid E | | |
| and Contractors | , | · | | | |
| 1 List all officers, directors, trustees, foundation | n managers and their | compensation (see inst | ructions). | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense other allo | |
| KEVIN R FAHEY | Trustee | 0. | 0. | | 0. |
| 9701 OVERBROOK | 0 | | | | |
| LEAWOOD, KS 66206 | | | | | |
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| | | <u></u> | | <u></u> | |
| 2 Compensation of five highest-paid employees (of | | | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d)Contributions to employee benefit plans and deferred compensation | (e) Expense other allo | account, owances |
| None | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | · | | | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid over \$50,000 |]] | l | <u> </u> | <u> </u> | 0 |
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| and Contractors (continued) | | , , |
|--|-----------------------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services (see ins | | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| None | | |
| | | |
| | | |
| | | |
| | | |
| | | |
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| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | P 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| Tall IA-A Julillary of Direct Charlable Activities | | · |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc. | information such as the number of | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see Instruction | tions) | |
| Describe the two largest program-related investments made by the foundation during the | tax year on lines 1 and 2 | Amount |
| 1 | | |
| N/A | | |
| | | |
| 2 | | |
| | | |
| All other program-related investments See instructions. | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | 0. |
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| | see instructions.) | | |
|-----|---|-------------|-----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. A Average monthly fair market value of securities. | 1 a | |
| 1 | Average of monthly cash balances | 1 b | |
| (| Fair market value of all other assets (see instructions) | 1 c | |
| (| Total (add lines 1a, b, and c) | 1 d | 0. |
| | 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 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 0. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 0. |
| Par | | ling fo | undations |
| | and certain foreign organizations check here ► and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | |
| | Tax on investment income for 2013 from Part VI, line 5 | | |
| ì | Income tax for 2013 (This does not include the tax from Part VI.) | | |
| • | Add lines 2a and 2b | 2 c | 872. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | -872. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | -872. |
| 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 | 0. |
| Pai | t XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 | 1 a | 37,950. |
| ŀ | Program-related investments — total from Part IX-B | 1 b | |
| 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 Suitability test (prior IRS approval required) | 3 a | |
| ŧ | Cash distribution test (attach the required schedule) | 3 b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 37,950. |
| 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 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 37,950. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years. | ndation | |

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Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|---------------|----------------------------|--------------------|---------------------------|
| Distributable amount for 2013 from Part XI, line 7 | | | | 0. |
| 2 Undistributed income, if any, as of the end of 2013. | | | | |
| a Enter amount for 2012 only | | | 0. | |
| b Total for prior years 20 , 20 , 20 | | 0. | | |
| 3 Excess distributions carryover, if any, to 2013: | | - | | - |
| a From 2008 | | <i>.</i> | | * |
| b From 2009 52,000. | | | | |
| c From 2010 33,500. | | | | |
| d From 2011 55, 300. | | ı | | |
| e From 2012 30,750. | . 7117 | | | |
| f Total of lines 3a through e | 171,550. | | * | |
| 4 Qualifying distributions for 2013 from Part | | 2 + | • | 1 |
| XII, line 4. ► \$ 37,950. | , | | 0. | , , , |
| a Applied to 2012, but not more than line 2a | | | | |
| 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. | 1 | | 46.3 |
| d Applied to 2013 distributable amount | | | | 0. |
| e Remaining amount distributed out of corpus | 37,950. | | | |
| 5 Excess distributions carryover applied to 2013 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | | | - | 1 |
| Same amount must be shown in column (a). | • ' | | | |
| 6 Enter the net total of each column as | - | - | | |
| indicated below: | | , | - | (-) |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 209,500. | | | 1 |
| b Prior years' undistributed income Subtract line 4b from line 2b | ÷ | 0. | | 5 1 |
| c Enter the amount of prior years' undistribut- | | | , | , , , |
| ed income for which a notice of deficiency has been issued, or on which the section | | | | |
| 4942(a) tax has been previously assessed | 1 | 0. | 1 | - , , , , |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount — see instructions | | 0. | <u> </u> | |
| e Undistributed income for 2012 Subtract line 4a from | | | 0. | |
| line 2a. Taxable amount — see instructions | | | | |
| f Undistributed income for 2013 Subtract lines | | | | |
| 4d and 5 from line 1. This amount must be distributed in 2014. | | | - | 0. |
| 7 Amounts treated as distributions out of | | · | | |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | | | | |
| (see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2008 not | | - | | - |
| applied on line 5 or line 7 (see instructions) | 0. | | - | |
| 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a | 209,500. | | | |
| 10 Analysis of line 9 | | | | · , |
| a Excess from 2009 52,000. | | | - | |
| b Excess from 2010 33,500. | | | - | • |
| c Excess from 2011 55, 300. | | | | |
| d Excess from 2012 30,750. | | | - | |
| e Excess from 2013 37, 950. | | <u> </u> | <u> </u> | Form 990-PF (2013) |

