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Form **990-PF**

EXTENDED TO FEBRUARY 16, 2016
Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.ks.gov/form990pf.

OMB No 1545-0052 Open to Public Inspection

Ford	aler	ndar year 2014 or tax year beginning JUI	1, 2014	, and ending	JUN 30, 2015	5
Nan	ne o	foundation			A Employer identification	n number
		TER S & EVAN C JONES FO		Room/suite	23-7384087	7
		and street (or P O box number if mail is not delivered to stree	B Telephone number	74.4		
		1 W 18TH AVE	620-342-17			
		own, state or province, country, and ZIP or foreign	C If exemption application is p	pending, check here		
		ORIA, KS 66801 (all that apply: Initial return	Initial rature of a fe		D 4 Faraira aranairatian	
u c	HECK	Final return	Amended return	ormer public charity	D 1. Foreign organization	s, check here
		Address change	Name change		Foreign organizations me check here and attach or	eeting the 85% test,
H C	heck	type of organization: X Section 501(c)(3) e		· · · · · · · · · · · · · · · · · · ·	1	
	_		Other taxable private founda	ation	E If private foundation sta under section 507(b)(1	
I Fa		arket value of all assets at end of year J Account	ing method: X Cash	Accrual	F If the foundation is in a	• • • • • • • • • • • • • • • • • • • •
(fr	om .	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1	
>			ımn (d) must be on cash l	basis.)		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
1	-	necessarily equal the amounts in column (a))	2,286,500.	illoonite		(cash basis only)
	2	Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B	2,200,500.		N/A	
	3	Interest on savings and temporary	7.	7.		STATEMENT 1
	4	Dividends and interest from securities				DINIEMENT I
	-	Gross rents				1
	b	Net rental income or (loss)				
a)	6a	Net gain or (loss) from sale of assets not on line 10		-		
Revenue	b	Gross sales price for all assets on line 6a .				
eve	7	Capital gain net income (from Part IV, line 2)		0.		
62	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns			, <u></u>	
	10a	and allowances			,	
		Gross profit or (loss)				
	11	Other income				
	12	Total, Add lines 1 through 11	2,286,507.	7.		
	13	Compensation of officers, directors, trustees, etc	64,968.	0.		13,206.
	14	Other employee salaries and wages	28,269.	0.		0.
	15	Pension plans, employee benefits	28,288.	0.		0.
ses	16a	Legal fees STMT 2	6,308.	0.		0.
Expense		Accounting fees STMT 3	895.	0.		0.
		Other professional fees				
and Administrative	17	Interest RECEIVED.	F 453			
stra	18	Taxes STMT 4 Depreciation and depletion g. 2015 Occupancy	5,453.	0.		0.
ij	19	Depreciation and depletion g. 2015 Occupancy	2,068. 12,950.	0.		
튉	20 21	Travel, conferences, and meetings	3,528.	0.		0.
9	22	Printing and publications EN, UT	2,681.	0.		0.
g	23	Other expenses STMT 5	24,347.	0.		0.
Operating	24	Total operating and administrative	22/02/1			<u> </u>
er.		expenses. Add lines 13 through 23	179,755.	0.		13,206.
ō	25	Contributions, gifts, grants paid	2,099,927.			2,099,927.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	2,279,682.	0.		2,113,133.
Ī	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	6,825.			
		Net investment income (if negative, enter -0-)		7.		
	C	Adjusted net income (if negative, enter -0-)			N/A	

