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## Form 990-PF

#### **Return of Private Foundation**

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

2014

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/torm990pf. Open to Public Inspection 2014, and ending 20 For calendar year 2014 or tax year beginning A Employer identification number Name of foundation 48-1224115 THE JONATHAN M SMITH FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 785-554-4285 **6302 SW 46TH LANE** City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ➤ **TOPEKA, KS 66610** Initial return of a former public charity D 1. Foreign organizations, check here ☐ Initial return G Check all that apply: . ▶□ ☐ Amended return Final return 2. Foreign organizations meeting the 85% test, ☐ Name change Address change check here and attach computation E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here . ▶□ Section 4947(a)(1) nonexempt charitable trust \_ \_ Other taxable private foundation Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here ▶□ line 16) ▶ \$ (Part I, column (d) must be on cash basis.) 133628 (d) Disbursements for charitable Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net (b) Net investment amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) the amounts in column (a) (see instructions).) 1 Contributions, gifts, grants, etc., received (attach schedule) 340 2 Check ▶ ☐ if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3 Dividends and interest from securities . . . . 4 5a 2409 2409 2409 Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . 9 Income modifications . . . . Gross sales less returns and allowances 10a Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . 11 Other income (attach schedule) . . . . . . 12 Total, Add lines 1 through 11 . 2749 2409 Compensation of officers, directors, trustees, etc. 13 Expenses Other employee salaries and wages . . . . . 14 Pension plans, employee benefits 15 16a Legal fees (attach schedule) Accounting fees (attach schedule) 300 300 Operating and Administrative Other professional fees (attacheschedule) . . . . 17 Taxes (attach schedule) | Instructions 9 2015 . 48 48 Depreciation (attach schedule) and depletion . . . 4800 4800 4800 20 21 Printing and publications . . . 22 Other expenses (attach schedule) . . . . 23 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . 5148 4800 4800 348 Contributions, gifts, grants paid . . . . . . 13114 13114 26 Total expenses and disbursements. Add lines 24 and 25 18262 4800 4800 13462 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements -15513 Net investment income (if negative, enter -0-) . -2391

Cat. No. 11289X

Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2014)

		Attached schedules and amounts in the description column	Beginning of year	Enc	of year
Pa	rt II	Balance Sheets should be for end-of-year amounts only. (See instructors.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	7720	358	6 3586
į	2	Savings and temporary cash investments	131821	11324	2 113242
- 1	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
Ì	4	Pledges receivable ▶			}
		Less: allowance for doubtful accounts ▶			
l	5	Grants receivable			
l	6	Receivables due from officers, directors, trustees, and other			
- 1		disqualified persons (attach schedule) (see instructions)			
ı	7	Other notes and loans receivable (attach schedule) ▶			
ì		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
ļ	b	Investments - corporate stock (attach schedule)			
1	c	Investments—corporate bonds (attach schedule)			
i	11	Investments—land, buildings, and equipment: basis ▶ 24000			
}		Less: accumulated depreciation (attach schedule) ▶ 7200	9600	1680	00 16800
- 1	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
- 1	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15				
	16	Other assets (describe   Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	149141	13362	133628
	17	Accounts payable and accrued expenses			
m	18	Grants payable			_
9	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ )			_
	23	Total liabilities (add lines 17 through 22)			
_		Foundations that follow SFAS 117, check here ▶ □			
ınd Balances		and complete lines 24 through 26 and lines 30 and 31.			
au	24	Unrestricted			
a	25	Temporarily restricted			_
В	26	Permanently restricted			_
		Foundations that do not follow SFAS 117, check here ▶ □	Ì		
Ī.		and complete lines 27 through 31.	ł		——————————————————————————————————————
Net Assets or	27	Capital stock, trust principal, or current funds			_
#	28	Paid-in or capital surplus, or land, bldg., and equipment fund			<b>-</b>
88	29	Retained earnings, accumulated income, endowment, or other funds	149141	1336	
<b>A</b>	30	Total net assets or fund balances (see instructions)	149141	1336	28
Ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	149141	1336	28
	rt III			2222	
1		al net assets or fund balances at beginning of year-Part II, colu			
		i-of-year figure reported on prior year's return)		<b>⊢</b>	
_		er amount from Part I, line 27a			<del></del>
3		er increases not included in line 2 (itemize)			
_	_	I lines 1, 2, and 3		4	
5	Dec	creases not included in line 2 (itemize)  all net assets or fund balances at end of year (line 4 minus line 5)—	Part II column (b) En	e 30	
	106	antici assers or tutto balances at end of year (line 4 thinus line 5)—	· w, widitil (0), 1111		133628

