Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0052

2014

Open to Public Inspection

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

Name of foundation: Charles Lyons Memorial Foundation, Inc.
A Employer identification number: 43-6056850
Number and street (or P O box number if mail is not delivered to street address): P.O. Box 7
Room/suite:
B Telephone number (see instructions): (660) 232-2000
City or town, state or province, country, and ZIP or foreign postal code: Lexington MO 64067-0236
C If exemption application is pending, check here ► ☐
G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change
D 1 Foreign organizations, check here ► ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ► ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation
E If private foundation status was terminated under section 507(b)(1)(A), check here ► ☐
I Fair market value of all assets at end of year *(from Part II, column (c), line 16)* ► $ 586,992.
J Accounting method ☒ Cash ☐ Accrual ☐ 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 ► ☐

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)
1	Contributions, gifts, grants etc, received (attach schedule)				
2	Ck ► ☒ if the foundn is not required to attach Sch B				
3	Interest on savings and temporary cash investments	6.	6.	6.	
4	Dividends and interest from securities	14,127.	14,127.	14,127.	
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		63,111.		
8	Net short-term capital gain			0.	
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule) Schedule K-1's	181.	181.	181.	
12	**Total.** Add lines 1 through 11	14,314.	77,425.	14,314.	
13	Compensation of officers, directors, trustees, etc	11,450.	2,650.	11,450.	8,800.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach sch) L-16b Stmt	1,850.	1,850.	1,850.	
c	Other prof fees (attach sch)				
17	Interest				
18	Taxes (attach schedule)(see instrs) See Line 18 Stmt	675.	675.	675.	
19	Depreciation (attach sch) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	1,040.		1,040.	1,040.
22	Printing and publications	163.		163.	163.
23	Other expenses (attach schedule) See Line 23 Stmt	953.	329.	953.	624.
24	**Total operating and administrative expenses** Add lines 13 through 23	16,131.	5,504.	16,131.	10,627.
25	Contributions, gifts, grants paid	50,400.			50,400.
26	**Total expenses and disbursements.** Add lines 24 and 25	66,531.	5,504.	16,131.	61,027.
27	Subtract line 26 from line 12:				
a	**Excess of revenue over expenses and disbursements**	-52,217.			
b	**Net investment income** (if negative, enter -0-)		71,921.		
c	**Adjusted net income** (if negative, enter -0-)			0.	

Lines 1–12: REVENUE; lines 13–26: OPERATING AND ADMINISTRATIVE EXPENSES

914-15

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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	4,221.	2,714.	2,714.
	2	Savings and temporary cash investments	4,368.	19,095.	19,095.
	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 sch) ►			
		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) L-10b Stmt	209,670.	207,344.	565,183.
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment: basis ►			
		Less accumulated depreciation (attach schedule) ►			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule) ►			
	15	Other assets (describe ►)			
	16	**Total assets** (to be completed by all filers – see the instructions Also, see page 1, item I)	218,259.	229,153.	586,992.
LIABILITIES	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	**Total liabilities** (add lines 17 through 22)			
NET ASSETS OR FUND BALANCES		**Foundations that follow SFAS 117, check here ► ☒ and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted	218,259.	229,153.	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ► ☐ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	**Total net assets or fund balances** (see instructions)	218,259.	229,153.	
	31	**Total liabilities and net assets/fund balances** (see instructions)	218,259.	229,153.	

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	218,259.
2	Enter amount from Part I, line 27a	2	-52,217.
3	Other increases not included in line 2 (itemize) ► Capital gains	3	63,111.
4	Add lines 1, 2, and 3	4	229,153.
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	229,153.

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 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a	200 shares Calamp Corp	P	11/07/13	05/08/14
b	300 shares Celgene Corp	P	09/05/13	10/15/14
c	200 shares Facebook Inc	P	03/06/14	04/04/14
d	1,000 shares Mastercard Inc	P	06/07/07	04/04/14
e	See Columns (a) thru (d)			

	(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	3,211.		4,809.	-1,598.
b	25,041.		23,665.	1,376.
c	11,365.		14,379.	-3,014.
d	72,461.		14,024.	58,437.
e	See Columns (e) thru (h)		87,065.	7,910.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
a				-1,598.
b				1,376.
c				-3,014.
d				58,437.
e	See Columns (i) thru (l)	0.	0.	7,910.