| Form 990-PF (2013) THOMAS FAHEY FAM | | | VII-A guestion | 26-3938724 | 1 Page 10 N/A |
|---|-----------------------------------|-------------------------------|------------------------|---|---------------------------|
| 1 a If the foundation has received a ruling or dete is effective for 2013, enter the date of the | rmination letter that | | | | N/A |
| b Check box to indicate whether the foundat | - | erating foundation de | scribed in section | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum investment return from Part X for each year listed | (a) 2013 | (b) 2012 | (c) 2011 | (d) 2010 | (e) Total |
| b 85% of line 2a. | | | | | |
| c 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 | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test - enter: | | ! | | | |
| (1) Value of all assets | ' | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter· | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(III) | - | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Information assets at any time during th | (Complete this e year — see in | part only if the structions.) | foundation had | \$5,000 or more | in |
| Information Regarding Foundation Managera List any managers of the foundation who have | contributed more th | nan 2% of the total co | ntributions received | by the foundation bef | ore the |
| close of any tax year (but only if they have None | e contributed more | than \$5,000) (See s | section 507(d)(2)) | | |
| b List any managers of the foundation who own | 10% or more of the | stock of a corporation | o (or an equally large | nortion of the owner | Shin of |
| a partnership or other entity) of which the None | foundation has a 1 | 0% or greater intere | st. | portion of the owner | 3p 0. |
| | | | | | |
| 2 Information Regarding Contribution, Gran Check here ► X if the foundation only ma requests for funds If the foundation make: | kes contributions to | preselected charitable | e organizations and o | does not accept unsol nizations under othe | licited er conditions. |
| complete items 2a, b, c, and d | | | | | |
| a The name, address, and telephone number or | e-mail of the persoi | n to whom application | s should be address | ed | |
| | | | | | |
| b The form in which applications should be s | submitted and infor | mation and material | s they should inclu | de | |
| c Any submission deadlines | | | | | |
| , | | | | | |
| d Any restrictions or limitations on awards, s | such as by geograp | hical areas, charitat | ole fields, kinds of i | nstitutions, or other | factors: |
| | | | | | |

Page 11

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

| 3 Grants and Contributions Paid During the Ye | | | | |
|---|---|----------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | substantial contributor | recipient | | |
| a Paid during the year HEARTLAND THERAPEUTIC RIDING, INC 19655 ANTIOCH, PO BOX 391 STILWELL, KS 66085 | NONE | 501c3 | GENERAL OPERATIONS | 6,000. |
| BOYS HOPE GIRLS HOPE OF KANSAS CITY, INC 7930 STATE LINE ROAD, SUITE 120 PRAIRIE VILLAGE, KS 66208 | NONE | 501c3 | GENERAL OPERATIONS | 8,700. |
| SPOFFORD 9700 GRANDVIEW ROAD KANSAS CITY, MO 64134 | NONE | 501c3 | GENERAL OPERATIONS | 23,000. |
| GREAT PLAINS SPCA 9800 W 67TH MERRIAM, KS 66203 | NONE | 501c3 | GENERAL OPERATIONS | 250. |
| | | | | |
| Total | | | ► 3a | 37,950. |
| b Approved for future payment | | | | |
| Total | | | ► 3b |] |

