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990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052 2013

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

Nam	alendar year 2013 or e of foundation			2/01, 2013		A Employer ident	
MUC	CHNIC FOUNDATIO)N				48-61028	18
Num	ber and street (or P O box	number if mail is not delivered	d to street address)		Room/suite	B Telephone num	ber (see instructions)
704	NORTH 4TH STR	REET, P.O. BOX	329				•
		country, and ZIP or foreign po					
						C If exemption appli pending, check he	cation is
ATC	CHISON, KS 6600	2-2415					
3 Ch	eck all that apply	Initial return	Initial return	of a former p	ublic charity	y D 1. Foreign organiz	ations check here . >
	1	Final return	Amended re				rations meeting the
		Address change	Name chang			computation	
		on X Section 501(·	E If private foundati	on status was terminated
	Section 4947(a)(1) none		Other taxable pr			under section 507	(b)(1)(A), check here
	r market value of al	1 —	unting method X C	ash Acc	ruai		is in a 60-month termination
	d of year <i>(from Part II,</i>) ▶ \$ 9 , 94:		ther (specify) column (d) must be or	rach hacie l		- Under section 5076	(b)(1)(B), check here . ▶
		ue and Expenses (The		r casri basis)			(d) Disbursements
, art	total of amounts in column ay not necessarily e column (a) (see instruc	umns (b), (c), and (d) qual the amounts in	(a) Revenue and expenses per books	(b) Net inve	L	(c) Adjusted net income	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc	c , received (attach schedule) .					
2		indation is not required to					
3	Interest on savings and te		196.		196.		
4	Dividends and interest	from securities	258,871.	25	8,871.		
5 a	Gross rents						220
1	Net rental income or (loss)		180,250.				
⊵ 6 a	Net gain or (loss) from sa Gross sales price for all	le of assets not on line 10 926, 369.	160,230			! ij	
<u>פ</u>	assets on line 6a			18	0,250.	FEB	17.2.15
		e (from Part IV, line 2)			0,230.	(C) (Ca()	1 (. 1)
8	-	gain				"	
10 a	Gross sales less returns	}				1 (P) (
h	and allowances · · · · Less Cost of goods sold	1	<u> </u>				
	Gross profit or (loss) (a						
11	Other income (attach s	schedule) ATCH 1	57.				
12		ugh 11	439,374.		9,317.		
13	Compensation of officers,	directors, trustees, etc	2,970.		2,970.		
14	Other employee salarie	es and wages					
15	Pension plans, employ	ee benefits	1,446.				1,446
16 a		edule)	5 600				
) p	Accounting fees (attac		5,600.		5,600.		
15 16 a 17 18 19 20	Other professional feet		13,135.		3,135.		
17	Interest		5,374.		141.		
18		ee instructions)ATCH 4	3,374.		141.		
19	•	chedule) and depletion.	79,967.				79,967
20			13,301.				
21		nd meetings					
22		ns			-		
23		n schedule)					-
		23	108,492.	2	1,846.		81,413
25		ants paid	392,650.				392,650
26		ments. Add lines 24 and 25	501,142.	2	1,846.		0 474,063
27	Subtract line 26 from I						
1	Excess of revenue over exper		-61,768.				
	Net investment incom			41	7,471.		
۱ ۾	Adjusted net income (if negative enter -0-)					

*ATCH 3

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	art I	Attached schedules and amounts in the	Beginning of year	End o	f year
	CILLI	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) BOOK Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	280,538.	222,160.	222,160
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable	1 4		
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons (attach schedule) (see instructions)	[
	7	Other notes and loans receivable (attach schedule)			
	'	-	1		
m	_	Less allowance for doubtful accounts ▶	1		
ssets	8	Inventories for sale or use			
155		Prepaid expenses and deferred charges	1		
<		Investments - U S and state government obligations (attach schedule).		2 004 400	9,701,023
		Investments - corporate stock (attach schedule) ATCH 5	2,097,080.	2,094,490.	9,701,023
	11 6	Investments - corporate bonds (attach schedule).			
	' '	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	20,000.	20,000.	20,000
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			·
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item l)	2,398,418.	2,336,650.	9,943,183
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
۳	22	Other liabilities (describe			
		Other habilities (describe P			
	23	Total liabilities (add lines 17 through 22)	o	ol	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces		· -			
ä	24	Unrestricted			
Ba	25	Temporarily restricted			
힏	26	Permanently restricted			
Ī		Foundations that do not follow SFAS 117, ► X			
6		check here and complete lines 27 through 31.			
Net Assets or Fund Balanc	27	Capital stock, trust principal, or current funds			
SSE	28	Paid-in or capital surplus, or land, bldg , and equipment fund	2,398,418.	2,336,650.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	2,398,418.	2,336,650.	
Š	30	Total net assets or fund balances (see instructions)	2,390,410.	2,330,030.	
	31	Total liabilities and net assets/fund balances (see	2 200 410	2 226 650	
		instructions)	2,398,418.	2,336,650.	
		Analysis of Changes in Net Assets or Fund			
1		al net assets or fund balances at beginning of year - Part			A 200 400
		-of-year figure reported on prior year's return)			2,398,418
		er amount from Part I, line 27a		2	-61,768
		er increases not included in line 2 (itemize) ▶			
4	Add	lines 1, 2, and 3			2,336,650
5	Dec	reases not included in line 2 (itemize)		5	
6	Tota	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)), line 30 6	2,336,650

Part IV Capital Gains and Losses for Tax on Investment Income

Page	3
Page	

(a) List an	d describe the kind(s) of property sold (rick warehouse, or common stock, 200	e g , reat estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b					
С					
d					
е					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
_b					<u></u>
<u>c</u>					
d				·····	
е					
Complete only for assets	showing gain in column (h) and owne	T-		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a					
b	<u> </u>		ļ		
С			ļ		
d					
е		gain, also enter in Part I, line 7	ļ	····	
If gain, also enter in Par Part I, line 8	or (loss) as defined in sections 12 tt I, line 8, column (c) (see institution) Index Section 4940(e) for Recommendations subject to the leave this part blank	ructions) If (loss), enter -0- in duced Tax on Net Investment I		me)	
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	12	Yes X No
1 Enter the appropriate am-	ount in each column for each year	, see the instructions before making	g any entre	es	
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution re (col (b) divided by	
2012	492,826.	9,377,421.			0.052555
2011	379,444.	8,333,035.			0.045535
2010	370,729.	7,992,798.			0.046383
2009	346,528.	7,684,499.			0.045094
2008	380,477.	7,309,895.			0.052050
2 Total of line 1, column (d)			2		0.241617
3 Average distribution ratio	for the 5-year base period - divide dation has been in existence if less	e the total on line 2 by 5, or by the	3		0.048323
4 Enter the net value of nor	ncharitable-use assets for 2013 fro	m Part X, line 5	4	9,	771,548.
5 Multiply line 4 by line 3			5		472,191.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		4,175.
7 Add lines 5 and 6			7		476,366.
8 Enter qualifying distribution If line 8 is equal to or great VI instructions	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 that part	using a 1% ta	474,063. x rate See the