Part I		Losses for Tax on Investm				_	<del></del> .
	(a) List and describe th 2-story brick werehou	e kind(s) of property sold (e.g., real estate, se, or common stock, 200 shs MLC Co)	•	(b) How acquired P—Purchase D—Donation	1 100	ate acquired o, day, yr)	(d) Date sold (mo., day, yr)
1a_					<del> </del>		
<u> </u>					<del>  -</del>		· · · -
_ <u>c</u> _					-		
d			<u> </u>	<del></del>	+		
<u>e</u>	(e) Gross sales price	(f) Depreciation afforwed (or afforwable)		Cost or other basis is expense of sale			or ('oss) ) m rus (g)
<u>a</u>							
b					<del> </del>		
<u>c</u> d					1		
e							
	Complete only for assets sho	wing gain in column (h) and owned t	by the four.	dation on 12/31/69			(n) gain minus
	(j) F M V. as of 12/31/69	(i) Adjusted basis as of 12/31/69		Excess of cot. (i) ver cot (i), if any			tess than -0-) or om col. (h))
а					<b>.</b>		
<u>b</u>					+		
d					+		
e					1		
2	Capital gain net income o	r (not conital lace)		in Part I, line 7 }	2		
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c) (see instruc	1222(5) a ctions). If	nd (6): (loss), enter -0- in )	3		
Part		der Section 4940(e) for Redu					
Vas th	," the foundation does not	section 4942 tax on the distribut t qualify under section 4940(e). D	o not con	plete this part.			☐ Yes ☐ No
1		ount in each column for each yea	er; see the	instructions before	making	any entries.	
Ca:e	(a) Base penod years ndar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net	(c) value of nonchantable-use	assets		(d) nbution ratio livided by col (c))
	2013		9779		136215		7.18
	2012		5637		155740		10.04
	2011		0909		159849		6.82
	2010 2009	· · · · · · · · · · · · · · · · · · ·	0023 0035	······	164594 165055		6.09 6.63
	2009		00331		103033		0.03
2	Total of line 1, column (d	)				2	36.7
3		dation has been in existence if le				3	7.:
4	Enter the net value of nor	ncharitable-use assets for 2014 fi	rom Part )	K, line 5		4	1170
5	Multiply line 4 by line 3					5	06
6	Enter 1% of net investme	ent income (1% of Part I, line 27b	)			6	
7	Add lines 5 and 6					7	861
8		ons from Part XII, line 4				8	1348
	Part VI instructions.	ater than line 7, check the box in	ı Pan VI,	ine 16, and complete	e that p	art using a	% tax rate. See

Part '		nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			00
•	here ► 🗹 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
_	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Add lines 1 and 2			
3	Add lines 1 and 2			00
4	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			00
5 6	Credits/Payments:			8
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a			
ь	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) . 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached [8]			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11			00
	VII-A Statements Regarding Activities	, i	Vac	No
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?	1a	Yes	/ /
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	14		_
	Instructions for the definition)?	1ь	:	1
	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?	1c		1
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. ▶ \$			Ī
е	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?	2		1
_	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	3		✓
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<b>/</b>
_	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			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			
	conflict with the state law remain in the governing instrument?	6	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	7	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
				-
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			Ì
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	Ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(i)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
40	Complete Part XIV	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			
	names and addresses	10		_ <u>~</u>

Part	VII-A Statements Regarding Activities (continued)		<u>·</u>	age O
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		1
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)	40		
40	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12		
13	Website address ►	13	•	
14		-554-	4285	
	Located at ► 6302 SW 48TH LANE TOPEKA, KS ZIP+4 ►	66610	)	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	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 ▶			
0 -				
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	- 1	<b>V</b> 1	
4-	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?			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	disqualified person?			
	(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)?	ı		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	I		
	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.)			
ь	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)?	45		
	Organizations relying on a current notice regarding disaster assistance check here	1b		
С	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		1
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)):			
а	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?			
_	If "Yes," list the years ▶ 20 , 20 , 20 , 20 . Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	- 1		
D	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- 1		
-	all years listed, answer "No" and attach-statement—see instructions.)	2b		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			<del></del>
	<b>▶</b> 20 ,20 ,20 ,20	1		
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			'
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	ı		
	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	- 1		
	foundation had excess business holdings in 2014.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<del>_</del>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<u> </u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		1