Part XVI-A Analysis of Income-Producing Activities

| Inter gross | s amounts unless otherwise indicated. | | business income | Excluded | by section 512, 513, or 514 | (e) |
|--|---|-------------------------|----------------------|--|-----------------------------|--|
| 1 Progr | am service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) |
| a Progr | ani service revenue | | | code | | |
| L | | | | | | |
| c | | 1 | | | | |
| ď | | | | | | |
| e | | | | | | |
| f | | | | | | |
| _ | and contracts from government agencies | | | | | |
| | pership dues and assessments t on savings and temporary cash investments | | 2. | | | |
| | ends and interest from securities | | 14,078. | | | |
| | ental income or (loss) from real estate: | F | 14,070. | | ···· | |
| | financed property | - | | | | |
| | ebt-financed property | | | | | |
| | ntal income or (loss) from personal property | | | | | |
| | investment income | | ,,,,,,, | | | |
| 8 Gain or | (loss) from sales of assets other than inventory | | | | | 36,217 |
| 9 Net in | ncome or (loss) from special events. | | | | | |
| 10 Gross | profit or (loss) from sales of inventory | | | | | |
| 11 Other | revenue. | | - , 4'` , | - | = 1 12 | 3 |
| a | | | | | | |
| b | | <u> </u> | | <u> </u> | | |
| c | | | | | | |
| d | | | | ļ | | |
| e | | 1 | | | | |
| 12 Subto | tal Add calumns (b) (d) and (a) | | 14 000 | | | 26 217 |
| | tal Add columns (b), (d), and (e) | | 14,080. | | 13 | |
| 13 Total. | tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation | ons) | 14,080. | | 13 | |
| 13 Total. See works | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations | | | t Purpo | - | |
| See works Part XVI- | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculations | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 50,297 |
| 13 Total. See works Part XVI- Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accomplis | hment of Exemp | | oses | 36,217. 50,297. y to the instructions) |

TEEA0502L 07/11/13

Form 990-PF (2013) THOMAS FAHEY FAMILY FOUNDATION 26-3938724 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | | | | | | | | | - 1.4 | |
|-------------------|--|---|--------------------------------------|--------------------------------------|------------------------------|--------------------------------|---|---------------------------------------|---------------------------------------|---|--------------|
| d€ | d the organization direc escribed in section 501(o lating to political organi | c) of the Code (ot | ngage in an her than se | ny of the foll ection 501(c) | owing with (3) organ | h any ot izations | her organization or in section | on 527, | | Yes | No |
| a Tr | ansfers from the reporti | ng foundation to | a noncharit | able exemp | t organiza | ation of: | | | | Ì | |
| (1 |) Cash | | | | | | | | 1 a | (1) | X |
| (2 |) Other assets | | | | | | | | 1 a | (2) | X |
| b O | ther transactions: | | | | | | | | | | |
| (1 |) Sales of assets to a n | ioncharitable exer | mpt organiz | zation | | | | | 1 b | (1) | X |
| (2 | (2) Purchases of assets from a noncharitable exempt organization | | | | | | | | | (2) | X |
| (3 | (3) Rental of facilities, equipment, or other assets | | | | | | | | | (3) | X |
| (4 | (4) Reimbursement arrangements | | | | | | | | | (4) | X |
| (5 | (5) Loans or loan guarantees | | | | | | | | | (5) | X |
| (6 |) Performance of service | es or membershi: | p or fundra | ising solicita | ations | | | | 1 b | (6) | X |
| c Si | naring of facilities, equip | ment, mailing list | ts, other as | sets, or paid | d employe | es | | | 1 c | | X |
| d If th | the answer to any of the e goods, other assets, or s ny transaction or sharing | above is 'Yes,' of services given by the services given by the services are services. | complete th | ne following foundation | schedule If the foun | Columi dation re e goods | n (b) should alveceived less than | vays show the fair market or services | ne fair marke value in received | t value of | : |
| (a) Line | | | | e exempt organi | | | Description of tran | | | arrangeme | nts |
| N/A | (B) ranount myolved | (c) Name of | ononumusic | | | (4) | | | onaring | | |
| H/ A | | | | | | | | | | · | |
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| | | | | | | | | | | | |
| d€ | the foundation directly or escribed in section 501 (c'Yes,' complete the folio | c) of the Code (ot | d with, or relations | ated to, one ection 501(c) | or more ta (3)) or in | x-exemp section | t organizations 527? | | | Yes X | No |
| | (a) Name of organiz | ation | (b) | Type of org | anızatıon | | (C |) Descriptio | n of relations | hip | |
| N/A | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | <u>.</u> _ | | | | · | | |
| | | | | | | | | - | . | | |
| | · | | | | | | | | | | |
| Í | Under penalties of perjury, I decorrect, and complete Deciarat | clare that I have examilation of preparer (other to | ned this return, than taxpayer) i | including accor is based on all i | npanying sch nformation o | nedules an f which pre | d statements, and to eparer has any knov | the best of my ledge | knowledge and b | elief, it is tru | e, |
| Sign Here | Vekrusi P. | Takes | | 1x 6 | 17/14 | : > 7 | rustee | | this | y the IRS dis return with parer shown | the below |
| | Signature of officer or trustee | // | / | Date | / | Ti | tle | | '36 | e instruction X Yes | No |
| | Print/Type preparer's | | Øep. | afer's signature | a benon | | Date | Check | ıf PTIN | | |
| Paid | John B. Ba | teson, CPA | | | teson, | CPA | 6/3/14 | self-emple | | 13075 | 5 |
| Prepar | rer Firm's name | Bateson & | | | | | | Firm's EIN | 74-28634 | 162 | |
| Use O | nly Firm's address | 1828 Swift | | | | | | 1 | | | _ |
| | | N Kansas C | ity, MO | 64116 | | | | Phone no | (816) 84 | | |
| BAA | | | | | | | | | Forn | n 990-PF (| (2013) |