-01111	990-FF (2013)		42	
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	nstru	iction	s)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		, ,	175
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,.	175.
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		4,:	175.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on Investment income. Subtract line 4 from line 3 If zero or less, enter -0		4,	175.
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 7,320.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		/,.	320.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			1 4 5
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		3,.	145.
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 3,145. Refunded ▶ 11			
	t VII-A Statements Regarding Activities	···		T
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No X
	or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			x
	definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	:		
	distributed by the foundation in connection with the activities.		•	x
	Did the foundation file Form 1120-POL for this year?	_1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation (2) On foundation managers (3)			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers > \$	2		X
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 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
3	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
4	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
5	If "Yes," attach the statement required by General Instruction T.	Ť		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
Ü	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	KS,			
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)	8b	х	
	of each state as required by General Instruction G? If "No," attach explanation.	0.0		
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete	9		x
	Part XIV.			\vdash
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	10		х

Рa	rt VII-A Statements Regarding Activities (continued)		,	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	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	X	<u> </u>
	Website address ► N/A			
14	MC CURDON METER 012 2C7	-416	54	
	Located at ▶704 N. 4TH ST ATCHISON, KS ZIP+4 ▶ 66002-2	415		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16			Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Ì
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No	ł		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?]		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	1		
	of fany 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)?	1ь		Х
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
٠	were not corrected before the first day of the tax year beginning in 2013?	1c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u> </u>		
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	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?			
	to, the territory for territory together to the territory to territory			
	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		' i	
•	(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 ե		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	_20		
•				
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja				
ı.	at any time during the year?Yes X No of f "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or			
L	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			
		2.	ľ	x
4 ~	foundation had excess business holdings in 2013)	3b		$\frac{x}{x}$
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		
0	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	46	ſ	х
	chantable purpose that had not been removed from Jeopardy before the first day of the tax year beginning in 20137	4b		

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

_	
Page	- 4

Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emplo	yees,
· 3 Five h	ighest-paid independent contractors for professional services (see	instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			<u> </u>
			
		·-	
		-	
			
Total number	er of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant stati and other beneficianes served, conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1 NOT A	APPLICABLE		
•======			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		<u> </u>
Describe the	two largest program-related investments made by the foundation during the tax year on line	s 1 and 2	Amount
1 NONE			
2			
All other prog	gram-related investments. See instructions		
3 NONE			
<u> </u>			
Total Add I	ines 1 through 3		

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Page 8 Form 990-PF (2013) Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.) 1. Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1a 2,199,440. a Average monthly fair market value of securities 295,518. 1b 7,425,395. Fair market value of all other assets (see instructions) 9,920,353. 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition indebtedness applicable to line 1 assets 9,920,353. 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 148,805. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 9,771,548. 5 5 488,577. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ ☐ and do not complete this part) 488,577. Tax on investment income for 2013 from Part VI, line 5 ______ 2a Income tax for 2013. (This does not include the tax from Part VI) 2b 4,175. 2c Add lines 2a and 2b 484,402. Distributable amount before adjustments Subtract line 2c from line 1, 3 3 Recoveries of amounts treated as qualifying distributions 4 484,402. 5 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 484,402. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 474,063. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 474,063. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

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4,175.

469,888.

5

5

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Рa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
•			-,		484,402.
2	Undistributed income, if any, as of the end of 2013				
а	Enter amount for 2012 only				
b	Total for pnor years 20 11 ,20 10 ,20 09				
3	Excess distributions carryover, if any, to 2013				
а	From 2008				
b	From 2009				
_	From 2010				
d	From 2011				Į
e	From 2012 12,637.				
	Total of lines 3a through e	12,637.			
	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 474,063.				
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount				474,063.
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013	10,339.			10,339.
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	2,298.			
	Prior years' undistributed income Subtract				
С	Inne 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions				
	instructions				
f	Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	2,298.			
10	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				

Form **990-PF**(2013)

2	mormation Regarding Contribution, Grant, Girt, Loan, Scholarship, etc., Programs.
	Check here ▶ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d
a	The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
	ATCH 7
b	The form in which applications should be submitted and information and materials they should include
	ATCH 8
С	Any submission deadlines
	OCTOBER 31
d	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

NONE

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factors

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Part	XV Supplementary Information (continued)			
3 (Grants and Contributions Paid Duri	ng the Year or Appr	oved for I	Future Payment	T
	Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Name and address (nome or business)	or substantial contributor	recipient		
a /	Paid during the year		ĺ		
አ ጥር	СН 9				
AIC	.11 9				
		1			
		İ	}		
		-			
				}	
					,
	Total		· · · · · ·		392,650
b /	Approved for future payment				
		1			
		1			
		1			
				1	
	Total		ь		
	Total	 		<u> </u>	<u> </u>

ter gross amounts unless otherwise indicated	1	ated business income	Excluded by se	ection 512, 513, or 514	(e)
·	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income (See instructions)
Program service revenue a			2.223.57 5535		(See instructions)
b					
d					
e	<u> </u>				
f					
g Fees and contracts from government agencies Membership dues and assessments			 		
Interest on savings and temporary cash investments	<u> </u>		14	196.	
Dividends and interest from securities			14	258,871.	
Net rental income or (loss) from real estate					
a Debt-financed property		· · · · · · · · · · · · · · · · · · ·			
b Not debt-financed property	1				
Net rental income or (loss) from personal property					
Other investment income	1		18	180,250.	
Net income or (loss) from special events		<u> </u>			
Gross profit or (loss) from sales of inventory.					
Other revenue: a					
ATCH 10		·-		57.	
•			 		
<u> </u>					
			+	439,374.	
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activities	ulations) to the Ac	complishment of E	xempt Purpos	13	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activities le No. Explain below how each activit accomplishment of the foundation	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activities e No. Explain below how each activity	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce t XVI-B Relationship of Activities e No. Explain below how each activity	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
otal. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions to verify calc t XVI-B Relationship of Activities e No. Explain below how each activit	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activities e No. Explain below how each activity	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to
rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activities e No. Explain below how each activity	tulations) s to the Ac	complishment of E	xempt Purpos	es of Part XVI-A contribu	ted importantly to