	VII-B	Statements Regarding Activities			4720	May Be R	equire	ed (contil	nued)			
5a	During	the year did the foundation pay or incur a	iny amo	ount to:								
		ry on propaganda, or otherwise attempt the control of the control of any specific publications.							<b>⊘</b> No			
•		ectly or indirectly, any voter registration dr				=		Yes	✓ No			
	(3) Pro	vide a grant to an individual for travel, stu	dy, or o	other similar	purpos	es?		☐ Yes	✓ No			
		vide a grant to an organization other that tion 4945(d)(4)(A)? (see instructions).		ritable, etc.,	_			l ∐Yes	<b>⊘</b> No			
		vide for any purpose other than religious				•		_	_			
	•	poses, or for the prevention of cruelty to							☑ No	ı ı	1	
b		answer is "Yes" to 5a(1)-(5), did any of the tions section 53.4945 or in a current notice							ibed in	   5b		
	Organi	zations relying on a current notice regardi	ng disa	aster assistan	ce che	ck here .			▶□			
С		answer is "Yes" to question 5a(4), does to the it maintained expenditure responsibility							□No			
		" attach the statement required by Regula									1	
6a		foundation, during the year, receive any		directly or in	directly	, to pay pre	emiums	3				
		ersonal benefit contract?		• • • •				☐ Yes	✓ No			
b		e foundation, during the year, pay premiur " to 6b, file Form 8870.	ns, dire	ectly or indire	ctly, on	a personal	benefi	t contract	? .	6b		<u> </u>
	•	time during the tax year, was the foundation		•				☐ Yes				
		," did the foundation receive any proceed								7b		
Pari	VIII	Information About Officers, Direct	tors, 1	Trustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
		and Contractors							<u> </u>			
_1_	List all	officers, directors, trustees, foundatio	····				<del></del>		<u>-</u>			
		(a) Name and address	hou	e, and average irs per week ted to position	(Hr	mpensation not paid, nter -0-)	emple	Contribution byee benefit erred compe	pians	(e) Expe	nse acc ailowan	
MR &	VIRS HAI	ROLD W SMITH										
6302 S	W 48TH	LANE TOPEKA, KS 66610	DIREC	TOR		0			0			0
MR &	VIRS RIC	HARD HAVENS			ł							
3318 S	W FRON	IT ST TOPEKA, KS 66606	DIREC	TOR		0			0			0
JOHN	MOYER				ĺ							
<u>5029 S</u>	W 26TH	ST TOPEKA, KS 66614	DIREC	TOR		0			0			0
2	Compo	ensation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1-	see instr	uctions	s). If n	one, (	enter
				0.170		F		(d) Contrib	dions to			
ı	(a) Name a	and address of each employee paid more than \$50,0	00	(b) Title, and a nours per v devoted to p	veek ~	(c) Comper	sation	employee plans and c compens	benefit deterred	(e) Expe	nse aco allowan	
NONE												
		•••••										
				<u> </u>	-							
Total	number	of other employees paid over \$50,000 .	<del></del>	<u> </u>				· · ·	. ▶		-	
										00	A. DE	

