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Return of Private Foundation

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

2014

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For calendar year 2014 or tax year beginning **, and ending**

Name of foundation THE LLOYD R. WALLACE CHARITABLE FOUNDATION			A Employer identification number 41-2091015	
Number and street (or P O box number if mail is not delivered to street address) 217 MAIN STREET		Room/suite		B Telephone number (see instructions) 816-583-2185
City or town BRAYMER		State MO	ZIP code 64624	
Foreign country name		Foreign province/state/county	Foreign postal code	C If exemption application is pending, check here ► <input type="checkbox"/>
G Check all that apply		<input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1 Foreign organizations check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test check here and attach computation ► <input type="checkbox"/>
H Check type of organization		<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A) check here ► <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 5,124,589		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	(Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents		362,997	362,997	
	6a Net rental income or (loss)	362,997			
	6b Net gain or (loss) from sale of assets not on line 10				
	7 Gross sales price for all assets on line 6a				
	8 Capital gain net income (from Part IV, line 2)				
	9 Net short-term capital gain				
	10a Gross sales less returns and allowances				
	10b Less Cost of goods sold				
10c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)		19,035	19,035		
12 Total. Add lines 1 through 11		382,032	382,032	0	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc		4,000	4,000	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	RECEIVED			
	16b Accounting fees (attach schedule)	RECEIVED JUN 01 2015	31	31	16
	16c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	RECEIVED JUN 01 2015	5,781	5,781	
	19 Depreciation (attach schedule) and depletion	RECEIVED JUN 01 2015	14,303	14,303	
	20 Occupancy		4,380	4,380	
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)		25,149	25,149	
	24 Total operating and administrative expenses.		53,644	53,644	0
Add lines 13 through 23				16	
25 Contributions, gifts, grants paid		252,731		252,731	
26 Total expenses and disbursements Add lines 24 and 25		306,375	53,644	0	
27 Subtract line 26 from line 12		75,657			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		328,388			
c Adjusted net income (if negative, enter -0-)				0	

Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	402,538	443,540	443,540
	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			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ►			
		Less allowance for doubtful accounts ►			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
Liabilities	11	Investments—land, buildings and equipment basis ►	4,692,844		
		Less accumulated depreciation (attach schedule) ►	32,279	4,626,092	4,660,565
	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 I)		5,028,630	5,104,105
	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)		0	0
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg . and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds		5,028,630	5,104,105
	30	Total net assets or fund balances (see instructions)		5,028,630	5,104,105
	31	Total liabilities and net assets/fund balances (see instructions)		5,028,630	5,104,105

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,028,630
2	Enter amount from Part I, line 27a	2	75,657
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	5,104,287
5	Decreases not included in line 2 (itemize) ► See Attached Statement	5	182
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	5,104,105

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g. real estate, 2-story brick warehouse, or common stock 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo day yr)	(d) Date sold (mo day yr)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k) but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	0	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	{ }		3	0	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Yes No

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	238,527	5,015,772	0.047555
2012	254,756	4,916,966	0.051812
2011	233,398	4,762,068	0.049012
2010	221,623	4,633,393	0.047832
2009	200,040	4,665,273	0.042879

2 Total of line 1, column (d)	2	0.239090
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.047818
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	5,130,870
5 Multiply line 4 by line 3	5	245,348
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,284
7 Add lines 5 and 6	7	248,632
8 Enter qualifying distributions from Part XII, line 4	8	252,747

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	3,284
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		
3	Add lines 1 and 2	2	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3	3,284
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	4	0
6	Credits/Payments	5	3,284
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	2,045
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments Add lines 6a through 6d	7	2,045
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	1,239
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ► Refunded	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a	X	
1b	X	
1c	X	
2	X	
3	X	
4a	X	
4b	N/A	
5	X	
6	X	
7	X	
8a	►	
8b	X	
9	X	
10	X	

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

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

1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?

1c Did the foundation file Form 1120-POL for this year?