JSA

Part	XVII	Exempt Organ	•	ansiers to and	Transactio	nis anu Re	riationsnip	S WILL NOU	Snari	labie	;
1 1	Did th	e organization direct		engage in any of the	ne following	with any oth	er organizati	on described		Yes	No
		tion 501(c) of the Co									
		izations?	,	, , ,		•	•	•			
а`	Trans	fers from the reportin	ig foundation to	o a noncharitable ex	empt organiz	ation of					
(1) Ca	ash		·					1a(1)		<u> </u>
(2) 01	her assets							1a(2)		X
		transactions									
		ales of assets to a no							1b(1)		<u>X</u>
		irchases of assets fro							1b(2)		X
		ental of facilities, equi							1b(3)		X
		embursement arrange							1b(4)		$\frac{\Lambda}{X}$
		ans or loan guarantee									$\frac{x}{x}$
		erformance of serviceing of facilities, equipn									X
		answer to any of th	_							fair m	
		of the goods, other									
		in any transaction or	•	•							
(a) Lin		(b) Amount involved		noncharitable exempt orga				nsactions, and shar			
		N/A				N/A			· 		
_								<u> </u>			
								_			
								_			
		 									
											
											
		 									
											
					·			_			
	-										
			 	.							
								-			
2a	s the	foundation directly	or indirectly at	ffiliated with or rela	ated to one	or more tax	exempt ora	anizations			
		bed in section 501(c)	•	•			, ,		Ye	s X	No
		s," complete the follo	•								•
		(a) Name of organization		(b) Type of o	rganization		(c) Des	cription of relations	hip		
							 		_		
											
				<u></u>							
		r penalties of begury declar ct and omplete Declaration of	re hat I have exam prepare (other han	nined this return, including a taxpayer) is based on all inform	ccompanying sche nation of which pre	dules and stateme eparer has any know	ints, and to the b viedge	est of my knowledg	e and b	elief, it i	s true
Sign			$\mathcal{L}\mathcal{L}\mathcal{L}$	1/20	1,-	Dna		May the IRS	discuss	s this	retum
Here	S10	nature of afficer or trustee		Date	//3	the Property		with the pre			\neg
	Sig	nature of officer or trustee		Date	ı	ıu¢		(see instruction:	5)7 🔼	Yes	No
		Print/Type preparer's nai	me	Preparer's signature		Dat	e .	Check If F	TIN		
Paid		MEGHAN S WHIT		Mishan			115/15	Oileok		3639	1
>rep	arer		W & ASSOCI				Firm's				
Jse (DD, SUITE 100			1				

913-499-4920

OVERLAND PARK,

KS

Phone no

66202

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

Employer identification number

2013

OMB No 1545-0092

MUCHNIC FOUNDATION			48-61028	18	
Note: Form 5227 filers need to complete only Parts I and II.			4		-
Part I Short-Term Capital Gains and Losses - Ass	ets Held One Year	r or Less		-	
See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on Form(s) 8949 with Box B checked					
Totals for all transactions reported on Form(s) 8949 with Box C checked	-4,315.				-4,315.
4 Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
 Net short-term gain or (loss) from partnerships, S cor Short-term capital loss carryover. Enter the amount Carryover Worksheet 	nt, if any, from line	9 of the 2012		5 6	()
7 Net short-term capital gain or (loss). Combine line line 17, column (3) on the back				7	-4,315.
Part II Long-Term Capital Gains and Losses - Ass	ets Held More I ha	n One Year	<u> </u>		· · · · · · · · · · · · · · · · · · ·
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss fi	rom	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Form(s) 8949, Pa line 2, column		combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	184,565.				184,565.
11 Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	8824		11	
12 Net long-term gain or (loss) from partnerships, S corp	oorations, and other e	states or trusts		12	
13 Capital gain distributions				13	
 14 Gain from Form 4797, Part I. 15 Long-term capital loss carryover Enter the amount Carryover Worksheet 	t, if any, from line	14 of the 2012	Capital Loss	14	()
16 Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	8 8a through 15 in	column (h) Enter	here and on	16	184,565.

• • • • • • • • • • • • • • • • • • • •					
Pa	rt III Summary of Parts I and II Caution: Read the instructions before completing this part		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17			-4,315.
18	Net long-term gain or (loss):				·—
а	Total for year	8a			184,565.
		8b			
c	28% rate gain	8c			
		19			180,250.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessarv

Part IV **Capital Loss Limitation**

Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of 20 Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

Tax Computation Using Maximum Capital Gains Rates

- Either line 18b, col (2) or line 18c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col (2) or line 18c, col. (2) is more than zero

21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	21			
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero]			
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T)				
24	Add lines 22 and 23]		ŀ	
25	If the estate or trust is filing Form 4952, enter the			ļ	
	amount from line 4g, otherwise, enter -0 ▶ 25			İ	
26	Subtract line 25 from line 24 If zero or less, enter -0-	26			
27	Subtract line 26 from line 21. If zero or less, enter -0-	27			
28	Enter the smaller of the amount on line 21 or \$2,450	28			
29	Enter the smaller of the amount on line 27 or line 28	29			
30	Subtract line 29 from line 28. If zero or less, enter -0- This amount is taxed at	0%	>	30	
31	Enter the smaller of line 21 or line 26	31			
32	Subtract line 30 from line 26	32			
33	Enter the smaller of line 21 or \$11,950	33			
34	Add lines 27 and 30	34		}	
35	Subtract line 34 from line 33 If zero or less, enter -0-	35			
36	Enter the smaller of line 32 or line 35	36			
37	Multiply line 36 by 15%	,		37	
38	Enter the amount from line 31	38			
39	Add lines 30 and 36	39			
40	Subtract line 39 from line 38 If zero or less, enter -0	40		j	
41	Multiply line 40 by 20%	,		41	
42	Figure the tax on the amount on line 27. Use the 2013 Tax Rate Schedule for Estates				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42			
43	Add lines 37, 41, and 42	43		}	
44	Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for Estates				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44			
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and	on Fo	rm 1041, Schedule		
	G, line 1a (or Form 990-T, line 36)			45	

Sales and Other Dispositions of Capital Assets

▶Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return MUCHNIC FOUNDATION Social security number or taxpayer identification number 48-6102818

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2 Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions). You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