Par	art VIII Information About Officers,	Directors, Trustees, Founda	rtion Managers, Highly Paid En	nployees,
	and Contractors (continued)			
3			e instructions). If none, enter "NON	E."
	(a) Name and address of each person p	paid more than \$50,000	(b) Type of service	(c) Compensation
	<u> </u>		Ì	]
			}	]
		<del></del>		<u> </u>
		••••••	j	1
		· · · · · · · · · · · · · · · · · · ·		
	••••••		1	
				<del> </del>
Tota	tal number of others receiving over \$50,000	for professional services		
				<u> </u>
Pai	art IX-A Summary of Direct Charit	able Activities		
L	List the foundation's four largest direct charitable activi-	ities during the tax year. Include relevant s	statistical information such as the number of	T -
Cf	organizations and other beneficiaries served, conference	es convened, research papers produced, et	с.	Expenses
1	FARM HOUSE CHURCH			
	·		•••••	
			· · · · · · · · · · · · · · · · · · ·	5200
2		EMBLIES OF GOD CHURCHES, ROY	AL FAMILY KIDS CAMP,	
	MISSONETTS, HOME MISSIONS			
_				7164
3	3 SUDAN REFUGERS			
	•••••		***************************************	
4	YOUTH FOR CHRIST	· · · · · · · · · · · · · · · · · · ·		460
7	4 TOOTH FOR CHRIST			<u>}</u>
	**************************************			250
Pai	art IX-B Summary of Program-Rel	ated Investments (see instruc	tions)	350
	Describe the two largest program-related investments in			Amount
1	1			
2	2			
			***************************************	
	All other program-related investments, See instructions.			}
3	5			1
Tota	tal. Add lines 1 through 2	· · · · · · · · · · · · · · · · · · ·		<u> </u>
1012	tal. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·		- 000 55
				Form <b>990-PF</b> (2014)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	lations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
۰а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	5610
C	Fair market value of all other assets (see instructions)	1c	113242
d	Total (add lines 1a, b, and c)	1d	118852
е	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	00
3	Subtract line 2 from line 1d	3	118852
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	1783
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	117069
6	Minimum investment return. Enter 5% of line 5	6	5853
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ ☐ and do not complete this part.)	oundatio	ns
1	Minimum investment return from Part X, line 6	1	5853
2a	Tax on investment income for 2014 from Part VI, line 5	13	
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5853
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5853
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	5853
Part	XII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	13462
b	Program-related investments—total from Part IX-B	1b	00
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del> </del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	13462
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13462
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whethe	r the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		
		Fo	rm <b>990-PF</b> (2014)

art	VIII Undistributed Income (see instruction	ins)		·	<del></del>
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	Cine 7			<u> </u>	5853
2	Undistributed income, if any, as of the end of 2014:				1
a	Enter amount for 2013 only				
	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2014:				
а	From 2009				
ь	From 2010				
c	From 2011				
d	From 2012				1
e	From 2013				
f	Total of lines 3a through e	18226	1		
4	Qualifying distributions for 2014 from Part XII,	10220			<del>                                     </del>
~	line 4: ▶ \$				
_	Applied to 2013, but not more than line 2a .	:			
	Applied to undistributed income of prior years				<del>                                     </del>
	(Election required—see instructions)				
_	Treated as distributions out of corpus (Election				<del>                                     </del>
C	required—see instructions)				
	•				<del>                                     </del>
	Applied to 2014 distributable amount	1000			<del> </del>
	Remaining amount distributed out of corpus	4927			+
5	Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same			*****	+
	amount must be shown in column (a), the same				
e	Enter the net total of each column as				
6	indicated below:				
_		22450			
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract	23153			<del> </del>
D	line 4b from line 2b				
					<del>                                     </del>
С			[		
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d					<del> </del>
a	amount—see instructions				
_	Undistributed income for 2013. Subtract line	<del></del>			<del> </del>
e	4a from line 2a. Taxable amount—see				
	instructions				
_				<del></del>	<del></del>
f	Undistributed income for 2014. Subtract lines	1			
	4d and 5 from line 1. This amount must be distributed in 2015	•			
-					+
7	Amounts treated as distributions out of corpus	1			
	to satisfy requirements imposed by section	1			1
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	1			1
	·	ļ	<u> </u>	<del></del>	<del>- </del>
8	Excess distributions carryover from 2009 not				
_	applied on line 5 or line 7 (see instructions) .				<del></del>
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
		23153			<del> </del>
10	Analysis of line 9:	1			Ī
a		-i	1		
ь	Excess from 2011	4	1		
C	Excess from 2012	4	•		
đ	Excess from 2013	-1	<del> </del>		1
е	Excess from 2014 7609	1	<u> </u>	l	