SCANNED JAN 0 4 2016

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	61,518.	64,446.	64,446.
2	Savings and temporary cash investments			
3	Accounts receivable ►			
-	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
-	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts ▶			
2 8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
⁽ 10a	Investments - U.S. and state government obligations			
l t	Investments - corporate stock			
(: Investments - corporate bonds			
	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis > 23,172.			
1	Land, buildings, and equipment: basis ► 23,172. Less accumulated depreciation STMT 6 ► 11,631.	7,644.	11,541.	11,541.
15	Other assets (describe >			
- 1	Total assets (to be completed by all filers - see the			
'	instructions. Also, see page 1, item I)	69,162.	_75,987.	75,987.
17	Accounts payable and accrued expenses			
18	Grants payable			
مدا	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
20 21	Mortgages and other notes payable			
1 22	Other liabilities (describe >)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
+25	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
3 24	Unrestricted	69,162.	75,987.	
24	1	05,102.	13,301.	
25	Temporarily restricted			
26	Permanently restricted			
5	Foundations that do not follow SFAS 117, check here	İ		
24 25 26 27 28 29 30	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	60.460	75.007	
30	Total net assets or fund balances	69,162.	75,987.	
		60.460	===	
31	Total liabilities and net assets/fund balances	69,162.	75,987.	
Part	Analysis of Changes in Net Assets or Fund Ba	lances		
				· · · · · · · · · · · · · · · · · · ·
	I net assets or fund balances at beginning of year - Part II, column (a), line 3	10		
•	st agree with end-of-year figure reported on prior year's return)		1	69,162.
	r amount from Part I, line 27a		2	6,825.
	r increases not included in line 2 (itemize)	_	3	0.
	lines 1, 2, and 3		4	75,987.
	reases not included in line 2 (itemize)		5	0.
Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	<u>75,987.</u>
				Form 990-PF (2014)

WALTER S & EVAN C JONES FOUNDATION

23-7384087

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	ribe the kind(s) of property sold (e.ç		tincome	(b) Ho	w acquired Purchase	(c) Date	acquired	(d) Date sold	
2-story brick wa	arehouse; or common stock, 200 sh			D-1	Purchase Donation	(mo.,	day, yr.)	(mo., day, yr.)	
<u>1a</u> ,								_	
b NO	NE			-					
d						-			
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss) is (f) minus (
<u>a</u>									
b C		<u> </u>			-				
d ,					 .				
<u>e</u>		<u> </u>	10.01.00						
Complete only for assets showir	ig gain in column (h) and owned by						Col. (h) gain i not less than		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Losses	(from col. (f	1))	
a									
<u>b</u>									
d									
e									
2 Capital gain net income or (net ca	pital loss) { If gain, also enter -0	r ın Part I, line - in Part I, line	7	}	2				
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		nd (6):		}	,				
	nder Section 4940(e) for	Reduced	Tax on Net	Inves	tment In	come			
(For optional use by domestic private if section 4940(d)(2) applies, leave the Was the foundation liable for the section as the foundation does not qualify.	nis part blank. tion 4942 tax on the distributable am	nount of any ye	ear in the base per	·	_		!	Yes X No	
	each column for each year; see the n	nstructions bef	fore making any e	ntries.					
(a) Base period years Calendar year (or tax year beginnii			Net value of no	(c) ncharita			(d) Distribution ratio (col. (b) divided by col. (c))		
2013		3,320. 9,761.			43,869			51.820648	
2012 2011		8,659.		-	91,880 105,638		 _	22.744460 16.742640	
2010	1,78	7,270.	•		24,041			14.408704	
2009		8,743.			76,915	j.		23.516128	
2 Total of line 1, column (d) 3 Average distribution ratio for the 5						. 2	1	.29.232580	
the foundation has been in exister			or by the number	or years		3		25.846516	
4 Enter the net value of nonchardab	le-use assets for 2014 from Part X,	line 5		- •		4		154,588.	
5 Multiply line 4 by line 3						. 5	3	,995,561.	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		0.	
7 Add lines 5 and 6					٠	7	3	,995,561 <u>.</u>	
8 Enter qualifying distributions from			•••			8	2	<u>,113,133.</u>	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	16, and compl	lete that part using	3 a 1% ti	ax rate.				