X (C) Short	-term transactions no	t reported to you	on Form 1099	-B				
1	(a) ption of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss). Subtract column (e)	
	100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo , day, yr)	(sales pnce) (see instructions)		(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
JP MORGAN	#5002-ST			-4,315.				-4,315
			-					
 								
		 						
		<u> </u>						
act negative your Schedu	the amounts in columne amounts) Enter eacule D, line 1b (if Box A e is checked), or line 3	h total here an above is check	d include on ed), line 2 (if	-4,315.				-4,315

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2013)	Attachment Sequence No 12A	ray
Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side)	Social security number or taxpayer identification number	
MUCHNIC FOUNDATION	48-6102818	

'Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Part II

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or

m	ore	e of the boxes, complete as many forms with the same box checked as you need.
		(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
l		(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(a) Description of property	Date acquired	(c) Date sold or disposed		(e) Cost or other basis See the	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
JP MORGAN #5002-LT			184,565.				184,565
			_				
2 Table Add the amounts in	olumno (d) (c)	(a) and (b)					
2 Totals. Add the amounts in co (subtract negative amounts) include on your Schedule D, I checked), line 9 (if Box E abo (if Box F above is checked) ▶	Enter each tota ine 8b (if Box D	I here and above is	184,565.				184,565.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

48-6102818

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

<u>DESCRIPTION</u>
MISCELLANEOUS REFUNDS

57.

TOTALS

57.

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,600.	5,600.
REVENUE AND EXPENSES PER BOOKS	2,600.	5,600.
		TOTALS
DESCRIPTION	TAX PREPARATION FEES	

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

EXPENSES PER BOOKS REVENUE AND DESCRIPTION

NET INVESTMENT INCOME

13,135. 13,135.

INVESTMENT ADVISORY FEES

13,135.

13, 135.

TOTALS

ATTACHMENT

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- TAXES PART I FORM 990PF,

NET INVESTMENT INCOME	3. 0. 1. 141.	141.
REVENUE AND EXPENSES PER BOOKS	5,193. 40. 141.	5,374.
DESCRIPTION	1ST QTR ESTIMATED TAX PAID SECRETARY OF STATE FOREIGN TAXES PAID	TOTALS

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FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>FMV</u>	2,148,543. 7,552,480. 9,701,023.
ENDING BOOK VALUE	1,507,740. 586,750. 2,094,490.
BEGINNING BOOK VALUE	1,511,130. 586,750. 2,097,880.
	TOTALS
DESCRIPTION	JPMORGAN #5002 VALLEY COMPANY

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

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0	0
COMPENSATION	0	0	0	2,970.	2,970.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT 1.00	DIRECTOR 1.00	DIRECTOR 1.00	SECRETARY-TREASURER 3.50	GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

SHARON MEIER 704 N. 4TH ST ATCHISON, KS 66002-2415 913-367-4164

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

NO PARTICULAR FORM - PURPOSE OF APPLICATION - LARGE BROCHURES NOT HELPFUL

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ATCHISON LIBRARY	N/A	TO DEVELOP AND IMPLEMENT A PROGRAM OF LIBRARY	8,000.
401 KANSAS AVE	PC	SERVICES.	
ATCHISON, KS 66002			
MOUNT VERNON ENDOWMENT CORP.	N/A	BURIAL ASSOCIATION	2,000.
P.O. BOX 33	PC		
ATCHISON, KS 66002			
MOUNT COMMUNITY CENTER	N/A	TO EMPOWER WOMEN IN THE URBAN CORE OF KANSAS CITY	5,000.
801 SOUTH 8TH ST.	PC	THROUGH EDUCATION, ADVOCACY, PERSONAL AND	
ATCHISON, KS 66002		SPIRITUAL DEVELOPMENT.	
HUMANE SOCIETY OF ATCHISON	N/N	TO PROVIDE CARE AND SHELTER FOR ANIMALS.	9,150.
100 NORTH 21ST	PC		
ATCHISON, KS 66002			
WORLD WILDLIFE FUND INC.	N/A	TO PRESERVE THE DIVERSITY AND ABUNDANCE OF LIFE	5,000.
1250 TWENTY-FOURTH ST. NW	PC	ON EARTH AND THE HEALTH OF ECOLOGICAL SYSTEMS BY	
WASHINGTON, DC 20037		PROTECTING NATURAL AREAS AND WILD POPULATIONS OF	
		PLANTS AND ANIMALS, INCLUDING ENDANGERED SPECIES.	
NEGRO LEAGUES MUSEUM	N/A	TO OPERATE A SPORTS MUSEUM, AND MAINTAIN THE	1,000.
1616 EAST 18TH ST	PC	NEGRO LEAGUES BASEBALL MUSEUM AS A NATIONAL	
KANSAS CITY, MO 64108		ARCHIVE FOR NEGRO BASEBALL SPORTS MEMORBILA.	

48-6102818

ATTACHMENT 9 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UPPER ROOM	N/A	TO BREAK THE CYCLE OF POVERTY THAT RESTRICTS THE	3,000.
5930 SWOPE PARKWAY	PC	ECONOMIC WELL BEING OF INNER CITY FAMILIES BY	
KANSAS CITY, MO 64130		PROVIDING LIFE LONG LEARNING OPPORTUNITIES	
NELSON GALLERY FOUNDATION	N/A	ENCOURAGEMENT OF PUBLIC INTEREST IN ART.	12,000.
4525 OAK STREET	PC		
KANSAS CITY, MO 64111			
FRICK COLLECTION	N/A	THE COLLECTION OPERATES AN INTERNATIONALLY	2,000.
1 EAST 70TH ST.	PC	RECOGNIZED ART MUSEUM AND ART HISTORICAL RESEARCH	
NEW YORK, NY 10021		CENTER FOR THE INSPIRATION AND ENJOYMENT OF THE	
		PUBLIC AND FOR THE ADVANCEMENT OF THE STUDY OF	
		FINE ARTS AND KINDRED SUBJECTS.	
RAINBOW MEADOWS EQUINE RESCUE 6 RETIREMENT	N/A	HORSE RESCUE AND RETIREMENT.	2,000.
1949 DALTON ROAD	PC		
SEDAN, KS 67361			
OPERATION BREAKTHROUGH	N/A	TO HELP CHILDREN WHO ARE LIVING IN POVERTY	5,000.
3039 TROOST AVE	PC	DEVELOP TO THEIR FULLEST POTENTIAL BY PROVIDING	
KANSAS CITY, MO 64109		THEM A SAFE, LOVING, AND EDUCATIONAL ENVIRONMENT.	
NATURE CONSERVANCY	N/A	TO PROTECT ECOLOGICALLY IMPORTANT LANDS AND	5,000.
5410 GROSVENOR LANE, SUITE 100	PC	WATERS FOR NATURE AND PEOPLE.	
BETHESDA, MD 20814			