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
Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

| waite of the organization | | Employer identification rightself |
|--|---|--|
| THOMAS FAHEY FAMILY FOUN | 26-3938724 | |
| Organization type (check one) | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) org | ganization |
| | 4947(a)(1) nonexempt charitable t | trust not treated as a private foundation |
| | 527 political organization | · |
| | 527 pointed organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | on |
| | 4947(a)(1) nonexempt charitable t | trust treated as a private foundation |
| | 501(c)(3) taxable private foundation | on |
| | | |
| Check if your organization is covered by | y 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. |
| | no) organization out onest boxes to the state and | |
| General Rule | 00 F7 at 000 DF that recoved during the year \$F | 5 000 or more (in manay or property) from any one |
| contributor (Complete Parts I and | 90-EZ, or 990-PF that received, during the year, \$5 II) | 5,000 of more (in money of property) from any one |
| ` . | • | |
| Special Rules | | |
| • | o filing Form 990 or 990-F7 that met the 33-1/3 | % support test of the regulations under sections |
| \square 509(a)(1) and 170(b)(1)(A)(vi) and | received from any one contributor, during the years, Part VIII, line 1h, or (ii) Form 990-EZ, line | ear, a contribution of the greater of (1) \$5,000 or |
| For a section 501(c)(7), (8), or (10) or | ganization 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, or animals. Complete Parts I, II, and III. | , scientific, literary, or educational purposes, or |
| · · | ganization filing Form 990 or 990-EZ that received | from any one contributor, during the year. |
| contributions for use exclusively for re | ligious, charitable, etc. nurnoses, but these contrib | outions did not total to more than \$1,000 |
| If this box is checked, enter here the t | otal contributions that were received during the yeaparts unless the General Rule applies to this organi | ar for an <i>exclusively</i> religious, charitable, etc, ization because it received nonexclusively |
| | ons of \$5,000 or more during the year | ▶\$ |
| _ | | Dulan dans and file Cabadula D. (Farm 000, 000 F7 |
| 990-PF) but it must answer 'No' on Pa | rt IV line 2 of its Form 990, or check the box o | Rules does not file Schedule B (Form 990, 990-EZ, or on line H of its Form 990-EZ or on its Form 990-PF, |
| Part I, line 2, to certify that it does not | meet the filing requirements of Schedule B (Fo | orm 990, 990-EZ, or 990-PF). |
| BAA For Paperwork Reduction Act No | otice, see the Instructions for Form 990, 990EZ | Schedule B (Form 990, 990-EZ, or 990-PF) (201 |
| or 990-PF. | · | |