	0-PF (2014)	4:	-4' D ·	101 A	<u> </u>	Page 10
Part .					<del>))</del>	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
	Check box to indicate whether the four				ection 1 4942(i)	3) or 4942(j)(5)
ь 2а	Enter the lesser of the adjusted net	Tax year	l operating rounds	Prior 3 years	30001	3) (4 [] 4942())(3)
20	income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	(4)		1,,201		
	85% of line 2a		<del> </del>	<del> </del>	<b> </b>	
С	Qualifying distributions from Part XII, 4 for each year listed					
d	Amounts included in line 2c not used directly			<del> </del>	<b></b>	
	for active conduct of exempt activities					
e	Qualifying distributions made directly					
	for active conduct of exempt activities.  Subtract line 2d from line 2c		ļ			
3	Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·		<del> </del>		
	alternative test relied upon:					
а	"Assets" alternative test - enter:		ľ		1	
	(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	
	(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		•		the foundation h	nad \$5,000 or mo	ore in assets at
	any time during the year-		ns.)			
1_	Information Regarding Foundation		used more than O	D/ of the total cont	rib, diana ranah adir	hu tha farmatatica
а	List any managers of the foundation before the close of any tax year (but of					by the loundation
	, .	my in they have o		<del>40</del> ,000). (000 t	, (3,(£),,	
b	LD W SMITH  List any managers of the foundation	who own 10% o	r more of the sto	ck of a corporation	n (or an equally la	rae portion of the
	ownership of a partnership or other e			•		•
N/A						
2	Information Regarding Contribution	n, Grant, Gift, Lo	an, Scholarship,	etc., Programs:		
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the other conditions, complete items 2a,	oundation makes	•		•	•
а	The name, address, and telephone no		ddress of the pers	son to whom applic	cations should be a	ddressed:
N/A						
b	The form in which applications should	be submitted an	d information and	materials they sho	ould include:	

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

Part	XV Supplementary Information (conti	nued)			
3	<b>Grants and Contributions Paid During t</b>	he Year or Approve	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
•	Name and address (home or business)	arry foundation manager or substantial contributor	recipient	contribution	
а	Paid during the year				
		ļ			
			!		
		1	ļ		
SEE A	TTACHED			ļ	
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	Tabel	<u> </u>	<u> </u>		
<u> </u>	Total	<del> </del>	<del></del>	▶ 3a	13114
U	Approved for lattice payment		ļ		
					1
					1
NONE					
				ł	
				1	
			1		
	Total		L		

ra		Allelysis of income i roddeling Ac					
Ente	r gro	oss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	_	gram service revenue:					
	a	ATM RENTAL	532310	2409			
	b						
	C						
	đ						
	e						
	Ŧ						
_	9	Fees and contracts from government agencies		ļ. <u> </u>			
_		mbership dues and assessments	<u> </u>	ļ. <b>.</b>			
3		erest on savings and temporary cash investments				-	
4		idends and interest from securities					
5		t rental income or (loss) from real estate:					
		Debt-financed property		·			
		Not debt-financed property					
6		t rental income or (loss) from personal property		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
7		ner investment income	ļ	<u> </u>			
8		in or (loss) from sales of assets other than inventory					
9		t income or (loss) from special events					
		oss profit or (loss) from sales of inventory	ļ				
11		ner revenue: a				<del></del>	<u> </u>
	b						
	C						
	_				1		l .
	d		ļ				
	d e						
	d e Su	btotal. Add columns (b), (d), and (e)		2409	·		
13	d e Su To	tal. Add line 12, columns (b), (d), and (e)		2409	·	13	2409
13 (See	d e Su To	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation	ıs.)			13	2409
13 (See Pa	d e Su To wo	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
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13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
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13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		
13 (See Pa	d e Su To wo rt X	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) A <b>ccomplishm</b>	ent of Exemp	t Purposes		