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PAWS	N/A	TO REHABILITATE INJURED AND ORPHANED WILDLIFE,	5,000.
P.O. BOX 1037	PC	SHELTERING AND ADOPTING HOMELESS CATS AND DOGS,	
LINNACCO, MA SOCIO		AND EDUCATIONS FEOFIE: 10 MANG A BELLEN WORLD FOR ANIMALS AND PEOPLE.	
ATCHISON ART ASSOCIATION	N/A	TO ADVOCATE ART AND IMROVE THE LIVES AND	45,000.
704 NORTH 4TH ST	PC	LIVABILITY OF THE ATCHISON COMMUNITY THROUGH	
ATCHISON, KS 66002		EDUCATION, OUTREACH PROJECTS, EVENTS AND	
		EXHIBITIONS.	
BENEDICTINE COLLEGE	N/A	TO PROVIDE SCHOLARSHIPS FOR STUDENTS AND FUNDS TO	15,000.
1020 NORTH 2ND ST	PC	FURTHER THE ENDEAVORS OF THE COLLEGE.	
ATCHISON, KS 66002			
DUKE UNIVERSITY	N/A	TO PROVIDE SCHOLARSHIPS FOR STUDENTS.	35,000.
P.O. BOX 90600	20		
DURHAM, NC 27708			
ROSS SCHOOL	N/A	TO PROVIDE SCHOLARSHIPS FOR STUDENTS.	11,000.
1800 GOODFRIEND DRIVE, SUITE 4	PC		
EAST HAMPTON, NY 11937			
DELASALLE EDUCATION CENTER	N/A	TO PROVIDE A HOLISTIC ENVIRONMENT THAT OFFERS	2,000.
3740 FOREST AVE	PC	STUDENTS AN OPPORTUNITY TO IMPROVE LEARNING AND	
KANSAS CITY, MO 64109		LIFE SKILLS.	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DARTMOUTH COLLEGE	N/A	TO EDUCATE THE MOST PROMISING STUDENTS AND	5,000.
ADMINISTRATIVE OFFICE	PC	PREPARES THEM FOR A LIFETIME OF LEARNING AND OF	
HANOVER, NH 03755		RESPONSIBLE LEADERSHIP, THROUGH A FACULTY	
		DEDICATED TO TEACHING AND THE CREATION OF	
		KNOWLEDGE.	
HOOD MUSEUM OF ART	N/A	TO CREATE AN IDEAL LEARNING ENVIRONMENT THAT	1,000.
DARIMOUTH COLLEGE	PC	FOSTERS TRANSFORMATIVE ENCOUNTERS WITH WORKS OF	
HANOVER, NH 03755		ART.	
PEMBROKE HILL SCHOOL	N/A	TO HELP EACH STUDENT TO BUILD CHARACTER AND TO	1,000.
5121 STATE LINE BLVE.	PC	DEVELOP THEIR INTELLECTUAL, PHYSICAL AND CREATIVE	
KANSAS CITY, MO 64112		ABILITIES TO THE HIGHEST LEVEL.	
ATCHIGON HOEDITAL ANXILIABY	a/2	TO PROVIDE HEALTH CARE TO THE PUBLIC.	1,000.
Caoa IIIn Mayaa Goo	, La		
ATCHISON, KS 66002			
DOCTORS WITHOUT BORDERS	N/A	TO AID VICTIMS OF ARMED CONFLICT, EPIDEMICS,	8,000.
P.O. BOX 1856	PC	NATURAL AND MAN-MADE DISASTERS, AND SOCIAL	
MERRIFIELD, MA 22116		MARGINALIZATION.	
CYSTIC FIBROSIS FOUNDATION	N/A	TO CURE CYSTIC FIBROSIS AND TO PROVIDE ALL PEOPLE	10,000.
260 CHATHAM DR.	PC	WITH THE DISEASE THE OPPORTUNITY TO LEAD FULL,	
COLORADO SPRINGS, CO 80905		PRODUCTIVE LIVES BY FUNDING RESEARCH AND DRUG	
		DEVELOPMENT, PROMOTING INDIVIDUALIZED TREATMENT,	
		AND ENSURING ACCESS TO HIGH-QUALITY, SPECIALIZED	
		CARE.	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST. JUDE CHILDREN'S RESEARCH HOSPITAL	N/A	TO FIND CURES AND MEANS OF PREVENTION FOR	5,000.
501 ST. JUDE PLACE	PC	CHILDHOOD CATASTROPHIC DISEASES THROUGH RESEARCH	
MEMPHIS, TN 38105		AND TREATMENT.	
ROSE BROOKS	N/A	TO PROVIDE SANCTUARY AND SERVICES FOR WOMEN AND	4,000.
P.O. BOX 320599	22	CHILDREN WHO ARE VICTIMS OF DOMESTIC VIOLENCE.	
KANSAS CITY, MO 64132			
BOYS & GIRLS CLUB	N/A	TO PROMOTE THE DEVELOPMENT OF SELF-ESTEEM,	5,000.
6301 ROCKHILL RD., SUITE 303	PC PC	VALUES, AND SKILLS FOR BOYS AND GIRLS, AGES 5 TO	
KANSAS CITY, MO 64131		18, WITH SPECIAL EMPHASIS ON YOUTH FROM	
		DISADVANTAGED CIRCUMSTANCES.	
MOTHER TO MOTHER MINISTRY	N/A	TO ASSIST CAREGIVERS OF MINOR CHILDREN THROUGH	2,000.
3436 N. 27TH ST.	PC	SUPPORTIVE FRIENDSHIPS THAT PROMOTE FAMILY	
KANSAS CITY, KS 66104		GROWTH.	
EAST END HOSPICE	N/A	TO PROVIDE HOSPICE CARE.	1,000.
P.O. BOX 1048	PC		
WESTHOMPTON BEACH, NY 11978			
SALVATION ARMY	N/A	TO PREACH THE GOSPEL OF JESUS CHRIST AND TO MEET	2,000.
P.O. BOX 84	22	HUMAN NEEDS WITHOUT DISCRIMINATION.	
ATCHISON, KS 66002			