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

- By language in the governing instrument, or
- By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►
MO

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Part 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? Website address ► N/A	13	X
14	The books are in care of ► MICHAEL R BROWN Located at ► 8976 NE PATTON ROAD HAMILTON MO	Telephone no ► 816-583-2185 ZIP+4 ► 64644	
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	► 15	► □
16	At any time during calendar year 2014, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the foreign country ►	16	Yes No X

Part 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
1a	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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► □	1b	N/A
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 2014?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," list the years ► 20 ____ , 20 ____ , 20 ____ , 20 ____	2b	N/A
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)		
c	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 ____	3b	N/A
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2014 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 2014)	4a	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4b	X
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 2014?		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>		5b	X
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>		6b	X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(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 account other allowances
See Attached Statement	00	0		
	00	0		
	00	0		
	00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE"

(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 account other allowances
NONE				

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

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		

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		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	551,257
c	Fair market value of all other assets (see instructions)	1c	4,657,748
d	Total (add lines 1a, b, and c)	1d	5,209,005
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	5,209,005
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	78,135
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,130,870
6	Minimum investment return. Enter 5% of line 5	6	256,544

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part)

1	Minimum investment return from Part X, line 6	1	256,544
2a	Tax on investment income for 2014 from Part VI, line 5	2a	3,284
b	Income tax for 2014 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	3,284
3	Distributable amount before adjustments Subtract line 2c from line 1	3	253,260
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	253,260
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	253,260

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	252,747
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)	4	252,747
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	5	3,284
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)	6	249,463
6	Adjusted qualifying distributions. Subtract line 5 from line 4		

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				253,260
2 Undistributed income, if any, as of the end of 2014			207,241	
a Enter amount for 2013 only				
b Total for prior years 20 ____, 20 ____, 20 ____				
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0			
4 Qualifying distributions for 2014 from Part XII, line 4 ► \$ 252,747			207,241	
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2014 distributable amount				45,506
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	0			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				207,754
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				

Part XIV **Private Operating Foundations** (see instructions and Part VII-A, question 9)

NA

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling
b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

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

e Qualifying distributions made directly for active conduct of exempt activities

Subtract line 2d from line 2c

Part XV **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers.

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, 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

MICHAEL R BROWN 8976 NE PATTON ROAD HAMILTON, MO 64644 816-583-2185

b. The form in which applications should be submitted and information and materials they should include

APPLICATIONS ARE AVAILABLE UPON REQUEST BY APPLICANTS

c Any submission deadlines

NO

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SCHOLARSHIPS ARE FOR BRAYMER C-4 HIGH SCHOOL GRADUATES

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CALDWELL COUNTY PANTRY 808 N WALNUT ST #R CAMERON, MO 64429 FIRST BAPTIST CHURCH 201 MO-116 BRAYMER, MO 64624 AMERICAN LEGION AUXILLARY			GENERAL GRANT	5,100
BRAYMER COMMUNITY FIRE DEPARTMENT 104 E 2ND ST BRAYMER, MO 64624 AMERICAN LEGION			GENERAL GRANT	500
CAMERON REGIONAL YMCA 402 E EVERGREEN ST CAMERON, MO 64429 DELTA CHI SORORITY LOCAL BRAYMER, MO 64624 BRAYMER C-4 SCHOOL 400 BOBCAT AVE BRAYMER, MO 64624 CALDWELL COUNTY FOUNDATION			GENERAL GRANT	675
NORTH CENTRAL MISSOURI COLLEGE 1301 MAIN ST TRENTON, MO 64683 METROPOLITAN COMMUNITY COLLEGE 3200 BROADWAY KANSAS CITY, MO 64111			NEW FURNACE	2,000
			SCHOLARSHIP	800
			EASTER EGG HUNT	250
			BOOSTER CLUB	2,000
			GENERAL GRANT	5,000
			SCHOLARSHIP	1,000
			SCHOLARSHIP	1,000
Total	See Attached Statement			► 3a 252,731
<i>b Approved for future payment</i>				
Total				► 3b 0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	
1	Program service revenue			
a				
b				
c				
d				
e				
f				
g	Fees and contracts from government agencies			
2	Membership dues and assessments			
3	Interest on savings and temporary cash investments			
4	Dividends and interest from securities			
5	Net rental income or (loss) from real estate			
a	Debt-financed property			
b	Not debt-financed property			
6	Net rental income or (loss) from personal property			
7	Other investment income			
8	Gain or (loss) from sales of assets other than inventory			
9	Net income or (loss) from special events			
10	Gross profit or (loss) from sales of inventory			
11	Other revenue a <u>USDA AG PROGRAM</u>			
b	<u>INSURANCE PROCEEDS</u>			
c	<u>STATE OF MO REIMBURSEMENT</u>			
d				
e				
12	Subtotal Add columns (b), (d), and (e)		0	382,032
13	Total Add line 12, columns (b), (d), and (e)			382,032