| | B (Form 990, 990-EZ, or 990-PF) (2013) | Page | 1 of 1 of Part 1 |
|---------------|--|-------------------------------|---|
| Name of org | | ! | r identification number |
| | S FAHEY FAMILY FOUNDATION | | 938724 |
| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional space | is needed | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | KEVIN & CONNIE FAHEY | | Person X Payroll |
| | 9701 OVERBROOK | \$138,253. | |
| | LEAWOOD, KS 66206 | | (Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions Part II for noncash contributions |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions Part II for noncash contributions |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

1 to 1 of Part II
Employer identification number

THOMAS FAHEY FAMILY FOUNDATION

26-3938724

| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--------------------|--|----------------------|
| 1 | 905.523 SH KINETICS PARADIGM FD 616.143 SH LONGLEAF PARTNERS FD 35.26 SH KINETICS PARADIGM FD 421.673 SH LONGLEAF PARTNERS FD 1069.37 SH HARBOR CAPITAL APPRECIATION | \$_ | 123,753. | 11/22/13 |
| (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 receive |
| | | \$_ \$_ | | |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | - - - \$ | | |
| | | | | |

| 2013 | Federal Statements | Page 1 |
|---|--|-----------------------------|
| Client TFFF001 | THOMAS FAHEY FAMILY FOUNDATION | 26-3938724 |
| 6/02/14 | | 04 02PM |
| Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees | | |
| ACCOUNTING FEE | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 750. \$ 750. \$ 0. Total \$ 750. \$ 0. | (d) Charitable Purposes 0. |
| Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees | | |
| INVESTMENT FEES | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 4,368. \$ 4,368. \$ 3,368. Total \$ 4,368. \$ 3,368. \$ 0. | (d) Charitable Purposes 0. |
| Statement 3 Form 990-PF, Part I, Line 18 Taxes | | |
| FEDERAL INCOME TAX FOREIGN TAX PAID | (a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 1,514. \$ 1,514. 64. 64. Total \$ 1,578. \$ 1,578. | (d) Charitable Purposes |
| Statement 4 Form 990-PF, Part II, Line 15 Other Assets | | |
| Rounding | | air Market Value 0. |
| | | |

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| 20 | 4 | ~ |
|----|---|----|
| ZU | | .5 |

Federal Statements

Page 2

Client TFFF001

THOMAS FAHEY FAMILY FOUNDATION

26-3938724 04 02PM

6/02/14

Statement 5

| | 990-PF, Part I\ Il Gains and L | | on Investme | nt Income | | | | |
|--------------------------------------|---|---|--|--|--|---------------------------------------|---|---|
| <u>Item</u> 1 2 3 4 5 | CHARLES SCI .90 SH DODO 69.08 SH IV 5.68 SH DOI 250.24 SH I 2120.86 SH | HWAB-CAPITA GE & COX ST VA WORLDWII DGE & COX S DODGE & COX | DE FD STOCK FD K STOCK FD | IDENDS | (b) Acqu Purch Purch Purch Purch Purch Purch | ired Adased 10 ased 12 ased ased ased | c) Date Cquired Various /11/2012 /13/2012 Various Various Various | (d) Date Sold 6/01/2013 7/23/2013 7/23/2013 7/23/2013 7/23/2013 7/23/2013 |
| <u>Item</u> 1 2 3 4 5 | (e) Gross Sales 13,795. 137. 1,212. 855. 37,677. 37,200. | (f) Deprec. Allowed | (g) Cost Basis 0. 112. 1,095. 626. 19,135. 33,691. | (h) Gain (Loss) 13,795. 25. 117. 229. 18,542. 3,509. | (i) FMV 12/31/69 | (j) Adj. Bas. 12/31/69 | (k) Excess (i)-(j) Total | (1) Gain (Loss) \$ 13,795. 25. 117. 229. 18,542. 3,509. \$ 36,217. |

Form **8868**

(Rev January 2014)

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.