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	63,111.
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	-7,054.

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? . . . . ☐ Yes ☒ No

If 'Yes,' the foundation does not qualify under section 4940(e) Do not complete this part.

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 (column (b) divided by column (c))
2013	58,821.	614,642.	0.095700
2012	57,621.	565,210.	0.101946
2011	58,231.	562,048.	0.103605
2010	52,353.	558,261.	0.093779
2009	25,433.	521,535.	0.048766

2	**Total** of line 1, column (d)	2	0.443796
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	0.088759
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	618,613.
5	Multiply line 4 by line 3	5	54,907.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	719.
7	Add lines 5 and 6	7	55,626.
8	Enter qualifying distributions from Part XII, line 4	8	61,027.

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)

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 instrs)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☒ and enter 1% of Part I, line 27b	1	719.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	719.
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-	5	719.
6	Credits/Payments		
a	2014 estimated tax pmts and 2013 overpayment credited to 2014 — 6 a		
b	Exempt foreign organizations — tax withheld at source — 6 b		
c	Tax paid with application for extension of time to file (Form 8868) — 6 c		
d	Backup withholding erroneously withheld — 6 d		
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any **penalty** for underpayment of estimated tax Check here ☒ if Form 2220 is attached	8	14.
9	**Tax due** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ►	9	733.
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	

Part VII-A Statements Regarding Activities

			Yes	No
1 a	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?	1 a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		X
	*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*			
c	Did the foundation file **Form 1120-POL** for this year?	1 c		X
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 ► $ ______			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► $ ______			
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*	2		X
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*	3		X
4 a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4 a		X
b	If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	4 b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If 'Yes,' attach the statement required by General Instruction T*	5		X
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?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If 'Yes,' complete Part II, column (c), and Part XV.*	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► MO - Missouri			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If 'No,' attach explanation*	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If 'Yes,' complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If 'Yes,' attach a schedule listing their names and addresses*	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ► N/A

14 The books are in care of ► Steve Oliaro Telephone no ► (660) 232-2000

Located at ► P.O. BOX 7 Lexington MO ZIP + 4 ► 64067-0007

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

			Yes	No
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?	16		X
	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 ►			

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
1 a	During the year did the foundation (either directly or indirectly)			
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No			
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
(6)	Agree to pay money or property to a government official? (**Exception.** Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ 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)?	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here ► ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1 c		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? ☐ Yes ☒ No If 'Yes,' list the years ► 20__ , 20__ , 20__ , 20__ .			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer 'No' and attach statement – see instructions)	2 b		
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__			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ 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)*	3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		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?	4 b		X

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

5 a 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))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ 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? ☐ Yes ☒ 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)? **5 b** No: X

Organizations relying on a current notice regarding disaster assistance check here ► ☐

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? ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53 4945-5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6 b** No: X

If 'Yes' to 6b, file Form 8870.

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? **7 b**

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
John G. Miller RT 3, Box 210 Odessa, MO 64076	President 10.00	550.	0.	0.
Donald L. Coen 539 N. 17th, Lexington, MO 64067	Vice President 5.00	2,725.	0.	0.
John Giorza 9 S. 11th, Lexington, MO 64067	Asst Secretary 5.00	650.	0.	0.
See Information about Officers, Directors, Trustees, Etc		7,525.	0.	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 ► None

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		

Total number of others receiving over $50,000 for professional services ▶ None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	0.
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	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	1 a	612,835.
b	Average of monthly cash balances	1 b	15,199.
c	Fair market value of all other assets (see instructions)	1 c	
d	**Total** (add lines 1a, b, and c)	1 d	628,034.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	628,034.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	9,421.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	618,613.
6	**Minimum investment return.** Enter 5% of line 5	6	30,931.

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	30,931.
2 a	Tax on investment income for 2014 from Part VI, line 5	2 a	719.		
b	Income tax for 2014 (This does not include the tax from Part VI.)	2 b			
c	Add lines 2a and 2b			2 c	719.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	30,212.
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	30,212.
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	30,212.