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a	Transfers from the reporting foundation to a noncharitable exempt organization of	1a(1)	X
	(1) Cash	1a(2)	X
	(2) Other assets		
b	Other transactions	1b(1)	X
	(1) Sales of assets to a noncharitable exempt organization	1b(2)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(3)	X
	(3) Rental of facilities, equipment, or other assets	1b(4)	X
	(4) Reimbursement arrangements	1b(5)	X
	(5) Loans or loan guarantees	1b(6)	X
	(6) Performance of services or membership or fundraising solicitations	1c	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees		
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received		

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Sign
Here

Signature of officer or trustee

5/26/15 Sec. / Class.
Date Title

May the IRS discuss this return
with the preparer shown below
(see instructions)? Yes No

Paid Preparer Use Only	Print/Type preparer's name HARRY LOCKRIDGE	Preparer's signature HARRY LOCKRIDGE	Date 5/11/2015	Check <input type="checkbox"/> if self-employed	PTIN P00058215
	Firm's name ► LOCKRIDGE, CONSTANT & CONRAD LLC	Firm's EIN ► 43-1305377			
	Firm's address ► 448 WASHINGTON, CHILlicothe, MO 64601	Phone no	660-646-6911		

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

BETHANY COLLEGE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

UNIVERSITY OF CENTRAL MISSOURI

Street

108 W SOUTH ST

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
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Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

CENTRAL METHODIST

Street

411 CENTRAL METHODIST SQUARE

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
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Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,500
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

METROPOLITAN COMMUNITY COLLEGE

Street

3200 BROADWAY

City

KANSAS CITY

State

MO

Zip Code

64111

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,500

Name

MO STATE UNIVERSITY

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,500

Name

MO STATE UNIVERSITY

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,000

Name

PARK UNIVERSITY

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,000

Name

MISSOURI WESTERN STATE UNIVERSITY

Street

4525 DOWNS DR

City

ST JOSEPH

State

MO

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,000

Name

MISSOURI WESTERN STATE UNIVERSITY

Street

4525 DOWNS DR

City

ST JOSEPH

State

MO

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SCHOLARSHIP

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

MISSOURI WESTERN STATE UNIVERSITY

Street

4525 DOWNS DR

City

ST JOSEPH

State

MO

Zip Code

64507

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,000

Name

NORTHWEST MISSOURI STATE UNIVERSITY

Street

800 UNIVERSITY DR

City

MARYVILLE

State

MO

Zip Code

64468

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,000

Name

UNIVERSITY OF MISSOURI

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,000

Name

UNIVERSITY OF MISSOURI

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,000

Name

UNIVERSITY OF MISSOURI

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,000

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City

TRENTON

State

MO

Zip Code

64683

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

1,500

C

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

DRAKE UNIVERSITY

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,500
--	-----------------

Name

METROPOLITAN COMMUNITY COLLEGE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

MO WELDING INSTITUTE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 500
--	---------------