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	. 0000, 5	1,000.	10,000.	10,000.	2,000.	7,500.
PURPOSE OF GRANT OR CONTRIBUTION	TO PROVIDE A SANCTUARY FOR PRAYFUL WORSHIP WITHIN A RESPECTFUL AND WELCOMING ENVIRONMENT AND TO MEET THE NEEDS OF OUR PARISHIONERS AND COMMUNITY, USING CHRISTIAN IDEAS AND VALUES.	TO FOSTER, DEVELOP AND CONTRIBUTE TO THE SUPPORT OF THE RELIGIOUS, EDUCATIONAL AND CHARITABLE WORK OF THE EPISCOPAL CHURCH IN THE DIOCESE OF LONG ISLAND.	TO PROTECT PEOPLE'S HEALTH, TO PRESERVE MAGNIFICENT PLACES AND WILDLIFE, TO ADVANCE CLEAN ENERGY, AND TO COMBAT CLIMATE CHANGE.	TO AUGMENT ANTI-TUMOR IMMUNITY TARGETING MULTIPLE MYELOMA.	TO HIGHTEN AWARENESS, PROMOTE GOODWILL AND MAXIMIZE PRIVATE PHILANTROPY TO ADVANCE AND SITENGTHEN THE MISSION AND VISION OF SOUTHAMPTON HOSPITAL ASSOCIATION., A RELATED 501(C)(3) ORG.	TO SUPPORT THE MOST EFFECTIVE POVERTY-FIGHTING PROGRAMS THROUGHOUT NYC.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC	N/A PC
RECIPIENT NAME AND ADDRESS	TRINITY EPISCOPAL CHURCH 300 SOUH 5TH ST. ATCHISON, KS 66002	ST. THOMAS CHAPEL P.O. BOX 103 AMAGASETT, NY 11930	EARTH JUSTICE 50 CALIFORNIA STREET, SUITE 500 SAN FRANCISCO, CA 94111	IVAN BORRELLO MYELOMA PROGRAM JOHN HOPKINS HOSPITAL 1650 ORLEANS ST. BALTIMORE, MD 21231	SOUTHAMPTON HOSPITAL FOUNDATION 240 MEETING HOUSE LANE SOUTHAMPTON, NY 11968	ROBIN HOOD FOUNDATION 826 BROADWAY 9TH FLOOR NEW YORK, NY 10003

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THEATRE ATCHISON	N/A	TO PROMOTE THEATER APPRECIATION.	1,500.
401 SANTA FE	PC		
ATCHISON, KS 66002			
BARD COLLEGE	N/A	TO PROVIDE A CHALLENGING ACADEMIC PROGRAM AND A	. 000 .
30 CAMPUS RD	PC	SUPPORTIVE ENVIRONMENT THAT FOSTERS A	
ANNANDALE-ON-HUDSON, NY 12504		COLLABORATIVE INTERCHANGE OF IDEAS IN THE	
		CLASSROOM AS WELL AS AMBITION TO ACHIEVE	
		EXCELLENCE.	
BRIGHTFOCUS FOUNDATION	N/A	TO SUPPORT RESEARCH AND PROVID PUBLIC EDUCATION	5,000.
22512 GATEWAY CENTER DRIVE	PC	TO HELP ERADICATE BRAIN AND EYE DISEASES,	
CLARKSBURG, MD 20871		INCLUDING ALZHEIMER'S DISEASE, MACULAR	
		DEGENERATION, AND GLAUCOMA.	
SAINT FRANCIS ACADEMY	N/A	TO PROVIDE SCHOLARSHIPS FOR STUDENTS.	20,000.
P.O. BOX 1340	PC		
SALINA, KS 67402			
ATCHISON FAMILY YMCA	N/A	TO ENRICH THE QUALITY OF FAMILY, SPIRITUAL,	7,000.
321 COMMERCIAL STREET	PC	SOCIAL, MENTAL AND PHYSICAL WELL-BEING.	
ATCHISON, KS 66002			
UNITED WAY ATCHISON AREA	N/A	TO IMPROVE LIVES BY MOBILIZING THE CARING POWER	10,000.
625 COMMERCIAL, SUTE 7	PC	OF COMMUNITIES AROUND THE WORLD TO ADVANCE THE	
ATCHISON, KS 66002		COMMON GOOD.	