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	1 a	61,027.
b	Program-related investments — total from Part IX-B	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	61,027.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	719.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	60,308.

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					30,212.
2 Undistributed income, if any, as of the end of 2014					
a Enter amount for 2013 only				0.	
b Total for prior years 20 ___, 20 ___, 20 ___					
3 Excess distributions carryover, if any, to 2014					
a From 2009	0.				
b From 2010	18,837.				
c From 2011	58,357.				
d From 2012	57,788.				
e From 2013	59,474.				
f **Total** of lines 3a through e		194,456.			
4 Qualifying distributions for 2014 from Part XII, line 4 ► $ 61,027.					
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					
e Remaining amount distributed out of corpus		61,027.			
5 Excess distributions carryover applied to 2014 *(If an amount appears in column (d), the same amount must be shown in column (a))*		30,212.			30,212.
6 **Enter the net total of each column as indicated below:**					
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		225,271.			
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			0.		
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					0.
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)		0.			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a		225,271.			
10 Analysis of line 9					
a Excess from 2010	0.				
b Excess from 2011	46,982.				
c Excess from 2012	57,788.				
d Excess from 2013	59,474.				
e Excess from 2014	61,027.				

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

N/A

1 a 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)

	Tax year	Prior 3 years			
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
2 a 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					
3 Complete 3a, b, or c for the alternative test relied upon a 'Assets' alternative test — enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter. (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

Charles Lyons Memorial Foundation, Inc.
P.O. Box 236
Lexington MO 64067-0236 (660) 259-6151

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

The foundation requires applicants to complete a formal application form, a copy of which is attached to this return

c Any submission deadlines:

April 1st of the year preceding the academic year for which the scholarship is sought

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

See attached statement

Part XV **Supplementary Information** (continued)

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

Recipient Name and address (home or business)	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
a *Paid during the year*				
Faris, Nora J. 29364 Hwy PP Concordia MO 64020	NONE	NONE	Scholarship	2,000.
Rhoad, Elijah S. 801 W 35th Street Higginsville MO 64037	NONE	NONE	Scholarship	2,000.
DeHaven, Christopher J. 2111 Shelby Street Higginsville MO 64037	NONE	NONE	Scholarship	1,400.
Figg, Landon D. 866 Willow Creek Lane Higginsville MO 64037	NONE	NONE	Scholarship	1,400.
Miller, Emma L. 24839 Highway 20 Corder MO 64021	NONE	NONE	Scholarship	1,400.
Nolte, Brett A. 11155 St. Marys Road Higginsville MO 64037	NONE	NONE	Scholarship	1,400.
Russell, Dakota D. 19464 Highway FF Higginsville MO 64037	NONE	NONE	Scholarship	1,400.
Smith-Lohmann, Rachel M. 1603 Lipper Avenue Higginsville MO 64037	NONE	NONE	Scholarship	1,400.
Sanders, Garrett B, 1111 Francis Street Lexington MO 64067	NONE	NONE	Scholarship	2,000.
See Line 3a statement				36,000.
Total . . . . ► **3a**				50,400.
b *Approved for future payment*				
Total . . . . ► **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) 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			14	6.	
4 Dividends and interest from securities			14	14,127.	
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					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				14,133.	

13 **Total.** Add line 12, columns (b), (d), and (e) . . . 13 14,133.

(See worksheet in line 13 instructions to verify calculations.)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

		Yes	No
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?			
a Transfers from the reporting foundation to a noncharitable exempt organization of.			
(1) Cash	1 a (1)		X
(2) Other assets	1 a (2)		X
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1 b (1)		X
(2) Purchases of assets from a noncharitable exempt organization	1 b (2)		X
(3) Rental of facilities, equipment, or other assets	1 b (3)		X
(4) Reimbursement arrangements	1 b (4)		X
(5) Loans or loan guarantees	1 b (5)		X
(6) Performance of services or membership or fundraising solicitations	1 b (6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1 c		X

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

(a) Line no	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2 a 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

Sign Here

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

Signature of officer or trustee

Date 5/5/15

Title Treasurer

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

Paid Preparer Use Only

Print/Type preparer's name Ted J. Traczewski, CPA	Preparer's signature Ted J. Traczewski, CPA	Date 5-1-15	Check ☒ if self-employed	PTIN P01038785