Name

BRAYMER COMMUNITY HOUSING

Street

811 N MAIN ST

City	State	Zip Code	Foreign Country
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BRAYMER	MO	64624	
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Relationship	Foundation Status
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Purpose of grant/contribution ROOF & FOUNDATION REPAIR	Amount 12,006
---	------------------

Name

PROCTERVILLE METHODIST CHURCH

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution NEW FURNANCE	Amount 2,045
---	-----------------

Name

LIVINGSTON COUNTY HUMANE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution GENERAL GRANT	Amount 3,500
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Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

SAN JOSE STATE UNIVERSITY

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

CULVER STOCKTON

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,500
--	-----------------

Name

MISSOURI S&T

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

UNIVERSITY OF MISSOURI

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

NORTH CENTRAL MISSOURI COLLEGE

Street

1301 MAIN ST

City TRENTON	State MO	Zip Code 64683	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution SCHOLARSHIP	Amount 1,000
--	-----------------

Name

BRAYMER VOLUNTEER FIRE DISTRICT

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution GENERAL GRANT	Amount 2,160
--	-----------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

MIDWESTERN BAPTIST

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution SCHOLARSHIP	Amount 1,500
--	-----------------

Name

WHITWORTH MINISTRIES INC

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 9,000
--	-----------------

Name

FAITH BAPTIST CHURCH

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 16,000
--	------------------

Name

CALDWELL COUNTY NUTRITION

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution DISHWASHER SYSTEM	Amount 18,500
--	------------------

Name

CALDWELL COUNTY - ANDERSON MEMORIAL

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution DIRT WORK FOR BALL FIELDS	Amount 9,695
--	-----------------

Name

GREEN HILLS WOMEN SHELTER

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 10,000
--	------------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

NORTHWESTERN R-1 SCHOOL DISTRICT

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 10,000
--	------------------

Name

SECOND BAPTIST CHURCH

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 10,000
--	------------------

Name

GOLDEN AGE NURSING HOME

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 5,000
--	-----------------

Name

JOURNEY CHURCH OF KC

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 2,500
--	-----------------

Name

ANOTHER CHANCE CAT RESCUE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution GENERAL GRANT	Amount 2,500
--	-----------------

Name

THE GABBY KRAUSE FOUNDATION

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status		
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Purpose of grant/contribution BAGS OF FUN PROGRAM	Amount 10,000
--	------------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

CRMC FOUNDATION

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 10,000
--	------------------

Name

HAMILTON COMMUNITY ARTS

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution GENERAL GRANT	Amount 3,000
--	-----------------

Name

CITY OF HAMILTON POLICE

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution CAMERAS	Amount 3,000
--	-----------------

Name

METHODIST CHURCH

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution GENERAL GRANT	Amount 4,000
--	-----------------

Name

KINGDOM CARES

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 10,000
--	------------------

Name

DMC

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 15,000
--	------------------

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

AMERICANS FAMILY COACHES

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 5,000
--	-----------------

Name

GRAND RIVER TECH

Street

City	State	Zip Code	Foreign Country
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Relationship	Foundation Status
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Purpose of grant/contribution SCHOLARSHIP	Amount 500
--	---------------

Name

KICKING BEAR FOUNDATION

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 3,000
--	-----------------

Name

TINNEY GROVE CEMETARY

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL GRANT	Amount 2,500
--	-----------------

Name

CITY OF BRAYMER

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
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Purpose of grant/contribution GENERAL GRANT	Amount 14,500
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Name

Street

City	State	Zip Code	Foreign Country
------	-------	----------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution	Amount
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Elections

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Name THE LLOYD R WALLACE CHARITABLE FOUNDATION
Address 217 MAIN STREET, BRAYMER, MO 64624
Identification Number 41-2091015

Taxpayer elects to apply De Minimis Safe Harbor under Reg 1.263(a)-1(f)

Other Elections

Statements