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se		ıctio	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 here and enter 1%			0.
of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
			Λ
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u> </u>
3 Add lines 1 and 2			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0</u> .
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6 Credits/Payments:			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b Exempt foreign organizations - tax withheld at source 6b			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld			_
7 Total credits and payments. Add lines 6a through 6d			0.
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			_0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded 11			
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	+
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1 1		
distributed by the foundation in connection with the activities.			İ
c Did the foundation file Form 1120-POL for this year?	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ► \$ 0 .) !)
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			-
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b 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		Х
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:	1 1		
By language in the governing instrument, or			ĺ
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	х	
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	Х	
, season and the season property of the season season season season season season season season season season s			
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
KS			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	`	}	ı
of each state as required by General Instruction G? If "No," attach explanation	8b	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		х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
	orm 990 -	PF c	

	1990-FF (2014) WALTER S & EVAN C JONES FOUNDATION 23-738	<u> 4087</u>		Page 5
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1	ı	
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address WWW.JONESFDN.ORG			
14	The books are in care of ► SHARON L TIDWELL Telephone no. ► 620-3	12-1	714	
	Located at ► 2501 W 18TH AVE SUITE D, EMPORIA, KS ZIP+4 ►6	5801		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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			
Pa	art 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 1	1	
	a disqualified person? Yes X No	l i		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)		ŀ	
_	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
D		1.		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		ĺ	
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	1, 1		77
_	before the first day of the tax year beginning in 2014?	1c		<u>X</u>
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		ŀ	
	before 2014?	1 1	1	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
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.) N/A	2b	\rightarrow	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>		- [
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		- 1	
	during the year? Yes X 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		ŀ	
	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,		ŀ	
	Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
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?	4b		<u>X</u>
	Fo	m 990	-PF (2014)

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Re	Required (contin	23-13840	18 /	Page 6
5a During the year did the foundation pay or incur any amount to:		i ioquii ou (comii	1000)		T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	□ v	es X No		İ
(2) Influence the outcome of any specific public election (see section 4955); o			CS LAL NO		İ
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	··· ?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		23 22 100		
4945(d)(4)(A)? (see instructions)		□ v	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,			53 L2J NO		
the prevention of cruelty to children or animals?			ac Y No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uno		Land I	53 LAL 110		
section 53.4945 or in a current notice regarding disaster assistance (see instru	'	-	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•		· 🔭 🖹	30	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
7.77	_		es 🔲 No	ļ	
expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945		1/A, .L1	es NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	organal hanafd santrast?	[] 10	es X No		٦,
If "Yes" to 6b. file Form 8870.	ersonal benefit contract?		. " -	6b	X
	haltar transaction Q				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	table to the transaction?	Ш т	S LAL NO	71	 -
b If "Yes," did the foundation receive any proceeds or have any net income attributed Part VIII Information About Officers, Directors, Trusto	es Foundation M.	pagara Highli	N/A	7b	.1
Paid Employees, and Contractors	ees, roundation ivid	magers, migni	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
		(c) Compensation	(d) Contributions to	(e) Fx	nense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	employee benefit plans and deferred	(e) Ex	t, other
· · · · · · · · · · · · · · · · · · ·	to position	`enter'-0-)'	compensation	allowa	ilices
				ĺ	
SEE STATEMENT 7		64 968	19,992.		Λ
JEE STATEMENT /		04,300.	17,334.		0.
· · · · · · · · · · · · · · · · · · ·					
		 -			
				ľ	
· · · · · · · · · · · · · · · · · · ·					
				ļ	
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none.	enter "NONE."			-·
	(b) Title, and average		(d) Contributions to	(e) Exr	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account allowa	, other
NONE	devoted to position		compensation	alluwa	11062
NONE			-		
	· · · · · · · · · · · · · · · · · · ·				
			İ		
	 -				
A LL aurabay of ather appalauces asid aura-\$50,000					
otal number of other employees paid over \$50,000		_	. ▶ 1		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Comp	ensation
NONE		-
Total number of others receiving over \$50,000 for professional services	D	0
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	
1214 MEDICAL GRANTS TO INDIVIDUALS AND 49 INDIVIDUALS SERVED	T	
THROUGH BLOCK GRANTS TO ORGANIZATIONS	†	
IMOUGH BEOCK CHERTE TO CHCHITTETICAL	661,	042
OVERHEAD ALLOCATED TO MEDICAL GRANTS	001,	0 72 .
2 OVERMEND MILLOCATION TO MILLION CHARACTER	1	
	32	810.
680 EDUCATIONAL GRANTS TO INDIVIDUALS AND 2127 INDIVIDUALS	32,	010.
SERVED THROUGH BLOCK GRANTS TO ORGANIZATIONS	1	
DAILVID TIMOOOM DAOOM GERALD TO GROWN AND	1,438,	885.
OVERHEAD ALLOCATED TO EDUCATIONAL GRANTS	1/155/	003.
OVIIIIII IMBOOTIES TO ESOCIETOTIES OFFICE	†	
	73	030.
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		
	1	
	1	
	1	
All other program-related investments. See instructions.		
A state of the sta		
	1	
	1	
Fotal. Add lines 1 through 3		0.
	Form 990-PF	(2014)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	156,942.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	156,942.
	Reduction claimed for blockage or other factors reported on lines 1a and		
-	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	156,942.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,354.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	154,588.
6	Minimum investment return. Enter 5% of line 5	6	7,729.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1	Mınımum investment return from Part X, line 6	1	7,729.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,729.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,729.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,729.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		_1a	2,113,133.
þ	Program-related investments - total from Part IX-B	1b	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:		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,113,133.
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	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,113,133.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for	the section