Firm's name ► TED J. TRACZEWSKI CPA

Firm's EIN ► 43-1657279

Firm's address ► 500 S HIGHWAY 13
LEXINGTON MO 64067-0400

Phone no (660) 259-4342

Additional Information

Part XV, Line 2d, Any restrictions or limitations on awards

(1) Applicant must obtain high school diploma by the time classes are to commence at college

(2) Applicant must be a resident of Lafayette County, MO at the time of application

(3) Applicant must not be a parent, spouse, lineal descendent or spouse of a lineal descendent of individuals who are substantial contributors to the foundation, of the foundation manager, or of members of the Selection Committee of the foundation at the time the scholarship is granted

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
IRS Section 4940 tax	653.	653.	653.	
Foreign taxes	22.	22.	22.	
Total	675.	675.	675.	

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses.	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Investment advisory	329.	329.	329.	
Miscellaneous	10.		10.	10.
Office expense	614.		614.	614.
Total	953.	329.	953.	624.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1,000 shares Trinity Industries	P	various	10/13/14
500 shares Verizon Communications	P	02/09/10	01/09/14
600 shares Yahoo Inc	P	01/09/14	01/27/14
200 shares 3D Systems Corp	P	07/11/13	03/06/14
Capital gain distributions	P	various	12/31/14

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income

Columns (e) thru (h)

(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)
34,132.		39,364.	-5,232.
23,817.		13,465.	10,352.
22,551.		24,553.	-2,002.
14,297.		9,683.	4,614.
178.		0.	178.
Total		87,065.	7,910.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income
Columns (i) thru (l)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			**(l)** Gains (column (h) gain minus column (k), but not less than -0-) **or** losses (from column (h))
(i) Fair Market Value as of 12/31/69	**(j)** Adjusted basis as of 12/31/69	**(k)** Excess of column (i) over column (j), if any	
			-5,232.
			10,352.
			-2,002.
			4,614.
0.	0.	0.	178.
Total	0.	0.	7,910.

Form 990-PF, Page 6, Part VIII, Line 1
Information about Officers, Directors, Trustees, Etc.

(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
Person . . ☒ Business . ☐ Steve Oliaro P.O. Box 336, Lexington, MO 64067	Treasurer 5.00	2,650.	0.	0.
Person . ☒ Business . ☐ Robert Mitchell 79 Tomahawk, Lexington, MO 64067	Director 5.00	550.	0.	0.
Person . . ☒ Business . ☐ John Frerking 709 W 35th Street Higginsville MO 64037	Director 5.00	650.	0.	0.
Person . . ☒ Business . ☐ Kaye Worthington 3019 South Street Lexington MO 64067	Secretary 10.00	2,400.	0.	0.
Person . . ☐ Business . ☐ Carrie Bollmeyer 12 Creekview Bend Lexington MO 64067	Director 5.00	625.	0.	0.
Person . . ☐ Business . ☐ James Worthington 3019 South Street Lexington MO 64067	Director 5.00	650.	0.	0.
Total		7,525.	0.	0.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox	Amount
a *Paid during the year*					
Silvey, Alexis M. 1808 Franklin Avenue Lexington MO 64067	NONE	NONE	Scholarship	Person or ☐ Business ☒	2,000.
Albin, Cheyanne 1814 Bloom Street Lexington MO 64071	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Helm, Jonathan E. 17126 Giblin Hill Road Lexington MO 64067	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Ritter, Seth G. 1401 South Street Lexington MO 64067	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Schrunk, Jordan E. 10906 Appletree Lane Lexington MO 64067	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Tye, Kayleah N. 746 Golf Road Lexington MO 64067	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Dowell, Alana R. 8129 Highway WW Odessa MO 64076	NONE	NONE	Scholarship	Person or ☒ Business ☐	2,000.
Madsen, Leah 8875 Mt. Tabor Road Odessa MO 64076	NONE	NONE	Scholarship	Person or ☒ Business ☐	2,000.
Neville, Kennedy 615 Kirkpatrick Odessa MO 64076	NONE	NONE	Scholarship	Person or ☐ Business ☐	1,400.
Campbell, Nehemiah 517 S. Fourth Street Odessa MO 64076	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Silvers, Samantha J. 7232 Varner Road Odessa MO 64076	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Todd, Lonnie A. 930 NW 1000 Road Centerview MO 64019	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Brunkhorst, John W. 31919 Highway PP Concordia MO 64020	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Rolf, Hadley N. 12758 Hwy 23 Alma MO 64001	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.
Vogelsmeier. Breanna N. 7491 Oetting Road Concordia MO 64020	NONE	NONE	Scholarship	Person or ☒ Business ☐	1,400.