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ATTACHMENT 9 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Page 1971 Page 1972 Page 2972 Page		RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
FC		AND		
TY FOUNDATION BC DE SHOUTE A VOLUMTEEN'S VOICE IN COURT FOR CHILDREN WIN OAE VICTIES OF ABUSE, NEGLECT OR DOMESTIC CONFLICT AND PROMOTES COMPOUNTY AMARRIESS OF THESE ISSUES TO ENGUE SAFE AND PERMANENT HOMES. TO PROVIDE HELP, HORE AND PERMANENT FOR VICTIES OF CHILD ABUSE. TO PROVIDE HELP, HORE AND HEALING FOR VICTIES OF CHILD ABUSE. THE POUNDATION WIAH PROVIDE A TOW, SAFE, POSITIVE ENVIRONMENT WHERE WE ENABLE EVERY YOUNG PERSON TO ENTLED INTO CARING, HEALING, HEALING, HEALING, HEALING, ONE THEIRE OF CONCREGATION, ONE THEIRE THE BOMELESS THROUGH "ONE CONGREGATION, ONE THE WILL MEANING THE PROVIDE OF HOWTROSE. WAA THE WILL HEALING THE WEEKERD WITH KIDS ALD MONTROSE. THE VOLL HEALING ONE PROVIDE SUPPORT TO THE MERKERD TO THE MONTROSE OUNTY, COLORADO THE VOLL MEANING. SERVICES AND ACCESS BETTITHIG GREAT PUBLIC LIBRARIES. WAA HONTROSE COUNTY ANTISTIC COMMUNITY.	RECIPIENT NAME AND ADDRESS	_ !	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DOMESTIC CONFLICT AND PROMOTES COMMONITY AMARRES OF THESE ISSUES TO ENSURE SAFE AND PERMANENT HOMES. TO PROVIDE HELP, HOPE AND HEALING FOR VICTIMS OF CHILD ABUSE. TO PROVIDE A FUN, SAFE, POSITIVE ENVIRONBENT WHERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP INTO CARING, HEALINH, RESPONSIBLE CITIZENS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. N/A N/A HELPING THE WORKEND WITH KIDS ALD MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE. TO ENSURE THE WEEKEND WITH KIDS ALD MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE. TO PROVIDE SUPPORT TO THE ACCESS BEFITTING GREAT FUBLIS. TO PROVIDE SUPPORT TO THE ACCESS BEFITTING GREAT FUBLIS. TO PROVIDE SUPPORT TO THE ACCESS BEFITTING GREAT FUBLIS. TO PROVIDE SUPPORT TO THE ACCESS BEFITTING GREAT FUBLIS. TO PROVIDE SUPPORT TO THE ACCESS BEFITTING GREAT FUBLIS. TO PROVIDE SUPPORT ANTISTIC COMMUNITY.	CASA OF THE PIKES PEAK REGION, INC 701 S. CASCADE AVE.	PC	TO PROVIDE A VOLUNTEER'S VOICE IN COURT FOR CHILDREN WHO ARE VICTIMS OF ABUSE, NEGLECT OR	7,000.
TICT CHILD ADVOCACY CENTER N/A PC HILD ABUSE. TO PROVIDE A FUN, SAFE, HOPE AND HEALING FOR VICTIMS OF CHILD ABUSE. TO PROVIDE A FUN, SAFE, POSITIVE ENVIRONMENT WHERE WE ENABLE EVERY YOUNG PERSON TO DEVALOP INTO CARING, HEALINY, RESPONSIBLE CITIERNS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. HELPING THE HOMELESS THROUGH "ONE CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. OSE COUNTY FOUNDATION N/A TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY, COLORADO TO ENSURE THE PEDEVE OF MONTROSE COUNTY NATISTIC COMMONITY.	COLORADO SPRINGS, CO 80903		DOMESTIC CONFLICT AND PROMOTES COMMUNITY AWARENESS OF THESE ISSUES TO ENSURE SAFE AND PERMANENT HOMES.	
CHILD ABUSE. AND GIRLS CLUB N/A PC PC PC PC PC PC PCPOVIDE A FUN, SAFE, POSITIVE ENVIRONEMENT WHERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP INTO CARING, HEALTHY, RESPONSIBLE CITIZENS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. HELPING THE HOWELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS ALD MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FILL HEAGURE OF RESOURCES, SERVICES AND ACCESS BETITING GREAT PUBLIC LIBRARIES. TO PROVID SNAT PUBLIC LIBRARIES. TO PROVIDS SUPPORT TO THE MONTROSE COUNTY ANTISTIC COMMONITY.	7TH JUDICIAL DISTRICT CHILD ADVOCACY CENTER	N/A	TO PROVIDE HELP, HOPE AND HEALING FOR VICTIMS OF	5,000.
AND GIRLS CLUB PC ROOTED TO PROVIDE A FUN, SAFE, POSITIVE ENVIRONBENT WHERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP INTO CARING, HEALTHY, RESPONSIBLE CITIZENS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. HELPING THE HOMELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE WEEKEND WITH KIDS AID MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PC HONTROSE COUNTY ANTISTIC COMMUNITY.	735 SOUTH 1ST STREET	D4	CHILD ABUSE.	
AND GIRLS CLUB PC PC HERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP INTO CARING, HEALTHY, RESPONSIBLE CITIZENS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. PC HELPING THE HOMELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE HOMELES AND A	ROSE, CO 81401			
HERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP INTO CARING, HEALTHY, RESPONSIBLE CITIZENS WITH ATTAINABLE GOALS FOR A GREAT FUTURE. PC HELPING THE HOMELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE MONTROSE COUNTY TO THE HONTROSE COUNTY ATTISTIC COMMUNITY.	CANYON BOYS AND GIRLS CLUB	N/A	TO PROVIDE A FUN, SAFE, POSITIVE ENVIRONMENT	5,000.
ROSE INC N/A ROSE INC N/A HELPING THE HOMELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ANTISTIC COMMUNIX.	BOX 1907	PC	WHERE WE ENABLE EVERY YOUNG PERSON TO DEVELOP	
ROSE INC ROSE INC ROSE INC RELPING THE HOMELESS THROUGH "ONE CONGREGATION, ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BETITING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ARTISTIC COMMUNITY.	ROSE, CO 81402		INTO CARING, HEALTHY, RESPONSIBLE CITIZENS WITH	
HELPING THE HOWELESS THROUGH "ONE FRAILY" AND IN PROVIDING MEALS FOR CHILDREN OVER THE WEEKEND WITH KIDS AID MONTROSE. TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT FUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PC HONTROSE COUNTY ARTISTIC COMMUNITY.			ATTAINABLE GOALS FOR A GREAT FUTURE.	
ONE THE WEEKEND WITH KIDS AID MONTROSE. OSE COUNTY FOUNDATION N/A TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ARTISTIC COMMUNITY.	ON GROUND MONTROSE INC	N/A	HELPING THE HOMELESS THROUGH "ONE CONGREGATION,	5,000.
OVER THE WEEKEND WITH KIDS AID MONTROSE. OSE COUNTY FOUNDATION PC TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ARTISTIC COMMUNITY.	6450 RD	PC	ONE FAMILY" AND IN PROVIDING MEALS FOR CHILDREN	
N/A PC THE FULL MEASURE OF MONTROSE COUNTY, COLORADO THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITTING GREAT PUBLIC LIBRARIES. TO PROVIDE SUPPORT TO THE PC MONTROSE COUNTY ARTISTIC COMMUNITY.	NOSE, CO 81401		OVER THE WEEKEND WITH KIDS AID MONTROSE.	
PC THE FULL MEASURE OF RESOURCES, SERVICES AND ACCESS BEFITING GREAT PUBLIC LIBRARIES. N/A TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ARTISTIC COMMUNITY.	ARIES OF MONTROSE COUNTY FOUNDATION	N/A	TO ENSURE THE PEOPLE OF MONTROSE COUNTY, COLORADO	5,000.
ACCESS BEFITTING GREAT PUBLIC LIBRARIES. IO PROVIDE SUPPORT TO THE PC MONTROSE COUNTY ARTISTIC COMMUNITY.	SOUTH 2ND ST.	PC	THE FULL MEASURE OF RESOURCES, SERVICES AND	
N/A TO PROVIDE SUPPORT TO THE MONTROSE COUNTY ARTISTIC COMMUNITY.	ROSE, CO 81401		ACCESS BEFITTING GREAT PUBLIC LIBRARIES.	
PC	ROSE ARTS COUNCIL INC	N/A	TO PROVIDE SUPPORT TO THE	5,000.
ROSE, CO 81402	BOX 2123	PC	MONTROSE COUNTY ARTISTIC COMMUNITY.	
	ROSE, CO 81402			