Form **990-PF** (2014)

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				7,729.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:		-		
, ,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 1,804,897.				
b From 2010 1,781,068.				
c From 2011 . 1,763,377.				
dFrom 2012 2,085,167.				
e From 2013 2,271,127.				
f Total of lines 3a through e	9,705,636.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: \triangleright \$ 2,113,133.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				1
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				7,729.
e Remaining amount distributed out of corpus	2,105,404.			
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,811,040.			
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		0.		
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 instr.			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				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	1		,
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	1,804,897.			
9 Excess distributions carryover to 2015.	1,004,057.			
Subtract lines 7 and 8 from line 6a	10,006,143.			
10 Analysis of line 9:				
a Excess from 2010 1,781,068.				
b Excess from 2011 1,763,377.	-			
c Excess from 2012 2,085,167.	1		1	
d Excess from 2013 2,271,127.		İ		
e Excess from 2014 2, 105, 404.				
423581 11-24-14				Form 990-PF (2014)

Form 990-PF (2014) WALTER	S & EVAN C	JONES FOUND	ATION	23-73	84087 Page
Part XIV Private Operating F	oundations (see in	structions and Part VII	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			▶ ∟		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described i	in section .	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed	İ				
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.			İ		
·					
Subtract line 2d from line 2c					
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				İ	
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 Info	rmation (Comple	te this part only i	if the foundation	had \$5,000 or mo	re in assets
at any time during t				40,000 01 1110	
1 Information Regarding Foundation	n Managers				-·· <u>-</u>
a List any managers of the foundation wh		than 2% of the total contr	thutions received by the	foundation hafore the close	e of any tay
year (but only if they have contributed n			ID BEIONS TOCCIVED BY THE	ioundation before the close	c or any tax
NONE					
 b List any managers of the foundation wh other entity) of which the foundation has 			or an equally large portio	n of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contributi	ion. Grant. Gift. Loan.	Scholarship, etc., Pr	ograms		
Check here ▶ ☐ If the foundation o			_	ot accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	· · · · · · · · · · · · · · · · · · ·	··· -			
WALTER S AND EVAN C					
2501 W 18TH AVE SUIT		•			
b The form in which applications should b			ould include:		
WRITTEN c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards			•	ther factors:	
GEOGRAPHICAL FOR ANY	AWARD, UND	ER 21 FOR M	EDICAL		

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year EDUCATIONAL GRANTS SCHOLARSHIPS FOR NEEDY VARIOUS INDIVIDUALS EMPORIA, KS 66801 1,438,885. PAYMENTS FOR MEDICAL MEDICAL GRANTS SERVICES FOR THE NEEDY **VARIOUS** EMPORIA KS 66801 661,042. **▶** 3a Total 2.099.927. **b** Approved for future payment NONE **▶** 3b Total