Form 990-PF, Page 11, Part XV, line 3a Continued

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a *Paid during the year*				
Williams, Kiley D. 307 W High Street Blackburn MO 65321	NONE	NONE	Scholarship	Person or ☒ Business ☐ 2,000.
Bishop, Morgan N. 30708 Centerview Road Waverly MO 64096	NONE	NONE	Scholarship	Person or ☒ Business ☐ 1,400.
Dillon, Peyten R. 105 E Willow Street Waverly MO 64096	NONE	NONE	Scholarship	Person or ☒ Business ☐ 1,400.
Drake, Jessica C. 26084 Highway BB Malta Bend MO 65339	NONE	NONE	Scholarship	Person or ☒ Business ☐ 1,400.
Evans, Jessica C. 21927 Brown School Road Waverly MO 64096	NONE	NONE	Scholarship	Person or ☒ Business ☐ 1,400.
Vogel, Hannah N. 212 E Commercial Street Waverly MO 64096	NONE	NONE	Scholarship	Person or ☐ Business ☐ 1,400.
Zumalt, Mikiah L. 605 Broad Street Waverly MO 64096	NONE	NONE	Scholarship	Person or ☐ Business ☐ 1,400.
Bross, Nicholas D. 3662 Highway FF Napoleon MO 64074	NONE	NONE	Scholarship	Person or ☐ Business ☐ 1,400.
Arndt, Joseph A. 440 Old Santa Fe Trail Napoleon MO 64074	NONE	NONE	Scholarship	Person or ☐ Business ☐ 1,400.
Total				36,000.

Form 990-PF, Page 1, Part I

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Ted J. Traczewski	Tax return preparation	1,850.	1,850.	1,850.	
Total		1,850.	1,850.	1,850.	

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year Book Value	End of Year Fair Market Value
Celgene Corporation - 200 shares	21,808.	22,372.
Cerner Corporation - 500 shares	18,504.	32,330.
Chevron Corporation - 900 shares	4,641.	100,962.
Exxon Mobil Corporation - 800 shares	1,887.	73,960.
Gildan Activewear Inc - 200 shares	9,141.	11,310.
Health Care Property Inv. Inc. - 2,000 shares	34,908.	88,060.
Mastercard, Inc. - 1,000 shares	14,024.	86,160.
Union Pacific Corp - 300 shares	35,109.	35,739.
Vanguard Natural Res., LLC - 1,000 shares	13,975.	15,070.
Verizon Communications - 1,000 shares	26,929.	46,780.
VISA Inc - 200 shares	26,418.	52,440.
Total	207,344.	565,183.

CHARLES LYONS MEMORIAL FOUNDATION, INC.
P.O. Box 236
Lexington, MO 64067

SCHOLARSHIP APPLICATION

for the 19____ Academic Year

APPLICATION MUST BE ACCOMPANIED BY A CURRENT TRANSCRIPT OF SCHOOL RECORD.

Personal data required of high school graduates who desire to attend college, technical, or trade school, or pursue some other type of specialized education. APPLICATION MUST BE SUBMITTED ON OR BEFORE ____________. PLEASE TYPE OR PRINT THIS APPLICATION.

A PHOTO will be helpful because it will aid us in getting acquainted with you but it is not obligatory.