Form 99 Part			n Regarding Trai	nsfers To and Transaction	ons and	Relationships With Noncha		Page 13
			ganizations					
1	in s	the organization of	firectly or indirectly			y other organization described ection 527, relating to political	Ye	s No
•	-		A' K d-A' A					
а		•	_	o a noncharitable exempt on	_		10/11	
				· · · · · · · · · · · · · · · · · · ·			1a(1) 1a(2)	1
ь	• •	Other assets . er transactions:		<i></i> .			10(2)	+-
b			a nonchantable exe	empt organization			15(1)	1
	• •			able exempt organization .			1b(2)	17
				er assets			1b(3)	1
							1b(4)	17
	• •		•				1b(5)	1
	• •	•		hip or fundraising solicitation			1b(6)	1
С	Sha	ring of facilities, e	quipment, mailing li	sts, other assets, or paid em	ployees		1c	1
d	If th	e answer to any	of the above is "Ye	s," complete the following s	schedule.	Column (b) should always sho	w the fair	market
						. If the foundation received less		
	valu	, <del>-</del>		<u> </u>		of the goods, other assets, or se		
(a) Line	e no.	(b) Amount involved	(c) Name of nonc	hantable exempt organization	(d) Desc	ription of transfers, transactions, and sh	aring arrange	ments
					<b>_</b>			
		N/A			<b></b>			
					<del> </del>			
					<del> </del>	<del></del>		
	-				- <del> </del>			
					<del> </del>			
			<u> </u>	<del></del>	<del> </del>	<u> </u>	<del> </del>	-
					1			
			-					
			· · · · · · · · · · · · · · · · · · ·		1			
					1			
					1			
					<u> L</u>			
	des	cribed in section 5	501(c) of the Code (	other than section 501(c)(3))		re tax-exempt organizations on 527? [	] Yes [	] No
	11	(a) Name of organ	e following schedule	(b) Type of organization		(c) Description of relation		· <del></del>
		mi ianis a arbai		to, , po or organization	-	tol becompanies leading		
		······································		<del> </del>	<del> </del>		<del></del>	
			· · · · · · · · · · · · · · · · · · ·					
						d statements, and to the best of my knowle	dge and bel.e	f, it is true.
Sign correct, and complete Declaration of proparer (other than taxpayer) is based on all information of which preparer					parer has any knowledge. May the	IRS discuss t	his return	
Here	≱I ▶	Lack le	/ SPIXX	154V/7	VILL		preparer show uctions)? [[Ye	
	Si	gnatur of other of the		Date / Titl	e PV	(see just )		-3 Line
Paid Prep	are	Print/Type preparer	's name	Preparer's signature		Oate Check if self-employed	PTIN	
Use						Firm's EiN ▶		
<del></del>	Firm's address ▶ Phone no.				Phone no.			

#### Schedule B

(Form 990, 990-EZ. or 990-PF) Department of the Treasury

Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

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

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

OMB No. 1545-0047

Employer identification number

THE JONATHAN M SMITH FOUNDATION 48-1224115 Organization type (check one): Section: Filers of: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

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

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	HAROLD W SMITH  6302 SW 48TH LN  TOPEKA, KS 66610	\$340	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
••••		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

**Employer identification number** 

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional sp	ace is needed.
(à) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
*******		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<b></b>		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$					
	Use duplicate copies of Part III if ad	ditional space is need	led.			
(a) No.   from Part i	(b) Purpose of gift	(c) Use o		(d) Description of how gift is held		
			***************************************			
	(e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held		
		(e) Transf	er of gift			
	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held		
	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4 Relatio			nship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held		
-		(e) Transf	er of gift			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
	•••••					

## The Jonathan M. Smith Foundation

#### 2014

#### 48-1224115

#### PART 1

## Questions 1, 16a, 18, and 19

1) Contributions, gifts, grants, etc rece	eived	
Harold Smith 6302 SW 48TH LN	\$340	
Topeka, KS 66610		
16b) Accounting fees	\$300	
18) Taxes (990-PF)		
2013 Federal Withholding tax	\$8	
2014 Kansas Annual Return	\$40	
Total Taxes	\$48	
19)	Column A	
Asset Description	1 ATM Machine	
Date Purchased	12/07/12	
Date In Service	01/01/13	
Cost	\$12000	
Business Use %	100%	
Depreciable Basis Life	\$12000 5 years	
Method of Depreciation	5 years Straitline	
Prior Depreciation	S0	
Depreciation this year	\$2400	
Asset Description Date Purchased	1 ATM Machine	
Date In Service	4/22/14	
Cost	4/22/14	
Business Use %	\$12000 100%	
Depreciable Basis	\$12000	
Life	5 years	
Method of Depreciation	Straitline	
Prior Depreciation	\$0	
Depreciation this year	\$2400	
Total Depreciation	\$4800	

# THE JONATHAN M SMITH FOUNDATION RECIPIENT LISTING 2014 48-1224115 PART XV

NAME	•	1	·	Debit Amt
NAME	i			
Farm House Church	6302 SW 48 TH L.N	Topeka, KS 66610	Charitable Contribution	\$ 5,200.00
First Assembly Total	500 SW 27th Street	Topeka, KS 66611	Charitable Contribution	\$ 7,164.00
Sudan Refugees Total	8801 W 102nd St "A"	Olathe, Kansas 66062	Assistance for Sudan Students	\$ 400.00
Youth for Christ	2714 NW Topeka Blvd	Topeka, KS 66618	Charitable Contribution	\$ 350.00
				\$ 13,114.00