Form **990-PF** (2014)

r gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	
r groșs amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exemp function income
rogram service revenue:	code		code	Amount	TOTAL COLOR
·	 				
	 				
	i I	- .	+		
	 		- 		
	1				
Fees and contracts from government agencies		 			
lembership dues and assessments					
iterest on savings and temporary cash				_ (
vestments	-		14	7.	
ividends and interest from securities					
et rental income or (loss) from real estate:					
Debt-financed property	ļ				
Not debt-financed property					
et rental income or (loss) from personal					
operty					
ther investment income					
ain or (loss) from sales of assets other				ľ	
an inventory					
et income or (loss) from special events					
oss profit or (loss) from sales of inventory					
ther revenue:					
	1 1				
	1 1				
	1				
ubtotal. Add columns (b), (d), and (e)		0		7.	
otal. Add line 12, columns (b), (d), and (e)				. 13	
worksheet in line 13 instructions to verify calculations.)			•		
rt XVI-B Relationship of Activities t	to the Accom	plishment of I	Exempt P	urposes	
			-A contributed	l importantly to the accomp	lishment of
No. Explain below how each activity for which inco					
the fermination is expense murposes (other them	by providing funds	for such purposes).			
the formulation is assemble assessed (other them	by providing funds	for such purposes).			
the formulation is assemble assessed (other them	by providing funds	for such purposes).			
the formulation is assemble assessed (other them	by providing funds	for such purposes).			
	by providing funds	for such purposes).			
the foundation is exempt nursease (other then	by providing funds	for such purposes).			
the foundation is exempt nursease (other then	by providing funds	for such purposes).			
the foundation is exempt nursease (other then	by providing funds	for such purposes).			
the fermination is expense murposes (other them	by providing funds	for such purposes).			
the fermination is expense murposes (other them	by providing funds	for such purposes).			
the fermination is expense murposes (other them	by providing funds	for such purposes).			
the foundation is exempt nursease (other then	by providing funds	for such purposes).			

	· Exempt Organ	ıizations					
1 Didj	the organization directly or indi	irectly engage in any of the follow	ring with any other organizatio	on described in section 501(c) of		Yes	No
the (Code (other than section 501(c	c)(3) organizations) or in section	527, relating to political organi	izations?			
a Tran	sfers from the reporting found	lation to a noncharitable exempt (organization of:				
	Cash		_		1a(1)		_x
	Other assets				1a(2)		X
٠,	r transactions:		• • • • • • • • • • • • • • • • • • • •				
	Sales of assets to a noncharita	able exempt organization			1b(1)		Х
		oncharitable exempt organization		•	1b(2)		X
	Rental of facilities, equipment,						X
٠,					1b(3)		
	Reimbursement arrangements	'	• • • • • • • • • • • • • • • • • • • •		1b(4)		X
	Loans or loan guarantees				1b(5)		X
		embership or fundraising solicitat			1b(6)		X
		ailing lists, other assets, or paid e	-		1c		X
				vays show the fair market value of the goods, o		ets,	
				e in any transaction or sharing arrangement, sh	iow in		
COIU		other assets, or services received (c) Name of noncharitat		(d) D			
a) Line no	(a) Minoant mivolved			(d) Description of transfers, transactions, and si	naring arr	angeme	MS
	 	N/A		 			
		<u> </u>		 			
				<u> </u>			
	 						
	 						
	<u> </u>				_		
	 	 -					
	 	<u> </u>					
	 	 					
	<u> </u>						
		-	 				
	 			<u> </u>			
							
	 			 			
	<u></u>	1					
	•	tly affiliated with, or related to, or	• •	rations described	٦.,		1
		r than section 501(c)(3)) or in se	ction 52/7	L	」Yes	X	J No
<u> </u>	es," complete the following sch		1 (b) Topo of acceptant	(.) 0			
	(a) Name of org	janization	(b) Type of organization	(c) Description of relationshi	<u> </u>	_	
	N/A						
- 1					he IRS di		
Sign			_	show	with the n below (s	prepare see instr)?
Here	X Jon D	Thomas	× 12/23/15	PRESIDENT	Yes		No
.,l	Signature of officer or trustee	· · · · · · · · · · · · · · · · · · ·	Date	Title			
	Print/Type preparer's na	(1)	signature	Date Check TIF PTIN			
	KATHLEEN D).	1/ //	EC 1 7 20 Self-employed			
Paid	CENTLIVRE,			P00	<u>8305</u>		
Prepa		ER & GAEDDERT,	CHARTERED	Firm's EIN ► 48 – 08	9499	9	
Use O							
	Firm's address ► 12		, P.O. BOX 704	4			_
	EM	PORIA, KS 6680	1	Phone no. (620)3	<u>42-7</u>	<u> 64</u> 1	<u> </u>
					m 990 -		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2014