FULL NAME: ____

ADDRESS: ____ Tel: ____________
Street City State Zip Area/Number

DATE AND PLACE OF BIRTH: ____

FATHER: ______________________________ AGE: _____ OCCUPATION ____________

MOTHER: ______________________________ AGE: _____ OCCUPATION ____________

Schools Attended (Ninth Grade to Present):

Name of School	Date Started	Date Ended

Date Will Graduate _______ Number in Class ________ Rank in Class ________ G.P.A. ______

ACT

STANDARD SCORES				
ENG	MATH	SOC S	N SCI	COMP

COLLEGE BOUND PERCENTILES				
ENG	MATH	SOC S	N SCI	COMP

SAT

SAT		SUBSCORES			GRADE	TEST DATE	
VERBAL	MATH	Read	Voc	TSWE	ACH 1	ACH 2	ACH 3

What college or technical school do you plan to attend? ____________________

____

What would you major in? ____

What are your goals in life? Give details below.

____

____

____

Positions held in gainful employment, periods of employment, average time employed each week, earnings, etc. ____

____

SCHOLASTIC

A COPY OF YOUR HIGH SCHOOL TRANSCRIPT MUST BE ENCLOSED.

Honors and Awards (State year and nature of honor or award)

Offices and positions of Leadership (State name of organization, position and year)

Member of Organization (where no office was held) State name of organization and year, thus: Band 2,3. State only major activities)

ADDITIONAL SHEETS MAY BE ATTACHED.

EXTRA CURRICULAR (School Related)

Honors and Awards (State year and nature of honor or award)

Offices and positions of Leadership (State name of organization, position and year)

Member of Organization (where no office was held) (State name of organization and year, thus: Drama 2,3. State only major activities)

CIVIC (Non-School Related)

Honors and Awards (State year and nature of honor or award)

Offices and positions of Leadership (State name of organization , position and year)

Member of Organization (where no office was held) (State name of organization and year, thus: Scouting, 4-H, etc. State only major activities)

State your plans for enrollment in an accredited American college or university

Have you been granted scholarship aid? If so, give details

Do you intend to apply for finanacial aid at the college(s) you plan to attend? If so, give details:

Have you reason to expect scholarship aid from any other source? If so, give details:

Any additional data to show financial need and general worthiness. Be specific in this

ESTIMATED EXPENSES FOR YOUR COLLEGE OR TECHNICAL SCHOOL YEAR

Tuition and Fees...$__________

Books and Supplies... __________

Board and room... __________

Commuting expense, if any.. __________

Clothes.. __________

Incidentals (haircuts, laundry, etc.)............................ __________

Recreation... __________

Miscellaneous expenses... __________

TOTAL.................$__________

YOUR ESTIMATED RESOURCES FOR THE COMING SCHOOL YEAR

Summer savings...$__________

Other savings and assets... __________

Contributed by parents... __________

Gifts from relatives or friends.................................. __________

Loans from parents... __________

Any other loans.. __________

Part-time job earnings... __________

Veterans benefits of any kind.................................... __________

Scholarships... __________

Any other income or resources.................................... __________

TOTAL.................$__________

PARENTAL FINANCIAL ANALYSIS

Father's income before taxes..$__________

Mother's income before taxes.. __________

GROSS INCOME (Total of Above)..................$__________

Number of Dependents (excluding mother and father)..................______

Number of Dependents planning to attend college......................____

Medical and Dental expenses not paid by insurance.....................$__________

Emergency expenses (flood damage, etc.)................................ __________

Total market value of home... __________

Amount of unpaid mortgage.. __________

Do you own a business or farm? Yes_____ No_____ IF FARM NO. OF ACRES __________

If so, what is the market value?....................................... __________

What is the Net Profit?.. __________

Value of bank accounts... __________

Value of other investments (stocks, bonds, life insurance, retirement). __________

Any unusual circumstances, please explain:______________________________

____

____

REFERENCES

For reference, give the name, address and occupation of two persons you have contacted concerning your qualifications. Request that they mail letters of recommendation to Charles Lyons Memorial Foundation, P. O. Box 236, Lexington, MO 64067.

NAME____________________	NAME____________________
ADDRESS____________________	ADDRESS____________________
____________________	____________________

____

Signature of Applicant

APPROVAL OF PARENTS

I (We) have read the statements contained in this application. They are accurate and I (we) approve this application.

____

____

(Signature[s] of Parent[s] or Guardian)

DATED:______________________