►Information about Form 8868 and its instructions is at www.irs.gov/form8868.

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

OMB No 1545-1709

| If you ar | e filing for an Additional (Not Automatic) 3-Mont | h Extension | n, complete only Part II (on page 2 of th | is form | 1) | | | | |
|--|---|--|--|--|------------------------|--|--|--|--|
| Do not com | plete Part II unless you have already been grante | ed an autom | atic 3-month extention on a previously t | iled Fo | rm 8868 | | | | |
| corporation request an ex | iling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not xtension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which ming of this form, visit www irs.gov/efile and click of | t automatic) I or Part II w just be sent |) 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruct | ectronii Returi | cally file h | orm 8868 to | | | |
| Part I | Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | | | | | | | |
| A corporation | n required to file Form 990-T and requesting an | automatic 6 | -month extension - check this box and | comple | ete Part I | only - | | | |
| All other con income tax | | REMICs, ai | nd trusts must use Form 7004 to reques Enter filer's identi | fying r | umber, s | ee instructions | | | |
| T | Name of exempt organization or other filer, see instructions | | | Emplo | yer identifica | tion number (EIN) or | | | |
| Type or print | | | | | | | | | |
| • | THOMAS FAHEY FAMILY FOUNDATION Number, street, and room or suite number If a PO box, see In | | | | 393872 security num | | | | |
| File by the due date for | | istractions | | 000.01 | Sceanty Han | ibe. (oort) | | | |
| filing your return See | 9701 OVERBROOK City, town or post office, state, and ZIP code. For a foreign add. | ress see instru | ictions | ــــــــــــــــــــــــــــــــــــــ | | | | | |
| instructions | | | | | | | | | |
| | LEAWOOD, KS 66206 | | | | | | | | |
| Enter the Re | eturn code for the return that this application is fo | or (file a sep | parate application for each return) | | | 04 | | | |
| Application Is For | | Return Code | Application Is For | Application Is For | | | | | |
| Form 990 or | Form 990-EZ | 01 | Form 990-T (corporation) | | | 07 | | | |
| Form 990-BI | <u> </u> | 02 | Form 1041-A | | | 08 | | | |
| Form 4720 (II | ndividual) | 03 | Form 4720 (other than individual) | | | 09 | | | |
| Form 990-Pl | | 04 | Form 5227 | | | 10 | | | |
| Form 990-T (section 401(a) or 408(a) trust) | | 05 | Form 6069 | | | 11 | | | |
| Form 990-T | (trust other than above) | 06 | Form 8870 | | | 12 | | | |
| Telephon If the org If this is check the external the external the content of t | nsion is for | digit Group theck this b | e United States, check this box Exemption Number (GEN) ox I and attach a list with the na | | | ► [] vhole group, of all members | | | |
| | st an automatic 3-month (6 months for a corporation | | | | | | | | |
| The ex | 8/15 , 20 14 , to file the exempt organization is for the organization's return for calendar year 20 13 or tax year beginning , 20 | | | | | | | | |
| | ax year entered in line 1 is for less than 12 mont ange in accounting period | ths, check r | eason' Initial return Fi | nal retu | ırn | | | | |
| 3 a If this a nonrefu | application is for Forms 990-BL, 990-PF, 990-T, 4 undable credits. See instructions. | 1720, or 606 | 59, enter the tentative tax, less any | 3 a | \$ | 1,544. | | | |
| tax pay | application is for Forms 990-PF, 990-T, 4720, or ments made. Include any prior year overpayment | nt allowed a | is a credit | 3 b | \$ | 1,903. | | | |
| | e due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System) See | | | 3 c | | 0. | | | |
| Caution. If y payment inst | ou are going to make an electronic funds withdra tructions | awal (dırect | debit) with this Form 8868, see Form 8 | 453-EC | and For | m 8879-EO for | | | |