Name of the organization

Employer identification number

	WALTER S & EVAN C JONES FOUNDATION	23-7384087
Organization type(check one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charatable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	zation is covered by the General Rule or a Special Rule . 1 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	ial Rule. See instructions.
General Rule		
	inization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to om any one contributor. Complete Parts I and II. See instructions for determining a contrib	
Special Rules		
sections 50 any one col	inization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 19(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, intributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the al 990-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that received from
year, total o	nization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for the contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or contributions of cruelty to children or animals. Complete Parts I, II, and III.	
year, contri is checked, purpose. De	nization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for butions exclusively for religious, charitable, etc., purposes, but no such contributions totaled enter here the total contributions that were received during the year for an exclusively religion not complete any of the parts unless the General Rule applies to this organization because arritable, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000. If this box gious, chantable, etc.,
but it must answer "	ration that is not covered by the General Rule and/or the Special Rules does not file Sched No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on to meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

WALTER S & EVAN C JONES FOUNDATION

23-7384087

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WALTER S EVAN C JONES TRUST 1200 MAIN 14TH FLOOR KANSAS CITY, MO 64141-6119	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	•	\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Occupiete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

WALTER S & EVAN C JONES FOUNDATION

23-7384087

Part II N	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ -			

423454 11-05-14

Name of orga	nization		Employer identification number
መልፕ.ጥፑው	S & EVAN C JONES FOUR	JID A TIT ON	23-7384087
Part III	Exclusively religious, charitable, etc., cor the year from any one contributor. Complete completing Part III, enter the total of exclusively religion. Use duplicate copies of Part III if additional controls in the controls of the control of the controls of the controls of the controls of the controls of the controls of the control	tributions to organizations described columns (a) through (e) and the follo us, charitable, etc., contributions of \$1,000 o	in section 501(c)(7), (8), or (10) that total more than \$1,000 for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of git	it
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gif	t
_	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of giff	t .
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	IPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE			(B) INVESTMENT INCOME	
BANK OF AMERICA		7.	7.	
TOTAL TO PART I, LINE 3		7.	7.	
FORM 990-PF	LEGAL	FEES		STATEMENT 2
DESCRIPTION		NET INVEST-	(C) ADJUSTED NET INCOM	CHARITABLE
	6,308.	0	•	0.
TO FM 990-PF, PG 1, LN 16A	6,308.	0	•	0.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION		NET INVEST-	(B) (C) NET INVEST- ADJUSTED MENT INCOME NET INCOME	
	895.	0	•	0.
TO FORM 990-PF, PG 1, LN 16B	895.	0	•	0.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL REPORT PAYROLL TAXES PROPERTY TAXES	40. 5,400. 13.	0 0 0	•	0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	5,453.	0	•	0.

OFFICE CHAIR

CONFERENCE TABLE

DELL OPTIPLEX 3010

DELL OPTIPLEX 3010

DELL OPTIPLEX 3010

QUICKBOOKS 2014

NEW OFFICE

2 DESKS & A LATERAL FILE

OFFCE MOVABLE PARTITIONS

DELL POWER EDGE T320 SERVER

TOTAL TO FM 990-PF, PART II, LN 14

BROTHER 2820 LASER FAX

0.

0.

0. 0.

693.

724.

724.

724.

406.

5,816.

11,541.

2,454.