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MONTROSE MEMORIAL HOSPITAL	N/A	TO PROVIDE HIGH QUALITY ACCESSIBLE HEALTHCARE FOR	5,000.
800 S. 3RD STREET	PC	THE PEOPLE OF MONTROSE COUNTY AND SURROUNDING	
MONTROSE, CO 81401		AREAS.	
VALLEY SYMPHONY ASSOCIATION	N/A	TO PROVIDE COMMUNITY CONCERTS.	5,000.
MONTROSE, CO 81402	PC		
MONTROSE ANIMAL SHELTER	N/A	TO ENFORCE THE ANIMAL CONTROL ORDINANCES TO	5,000.
3383 NORTH TOWNSEND AVE		PROTECT THE HEALTH AND WELFARE OF THE CITIZENS OF	
MONTROSE, CO 81401		THE CITY OF MONTROSE.	
INTERNATIONAL RESCUE COMMITTEE, INC.	N/A	TO RESPOND TO THE WORLD'S WORST HUMANITARIAN	10,000.
122 EAST 42ND ST, 124 FLOOR	PC .	CRISES AND HELPS PEOPLE TO SURVIVE AND REBUILD	
NEW YORK, NY 10168		THEIR LIVES.	
WOODLAND PARK ZOOLOGICAL SOCIETY	N/A	TO SAVE ANIMALS AND THEIR HABITATS THROUGH	5,000.
5500 PHINNEY AVE. H	PC	CONSERVATION LEADERSHIP AND ENGAGING EXPERIENCES,	
SEATTLE, WA 98103		INSPIRING PEOPLE TO LEARN, CARE AND ACT.	
THE CHILDRENS SCHOLARSHIP FUND	N/A	TO PROVIDE PARTIAL TUITION ASSISTANCE TO HELP	3,000.
8 W 38TH ST PTH FL	PC	DISADVANTAGED CHILDREN GAIN ACCESS TO THE	
NEW YORK, NY 10018		ELEMENTARY SCHOOLS OF THEIR CHOICE.	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRAMERCY PARK BLOCK ASSOCIATION INC	N/A	TO EDUCATE THE POPULATION OF THE AREA KNOWN AS	1,500.
34 GRAMERCY PARK E	PC	GRAMERCY PARK AS TO THE SAFETY AND SECURITY	
NEW YORK, NY 10003		ISSUES IN THIS HISTORIC NEIGHBORHOOD, AND TO	
		BRING ABOUT CIVIC BETTERMENT IN ORDER TO PROMOTE	
		THE WELL-BEING OF THOSE WHO LIVE AND/OR WORK IN	
		THE GREATER GRAMERCY PARK AREA.	
EAST HAMPTON HEALTHCARE FOUNDATION	N/A	TO IMPROVE THE AVAILABILITY AND QUALITY OF	4,000.
200 PANTIGO PI	PC	HEALTHCARE SERVICES IN THE TOWN OF EAST HAMPTON,	
EAST HAMPTON, NY 11937		NY FOR THE BENEFIT OFTHE GENERAL PUBLIC,	
		INCLUDING RESIDENTS OF EAST HAMPTON, VISITORS,	
		THE INDIGENT AND UNDERINSURED.	
LONG ISLAND HEAD START	N/A	TO PROVIDE A COMPREHENSIVE LEARNING ENVIRONMENT	1,000.
98 AUSTIN STREET	PC	TO CHILDREN RESPECTFUL OF THEIR CULTURES AND TO	
PATCHOGUE, NY 11772		ASSIST FAMILIES IN REACHING SELF-SUFFICIENCY	
		THROUGH THE COMBINED EFFORTS OF PARENTS,	
		COMMUNITY AND STAFF.	
HOOPS FOR HOPE INC	N/A	TO SUPPORT YOUTH DEVELOPMENT IN SOUTHERN AFRICA	1,000.
PO BOX 895	PC	BY ASSISTING SCHOOLS, YOUTH ORGANIZATIONS,	
EAST HAMPTON, NY 11937		SHELTERS, AND COMMUNITIES WITH EDUCATIONAL AND	
		SPORTS PROGRAMS.	
WELLNESS FOUNDATION	N/A	TO EDUCATE, SUPPORT AND INSPIRE CHILDREN AND	2,000.
65 DUNEMERE LANE	PC	ADULTS TO ADOPT HEALTHY LIFESTYLES.	
EAST HAMPTON, NY 11937			
STONY BROOK FOUNDATION REALTY INC	N/A	TO FACILITATE THE DEVELOPMENT AND OPERATION OF A	1,000.
230 ADMINISTRATION	PC	CONFERENCE CENTER/HOTEL ON THE STONY BROOK	
STONY BROOK, NY 11794		UNIVERSITY CAMPUS.	

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KANSAS UNIVERSITY WILLIAMS FUND 1651 NAISMITH DRIVE LAWRENCE, KS 66045	N/A PC	TO PROVIDE FUNDING FOR SCHOLARSHIPS NEEDED TO ATTRACT THE FINEST STUDENT-ATHLETES.	10,000.
MOCSA 3100 BROADWAY SUITE 400 KANSAS CITY, MO 64111	N/A PC	TO LESSEN THE ILL EFFECTS OF SEXUAL ASSUALT AND ABUSE THROUGH PREVENTION, EDUCATION, INTERVENTION, TREATMENT AND ADVOCACY.	2,000.
WAYSIDE WAIFS INC. 3901 MARTHA TRUMAN ROAD KANSAS CITY, MO 64137	N/A PC	TO PLACE ADOPTABLE COMPANION ANIMALS IN RESPONSIBLE HOMES.	1,000.
NEW HOUSE P.O. BOX 240019 KANSAS CITY, MO 64124	N/A PC	TO BREAK THE CYCLE OF DOMESTIC VIOLENCE BY PROVIDING THE TOOLS WHICH ALLOW WOMEN TO MAKE POSITIVE CHOICES AND LEAD SELF-SUFFICIENT LIVES.	1,000.
HOPE HOUSE PO BOX 577 LEE'S SUMMIT, MO 64063	N/A PC	TO BREAK THE CYCLE OF DOMESTIC VIOLENCE BY PROVIDING SAFE REFUGE AND SUPPORTIVE SERVICES THAT EDUCATE AND EMPOWER WOMEN AND THEIR CHILDREN.	1,000.

392,650. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9

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ATTACHMENT 10 AMOUNT EXCLUSION CODE AMOUNT BUSINESS FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

RELATED OR EXEMPT FUNCTION INCOME

57.

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57.

TOTALS

MISCELLANEOUS REFUNDS

DESCRIPTION