FORM 990-PF	OTHER E	XPENSES	 	··	STATEMENT	5
·	(A) EXPENSES	(B) NET INVE	!ST-	(C) ADJUSTED	(D) CHARITA	RT.F
DESCRIPTION	PER BOOKS	MENT INC		NET INCOME		
INSURANCE	3,225.		0.			0.
OFFICE SUPPLIES	1,982.		0.			0.
SUBSCRIPTIONS	6,164.	•	0.			0.
TELEPHONE	2,989.		0.			0.
POSTAGE	1,179.		0.			0.
COMPUTER RELATED	2,626.		0.			0.
TRAINING AND EDUCATION	3,393.		0.			0.
BANK FEE	189.		0.			0.
OFFICE CLEANING	2,600.		0.			0.
TO FORM 990-PF, PG 1, LN 23	24,347.		0.			0.
FORM 990-PF DEPRECIATION OF	F ASSETS NOT	HELD FOR	INVE	STMENT	STATEMENT	6
	COS	T OR		MULATED		
DESCRIPTION	OTHER	BASIS	DEPR	ECIATION	BOOK VALU	E
FILE CABINET	-	196.		196.		0.
FILE CABINET		190.		190.		0.
DESKS & SUPPLIES		1,189.		1,189.		0.
WAITING ROOM CHAIRS		742.		742.		0.

472.

650.

160.

884.

4,059.

4,206.

1,243.

1,243.

1,243.

5,965.

23,172.

730.

472.

650.

160.

191.

519.

519.

519.

324.

149.

11,631.

4,059.

1,752.

	LIST OF OFFICERS, I		STAT	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
MEGAN EVANS PO BOX 67 LEBO, KS 66856	TREASURER 1.00	3,300.	0.	0.
MAX STEWART, JR 32 BODOCK ROAD EMPORIA, KS 66801	TRUSTEE 1.00	2,400.	0.	0.
JEFF LONGBINE 3012 W US HIGHWAY 50 EMPORIA, KS 66801	TRUSTEE 1.00	1,500.	0.	0.
TOM THOMAS PO BOX 704 EMPORIA, KS 66801	PRESIDENT 1.00	3,900.	0.	0.
JEFF LARSON 2249 MT VERNON TERRACE EMPORIA, KS 66801	VICE PRESIDENT 1.00	0.	0.	0.
SHARON L TIDWELL 2501 W 18TH AVE, SUITE D EMPORIA, KS 66801	EXECUTIVE DIRE 40.00		19,992.	0.
GREG BACHMAN 2812 W 12TH AVE EMPORIA, KS 66801	SECRETARY 1.00	3,300.	0.	0.
CHERYL MUSSATTO 23030 N 4TH OSAGE CITY, KS 66523	TRUSTEE 1.00	3,600.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	64,968.	19,992.	0.

Asset No.	Description	Date Acquired Method	od Lrfe	Ling	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	1FILE CABINET	030979SL	8.00	16	196.			196.	196.		0
	2FILE CABINET	071379SL	8.00	16	190.			190.	190.		0
	3DESKS & SUPPLIES	031382SL	5.00	16	1,189.			1,189.	1,189.		0
	4MAITING ROOM CHAIRS0531	3053183SL	5.00	16	742.		-	742.	742.		
	H	043090SL	5.00	16	472.			472.	472.		0
	₹	052000SL	7.00	16	650.			650.	650		0
	7CONFERENCE TABLE	110800SL	7.00	16	4,059.			4,059.	4,059.		0
	ج ج	041009SL	5.00	16	160.			160.	160.		0
	OFFCE MOVABLE 10PARTITIONS DELT POWER EDGE	051713SL	10.00	016	884.			884.	103.		888
	SERVER	061013SL	5.00	16	4,206.			4,206.	911.		841.
H	12DELL OPTIPLEX 3010	061013SL	5.00	16	1,243.			1,243.	270.		249.
	13DELL OPTIPLEX 3010	061013SL	5.00	16	1,243.			1,243.	270.		249.
H	14DELL OPTIPLEX 3010	061013SL	5.00	16	1,243.			1,243.	270.		249.
H	15QUICKBOOKS 2014	031814SL	3.00	16	730.			730.	81.		243.
	16NEW OFFICE	040715SL	10.00	016	5,965.			5,965.			149.
	9				23,172.		0	23,172.	9,563.	0	2,068.
			-]							

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction