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### **Return of Private Foundation**

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

OMB No 1545-0052

Open to Public Inspection

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

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

and ending Name of foundation A Employer identification number Mary L Alden Trust FBO Topeka Rescue Mission Number and street (or PO box number if mail is not delivered to street address) Room/suite 37-6605503 B Telephone number (see instructions) PO Box 5049 City or town State ZIP code Topeka KS 66605 785-267-8482 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply Initial return D 1. Foreign organizations, check here Initial return of a former public charity Final return Amended return 2. Foreign organizations meeting the 85% test, Address change check here and attach computation Name change E If private foundation status was terminated under 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 U Other taxable private foundation Fair market value of all assets at J Accounting method X Cash Accrual 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) ▶ \$ 441,500 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 450.097 130 2 Check ▶☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 12 12 4 Dividends and interest from securities 4.155 4.155 Gross rents 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 4.096 6a Revenue b Gross sales price for all assets on line 6a 4,096 4,096 7 Capital gain net income (from Part IV, line 2) 引きの変がなっ 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances 335 , · 10 b Less Cost of goods sold Gross profit or (loss) (attach schedule) C Ö 11 S Other income (attach schedule) 12 458,360 8,263 0 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 491 491 Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professional fees (attach schedule) C 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 491 0 491 Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 491 491 Subtract line 26 from line 12 · 1 457,869 Excess of revenue over expenses and disbursements а Net investment income (if negative, enter -0-) 8.263 Adjusted net income (if negative, enter -0-)

P 22

1   Cash—mon-interest-bearing   29,437   29,43	p:	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Ena	or year
2 Savings and temporary cash investments  3 Accounts receivable ►  Less allowance for doubtful accounts ►  4 Piedges receivable ►  Less allowance for doubtful accounts ►  5 Grants receivable  6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)  7 Ober notes and loans receivable (attach schedule) Less allowance for doubtful accounts ►  8 Inventiones for sale or use  9 Preparad expenses and deferred charges  10a investments—Use and state government obligations (attach schedule)  1 Investments—Original actions (attach schedule)  2 Investments—Original actions (attach schedule)  1 Cartial assets (describe ►  1 Total assets (describe ►  2 Investments—Original actions (attach schedule)  2 Investments—Original actions (attach schedule)  3 Investments—Original actions (attach schedule)  4 Investments—Original actions (attach schedule)  5 Total assets (describe Figure 1)  2 Investments—Original actions (attach schedule)  2 Investments—Original actions (attach schedule)  3 Investments—Original actions (attach schedule)			should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
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and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporanily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 457,027  Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Becrease in Market Value  25 Temporanily restricted 26 Permanently restricted 27 Tomporanily restricted 28 Paid-in on the stricted 29 Retained earnings, accumulated in line 2 (itemize) 20 457,027  20 457,027  21 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		23	Total liabilities (add lines 17 through 22)	0	0	
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27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 842	Ē		<u> </u>			<b>1</b>
Capital stock, trust principal, or current funds  Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions)  Total liabilities and net assets/fund balances (see instructions)  Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3  Decreases not included in line 2 (itemize)  Decrease in Market Value   Decrease in Market Value   Atomic State S	ī					
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Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  Decrease in Market Value  5 842	ţ	28				
Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  Decrease in Market Value  5 842	Se	•			457,027	A STATE OF THE STA
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Instructions)  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  Decrease in Market Value  5 842	<u>e</u>		•			
Part III Analysis of Changes in Net Assets or Fund Balances   1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 0   2 Enter amount from Part I, line 27a 2 457,869   3 Other increases not included in line 2 (itemize) 3   4 Add lines 1, 2, and 3 4 457,869   5 Decreases not included in line 2 (itemize) Decrease in Market Value 5 842	Z		·	0	457.027	**X.
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end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  2 457,869  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 Decrease in Market Value  5 842					with	
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)   4 Add lines 1, 2, and 3   5 Decreases not included in line 2 (itemize)   5 Decrease in Market Value   6 4 57,869	-		·	,, = = = \	l l	0
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5 Decreases not included in line 2 (itemize) ► Decrease in Market Value 5 842	4				·	457.869
	5			e		+
	6					<del></del>

Part	(a) List and describe the	Losses for Tax on Investre kind(s) of property sold (e.g., real estate se, or common stock, 200 shs MLC Co.)	,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a						
b						
С						
d						
е	Capital Gains Distributions					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		in or (loss) (f) minus (g)
a b						
d						<del></del>
						4,096
<u>-</u>	Complete only for assets sho	wing gain in column (h) and owned	d by the foundation	n on 12/31/69	W 0 (0-	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (ı) I (ı), ıf any	col (k), but no	l (h) gain minus it less than -0-) <b>or</b> from col (h))
а						
b						
С						
d						
e						4,096
2	Capital gain net income or (		also enter in Pa ), enter -0- in Pa		2	4,096
3	Net short-term capital gain of	or (loss) as defined in sections 1	•			<u> </u>
		ine 8, column (c) (see instructio		er -0- in )		
	Part I, line 8	, , , , , ,	, , ,,	}	3	(
Part		er Section 4940(e) for Red	uced Tax on N	let Investment	Income	
Was t		ection 4942 tax on the distributa ualify under section 4940(e) Do			e period?	Yes X No
1	<del></del>	nt in each column for each year			ng any entries	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s Net value	of noncharitable-use a		stribution ratio divided by col. (c))
-	2014					0 000000
	2013		• •			0 000000
	2012					0 000000
	2011					0 000000
	2010					0 000000
		•				
2	Total of line 1, column (d)				2	0 000000
3	• -	r the 5-year base period—divide	e the total on line	2 by 5, or by the		
	number of years the founda	tion has been in existence if les	s than 5 years		3	0 000000
4	Enter the net value of nonch	naritable-use assets for 2015 fro	om Part X, line 5		4	
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investment	income (1% of Part I, line 27b)			6	(
7	Add lines 5 and 6				7	(
8	Enter qualifying distributions	s from Part XII, line 4			8	
U		er than line 7, check the box in F	Part VI, line 1b, a	ind complete that		

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?  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 and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation with the activities and copies of any materials published or distributed by the foundation during the year?  If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by the foundation during the year?  If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by the foundation during the year?  If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by the foundation during the year?  If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by a second during the year?  If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by a second during the year?  If "Yes," attach a detailed description of the activities and copies of the things and copies of the activities and copies and copies of the activiti	Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	tructio	ns)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here \( \sigma \) and enter 1% of Part I, line 12. col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter 4% of Part I, line 12. col. (b)  3 Add lines 1 and 2  3 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-)  4 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-)  5 Tax paid with application for extension of them to file (Form 8889)  6 Exempt foreign organizations—tax withheld at source  c Tax paid with application for extension of time to file (Form 8889)  6 Extension of the second second 4947(a)(1) trusts and taxable foundations only Others enter -0-)  5 Tax paid with application for extension of time to file (Form 8889)  6 Exempt foreign organizations—tax withheld at source  c Tax paid with application for extension of time to file (Form 8889)  6 Extension organizations—tax withheld at source  c Tax paid with application for extension of time to file (Form 8889)  7 Total credits and payments. Add lines 8 althrough 88  8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  7 Total credits and payments. Add lines 8 althrough 80  8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  10 Overpayment. If line 7 is more than line 7, enter amount ower paid  10 Overpayment. If line 7 is more than line 10 files 5 and 8, enter the amount overpaid  11 Total credits and payments. Add lines 8 althrough 80  12 Tax (Line 1) Total credits and payments and 6 is more than line 7, enter amount overpaid  13 Line 1 the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interview in any political campaign?  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interview in any political campaign?  14 Dur	1a	Pate of a large distance of a talker	13.23		1 E 14 .	را د اله د اله	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (c) Part I, line 12, col. (c) Part I, line 12, col. (d) Part I, line 12, col. (d) Part I, line 12, col. (e)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations enter -0.)  Sabilities A (income) lax (domestic sections 4947(a)(1) trusts and taxable foundations only. Others enter -0.)  Sabilities A (income) lax (domestic sections 4947(a)(1) trusts and taxable foundations on fore there in the come in the section of sections 4941 trusts and taxable foundations on an enter an analytic section 4945 (a) trusts and taxable foundation and trusts. In the analytic section 4945 (a) trusts and taxable foundation and trusts. In the analytic section 4945 (a) trusts and taxable trusts and taxable to the foundation and trusts. In the analytic section 4945 (a) trusts and taxable taxable taxable trusts. In the analytic section 4945 (b) trusts. In the analyt	b	* * * * * * * * * * * * * * * * * * * *	1		سند. 1	65	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  3 Add line 5 1 and 2  3 Jest 5  4 Subtitle 6 (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  6 b	<del>-</del>	_	<del>                                     </del>				<del></del> ;
2 Au under section \$11 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter-0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter-0- 6 185 6 Credits/Payments a 2015 estimated tax payments and 2014 overpayment credited to 2015 6 Exempt foregin organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Exempt foregin organizations—tax withheld at source d Backup withholding erroneously withheld Total credits and payments Add lines 8a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here for a formal for extension of time to file (Form 8868) 6 Exempt for lines 5 and 8 is more than line 7, enter amount owed 7 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 165 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than 10 overpaid 8 is lines 10 overpaid 8 is lines 10 overpaid 9 is lines 10 overpaid 9 is lines 10 overpaid 9 is lines 10 o	С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	,	~		٠.	
Subbtle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  165  Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  165  Tax based on investment line 7 is 165  Exempt foreign organizations—lax withheld at source  168  17 Total credits and payments Add lines 6a through 6d  18 Eackup withholding erroneously withheld  19 Total credits and payments Add lines 6a through 6d  19 Tax due. If the total of lines 5 and 18 is more than line 7, enter amount owed  10 Overpayment. If line 7 is more than line 10 lines 5 and 8, enter the amount owerpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount overpaid  10 Overpayment. If line 7 is more than line 7, enter amount ove	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2			0	
Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  6 Credits/Payments 2 O15 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations—tax withheld at source 1 Tax paid with application for extension of time to file (Form 8868) c Backup withholding erroneously withheld 1 Total credits and payments. Add lines 6a through 6d 2 Enter any penalty for underpayment of estimated tax. Check here	3	Add lines 1 and 2	3		1	65	· · · · · · · · · · · · · · · · · · ·
6 Credits/Payments a 2015 estimated tax payments and 2014 overpayment credited to 2015 be Exempt foreign organizations—tax withheld at source 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 8 Enter any penalty for underpayment of estimated tax. Check here	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			_	
a 2015 estimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations—Lax withheld at source 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 8 Enter any penalty for underpayment of estimated tax Check here	5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			65	
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d Backup withholding erroneously withhold 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax Check here	b			 17.	*	-	
Total credits and payments Add lines 8a through 6d  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Inter the amount of line 10 to be Credited to 2016 set/mated tax. ► Refunded ► 11  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?  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?  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?  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?  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?  The participate or intervene in any political campaign?  Intervene in any political campaign?  The answer is "Yes" to 1 aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation file participate or distributed by the foundation file participate or distributed by the foundation during the year for political expenditure tax imposed on foundation managers ►\$  Has the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," attach a detailed description of the activities of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Dut the foundation have ar					3. · · ·	, ' '	1
Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Dung 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? 10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see linistructions for the definition)? 11 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 and copies of any materials published or distributed by the foundation of the individual of the foundation file Form 1120-POL for this year? 12 In the foundation managers ▶ \$ 13 Has the foundation managers ▶ \$ 14 Has the foundation managers ▶ \$ 15 Has the foundation managers ▶ \$ 16 If "Yes," attach a detailed description of the activities and copies of any materials published or distributed by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 16 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 18 Has the foundation have unrelated business gross income of \$1,000 or more during the year? 18 If "Yes," attach a detailed description of the activities and incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes and paid the foundation have unrelated business gross income of \$1,000 or more during the year? 19 If "Yes," attach the statement required by General Instruction 7 10 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 9 By language in the governing instrument of the paid that the statement required by General Instruction 6? If "No," at				, , , ,	. *\		
10 Overpayment. If line 7 is more than line 7, enter amount owed 11 Cherrithe amount of line 10 to be Credited to 2016 estimated tax 12 Nump 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? 12 Dund 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? 13 Dund the spend more than \$100 duning the year (either directly or indirectly) for political purposes (see Instructions for the definition)? 14 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 15 Did the foundation file Form 1120-POL for this year? 16 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 17 (1) On the foundation Ps (2) On foundation managers Ps 18 Has the foundation engaged in any activities that have not previously been reported to the IRS? 18 Pass 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 19 If "Yes," has it filed a tax return on Form 990-F for this year? 19 If "Yes," attach the statement required by General Instruction 7 10 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 15 By state legislation that effectively amends the governing instruments of the Altorney General (or designate) of each state as required by General Instruction 7 15 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either 16 By state legislation that effectively amends the governing instruments of the Altorney General (or designate) of each state as required by General Instruction 7 19 If the answer is "Yes" to line 7, has the		· ·	<del>  '- </del>			쒸	—
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b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or  • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  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) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  9 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				-	3		X
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If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  ■ By language in the governing instrument, or  ■ By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  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) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b N	l/A	
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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			,		9		Х
	10	·	theır			寸	
		· · ·			10		X

Part	VII-A Statements Regarding Activities (continued)				age O
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				T
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ▶				
14	The books are in care of ► CoreFirst Bank & Trust  Telephone no ► 78	5-267-	8482		
	Located at ► PO Box 5049 Topeka KS ZIP+4 ► 66	605			
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	1			<b>▶</b> □
16	At any time during calendar year 2015, 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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If		Į,		4 3
	"Yes," enter the name of the foreign country		γ.		1 1818
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		19 e v. 1		,
	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)		۸.		2500
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<b>√</b> No	. 148	480	1487
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_	` ' .	22 12 15 16 16 16 16 16 16 16 16 16 16 16 16 16	10 Sec. 15
		<u> No</u>			Zi.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<b>√</b> No	(	A WASH	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<b>No</b>		1	4.530
	(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)?	√ No		. 4	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		Salah Kan	, ,	
	foundation agreed to make a grant to or to employ the official for a period after	_	* * * * * * * * * * * * * * * * * * *	2505	92°85. " a
	termination of government service, if terminating within 90 days)	No	Aller St.	٨, ١	1000
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		1000	234.22	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	_	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	<b>-</b>	7 1000	igroppi na	###\$
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 2015?		1c	And Andrew	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		Phylogy	No bes	; \$ ^1
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		4,50		
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	_	12	34.	ا ، ۔ ا
	6e, Part XIII) for tax year(s) beginning before 2015?	<b>∐</b> No		Bresylles.	ne.
	If "Yes," list the years  20, 20, 20		<b>"</b> ,	1 2000, 24 AS	1. T
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		٠, ,	- 353	100 x x x
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	)			Mary.
	all years listed, answer "No" and attach statement—see instructions)		2b	N/A	1906
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here 20, 20, 20, 20		,	120	S. A.
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes	<b>⊠</b> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or		* ^ \	, ,	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		~	Ò	
	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		A&46	Sign Services	
	foundation had excess business holdings in 2015)		3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			.:Zn.r	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?		4b		X

Part	VIES Statements Regarding Activities	TOF VVF	iich Form	4/20 N	nay be Re	quire	a (conun	uea)			
5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to it			section	4945(e))?		Yes	X No			, ,
	(2) Influence the outcome of any specific public ele directly or indirectly, any voter registration drive	-	ee section 49	955), or	to carry on	,	Yes	X No			
	(3) Provide a grant to an individual for travel, study	, or othe	er sımılar pur	poses?			Yes	X No			j
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	charitat	ole, etc , orga	ınızatıoı	n described	ın	☐ Yes	X No	:		and the state of t
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil			terary, o	or education	nal	Yes	X No			;
b	If any answer is "Yes" to 5a(1)-(5), did any of the ti	ransactı	ons fail to qu	alify un	der the exc	eptions	described	d in			
	Regulations section 53 4945 or in a current notice	regardın	ig disaster as	ssistand	e (see instr	uctions	)?		5b	N/A	<del>, ,</del>
	Organizations relying on a current notice regarding										.
С	If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for	r the gra	ant?	·	rom the tax		☐ Yes	☐ No			1
c-	If "Yes," attach the statement required by Regulation										į
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?	ius, dire	cuy or maire	cily, to p	bay premiur	115	☐ Yes	X No			
b	Did the foundation, during the year, pay premiums,	directly	or indirectly	on a n	ersonal ben	efit con			6b		X
-	If "Yes" to 6b, file Form 8870	uncouy	or maneous,	on a p	croonal bon	001	ili dot		55		
7a	At any time during the tax year, was the foundation a pa						Yes	X No			
	If "Yes," did the foundation receive any proceeds of VIII Information About Officers, Director		_					aid Em	7b	N/A	
ı aı	and Contractors	Ji3, III	ustees, i O	unuan	OII Manaç	jers, r	nginy r	aid Liii	ibioye	,	
1	List all officers, directors, trustees, foundation r	nanage	rs and their	compe	ensation (se	ee insti	ructions).				
		(b) Title	, and average	(c) Co	mpensation	(d)	Contribution	s to	(e) Expe	nse acc	count,
	(a) Name and address		s per week ed to position		not paid, iter -0-)		oyee benefit erred compe		other	allowan	ces
	ırst Bank & Trust	Trustee									
PO Bo	x 5049 Topeka, KS 66605		50		491						
				,				,,,,,,			
2	Compensation of five highest-paid employees (	other th	an those in	cluded	on line 1—	see ins	structions	s). If no	ne, ent	er	
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	reek	(c) Compen	sation	(d) Contribution employee plans and compens	benefit deferred	(e) Expe	ense acc allowan	
NONE							· F - //-				
						•					
Total	number of other employees and aver \$50,000										
otal	number of other employees paid over \$50,000										

Form 990-PF (2015)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "N	IONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	-
Total number of others receiving over \$50,000 for professional services	>
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
· ······	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions	-
2	
<b></b>	
Total. Add lines 1 through 3	<b>&gt;</b> 0

Form **990-PF** (2015)

Form 990-PF (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	ign foundation	ons,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	Asia.	
а	Average monthly fair market value of securities	1a	80,146
b	Average of monthly cash balances	1b	5,725
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	85,871
е	Reduction claimed for blockage or other factors reported on lines 1a and	, x	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	85,871
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see	j	
	instructions)	4	1,288
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	84,583
6	Minimum investment return. Enter 5% of line 5	6	4,229
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here   □ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	4,229
2a	1 1	65	
b	Income tax for 2015 (This does not include the tax from Part VI)  2b	**,	
С	Add lines 2a and 2b	2c	165
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,064
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,064
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	4,064
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	491
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	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	491
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	491
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	ether the foun	
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income (see instruction	s)			. 430 0
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years pnor to 2014	2014	2015
	line 7	*** ; ; *****	}	·	4,064
2	Undistributed income, if any, as of the end of 2015	,			
а	Enter amount for 2014 only	,		0	
b	Total for prior years 20, 20, 20	3. ** .			<u> </u>
3	Excess distributions carryover, if any, to 2015			, , , , , , , , , , , , , , , , , , ,	
а	From 2010	200			1
b	From 2011		ું જેવા	, , ,	
С	From 2012		State State	·	, ,
d	From 2013			٠	,
е	From 2014		*		,
f	Total of lines 3a through e	T	, 4,		
4	Qualifying distributions for 2015 from Part XII,	~'**	· . « • 'Z',	·	
	line 4 ▶ \$ 491		, , , , , , , , , , , , , , , , , , , ,		
а	Applied to 2014, but not more than line 2a	Same and the same	.* , ' ' ,.		
b	Applied to undistributed income of prior years	***			
_	(Election required—see instructions)				¢
С	Treated as distributions out of corpus (Election		*		
•	required—see instructions)		,		
d	Applied to 2015 distributable amount	A * *		·	491
e	Remaining amount distributed out of corpus			The same of the sa	,
5	Excess distributions carryover applied to 2015			***************************************	
•	(If an amount appears in column (d), the same	in the second		26 . 25°	y 10 .
	amount must be shown in column (a) )	The state of the s		34.8	
6	Enter the net total of each column as	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	, ,		
•	indicated below:	day.			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0	*	* .	
b	Prior years' undistributed income Subtract	<u> </u>		* · · · · · · · · · · · · · · · · · · ·	
	line 4b from line 2b	The state of the s	o		
С	Enter the amount of prior years' undistributed	www.manka.u.a	0	<u> </u>	
·	income for which a notice of deficiency has			· '	*
	been issued, or on which the section 4942(a)			Ť	*
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				,
	amount—see instructions	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
е	Undistributed income for 2014 Subtract line	2000 ·	^ %s		
·	4a from line 2a Taxable amount—see		(* %% <sub>~</sub> ,		,
	Instructions	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	i ni nin ni	0	
f	Undistributed income for 2015 Subtract lines	1055.x	· · · · · · · · · · · · · · · · · · ·		
•	4d and 5 from line 1. This amount must be	Marie Company of the Company of the			
	distributed in 2016		, ,		3,573
7	Amounts treated as distributions out of corpus				0,070
•	to satisfy requirements imposed by section		· * * * * * * * * * * * * * * * * * * *	, v + + + + + + + + + + + + + + + + + +	
	170(b)(1)(F) or 4942(g)(3) (Election may be			# pr 44 2 2	,
	required—see instructions)				
8	Excess distributions carryover from 2010 not		, , , , , , , , , , , ,		
•	applied on line 5 or line 7 (see instructions)			* **.	, *** *
9	Excess distributions carryover to 2016.		, <u>, , , , , , , , , , , , , , , , , , </u>		
•	Subtract lines 7 and 8 from line 6a		*		
10	Analysis of line 9	· · · · · · · · · · · · · · · · · · ·			
a	Excess from 2011	* * * * * * * * * * * * * * * * * * * *	,		
b	Excess from 2012		· · ·	4	
C	Excess from 2013			,	
ď	Excess from 2014				
	Excess from 2015		· ***		!
е	LACESS HOTH ZU10	4.5.			l

Form 990-PF (2015)

Part	XIV Private Operating Foundat	ions (see instr	uctions and Part	VII-A, question 9)		N/A
1a	If the foundation has received a ruling of		*	ate operating		
	foundation, and the ruling is effective fo		•	▶		
b	Check box to indicate whether the foundation	on is a private oper	ating foundation des	cribed in section	4942(J)	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	<u> </u>
	each year listed	ļ				0
b	85% of line 2a					0
С	Qualifying distributions from Part XII, line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
С	"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					0
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization				<del>-</del>	0
	(4) Gross investment income					0
Part				he foundation had	d \$5,000 or mo	re in assets at
	any time during the year—		ns.)			
1	Information Regarding Foundation M		. d 4b 00/4			£
а	List any managers of the foundation wh before the close of any tax year (but onlose)					toundation
b	List any managers of the foundation wh	0 0WD 10% or mo	ore of the stock of s	corporation (or an e	aually large portio	on of the
	ownership of a partnership or other entit					on or the
	or a paraticion por caror ora	.,, 0		70 Or grouter interest		
2	Information Regarding Contribution, Check here ► X if the foundation on unsolicited requests for funds. If the founder other conditions, complete items	ly makes contribi ndation makes gi	utions to preselecte	ed charitable organiza	ations and does no viduals or organiz	ot accept ations
а	The name, address, and telephone num	<del></del>	dress of the person	to whom application	s should be addre	essed
b	The form in which applications should b	e submitted and i	information and ma	iterials they should in	nclude	
С	Any submission deadlines					
	Any restrictions or limitations on available	auch as trees	aronhical areas -1-	ortoble Salds tond-	of motitivitions ===	athor .
u	Any restrictions or limitations on awards factors	, such as by geo	grapriicai areas, cn	antable lielus, kinds	or manunons, or (	Ju lei

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t	he Year or Approve	d for Fut	ure 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)	or substantial contributor	recipient	Contribution	
	any foundation manager	recipient	Support	Amount
Total  b Approved for future payment			<b>▶</b> 3a	0

37-66	05503 Page <b>12</b>
or 514	(-)
nt	(e) Related or exempt function income (See instructions)
12	
4,155	
	1 1 1 1 1 1
4,096	

	t XVI-A Analysis of Income-Producing A	ctivities				
Ente	er gross amounts unless otherwise indicated		siness income	Excluded by sect	ion 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program service revenue	Dusiness code	Amount	LACIUSION COde	Amount	(See instructions)
	a					
	b					
	c		···			
	d					
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	12	
4	Dividends and interest from securities			14	4,155	
5	Net rental income or (loss) from real estate		· · · · · · · · · · · · · · · · · · ·		. <u>2</u>	
	Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	4,096	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					
	c					
	d				·	
	e					
12	(-),		0	100,000	8,263	0
13	Total. Add line 12, columns (b), (d), and (e)				13	8,263
						-1
	worksheet in line 13 instructions to verify calculation					
Pa	worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the	Accomplishme		•		
Pa Lin	worksheet in line 13 instructions to verify calculation	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for the Activities to the A	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
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Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
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Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	
Pa Lin	worksheet in line 13 instructions to verify calculation <b>T XVI-B</b> Relationship of Activities to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to the Activity for which incompanies to the Activities to th	Accomplishme	olumn (e) of Part >	VI-A contributed	importantly to the	

Part XVII	Information Regarding	ng Transfers To	o and Transactions and	Relationships With Noncharitable
	Exempt Organization	ıs		

		Exempt Org	ganizations				•				
1	Did t		rectly or indirectly e	ngage in any	of the following	g with any o	ther organiza	tion described	Π,	Yes	No
			e Code (other than s							, ,,	,,
	politi	ical organizations	?								
а	Tran	sfers from the rep	orting foundation to	a noncharitab	ole exempt org	anızatıon of	:				
	(1) (	Cash							1a(1)		Х
	(2)	Other assets							1a(2)		X
b		er transactions									125
			a noncharitable exei	-					1b(1)	+	X
			ets from a noncharita	•	rganization				1b(2)		Х
			equipment, or other	assets					1b(3)		X
		Reimbursement ar	•						1b(4)		X
		oans or loan gua							1b(5)	_	X
			rvices or membershi	•	-				1b(6)	<b> </b>	X
C			quipment, mailing list						1c	L	_ X
d			he above is "Yes," con								
			er assets, or services of or sharing arrangeme								
					<u>````</u>	<u>-</u>					
(a) Line	no	(b) Amount involved	(c) Name of none	charitable exempt	organization	(d) De	scription of transf	ers, transactions, and s	shanng arra	ngemer	its .
	-					<del></del>	<del></del>				
									···		
	-+	···	<u> </u>								
	<del>-</del> +										
<del></del>					<del></del>						
	$\overline{}$							<del></del>			
	<del>-  </del>				<del></del>		· · · · · · · · · · · · · · · · · · ·				
							<del> </del>				
2a			tly or indirectly affilia						Yes	X N	
b			following schedule		(1)(-7)			_	_		
		(a) Name of organ		(b)	Type of organization	on .		(c) Description of rela	itionship		
				, ,	У				· · · · · · · · · · · · · · · · · · ·		
			are that I have examined this re	•	,		•	nowledge and belief, it is tru	e,		
Sign	corre	ct, and complete Declaration	on of preparer (other than taxpa	yer) is based on all in	nformation of which pr	eparer has any kn	owledge	May the	RS discuss	this retu	rn
lere	1		noy Vii-	5 ا . م	-12-16	rustee		with the	preparer sho structions)?	wn belo	/ 
	Sig	nature of officer or trus	tee /	Date	$\longrightarrow$ $$			(see ins	uciions)/[	res	No
) 		Print/Type preparer's	s name	Preparer's sig		00/	Date	Check X if	PTIN		
Paid		Michael J Scher	ık <sup>(</sup>		much	yneu	5/11/20			8726	
Prepa		Firm's name	Michael J Schenk	BA				Firm's EIN ▶ 26-3	3957069		
Jse C	шу	Firm's address	3360 SW Harrison S	St , Topeka, K	S 6661				-267-286	6	

### Schedule B

'(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

### **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

**2015** 

**Employer identification number** 

IVIALY L	riden must roo lopeka	Rescue Mission	37-0003303
Organiz	zation type (check one)		
Filers o	f:	Section:	
Form 99	90 or 990-EZ	501(c)( ) (enter number) organization	
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	dation
		527 political organization	
Form 99	90-PF	X 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	n
		501(c)(3) taxable private foundation	
		7-	
Check i	f your organization is co	vered by the General Rule or a Special Rule.	
Note. O	nly a section 501(c)(7).	(8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
ınstructı		(-,, -, (-,, -, g., -, -, -, -, -, -, -, -, -, -, -, -, -,	
Genera	l Rule		
<del></del>		g Form 990, 990-EZ, or 990-PF that received, during the year, contribution operty) from any one contributor. Complete Parts I and II. See instructions butions.	
Special	Rules		
	regulations under section 13, 16a, or 16b, and the	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or sat received from any one contributor, during the year, total contributions of amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Com	990-EZ), Part I <b>i</b> , line the greater of <b>(1)</b>
	contributor, during the y	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiver, total contributions of more than \$1,000 exclusively for religious, charitourposes, or for the prevention of cruelty to children or animals. Complete I	able, scientific,
	contributor, during the y contributions totaled mo during the year for an e.	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receiver, contributions exclusively for religious, charitable, etc., purposes, but note than \$1,000. If this box is checked, enter here the total contributions the exclusively religious, charitable, etc., purpose. Do not complete any of the pothis organization because it received nonexclusively religious, charitable, during the year.	o such at were received parts unless the
Caution	ı. An organızatıon that ıs	not covered by the General Rule and/or the Special Rules does not file So	chedule 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)

Name of organizationEmployer identification numberMary L Alden Trust FBO Topeka Rescue Mission37-6605503

Part I	Contributors (see instructions) Use duplicate copi	ies of Part I if additional space is i	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Mary L Alden Trust PO Box 5049 Topeka KS 66605 Foreign State or Province Foreign Country	\$ 450,097	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organizationEmployer identification numberMary L Alden Trust FBO Topeka Rescue Mission37-6605503

Part II	Noncash Property (see instructions) Use duplicate co	opies of Part II if additional spa	ce 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 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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of or	=		Employer identification number
Part III	en Trust FBO Topeka Rescue Mission  Exclusively religious, charitable, etc., co  (10) that total more than \$1,000 for the y the following line entry. For organizations of	ear from any one contributor. C	omplete columns (a) through (e) and
	contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	(Enter this information once See	
(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, and 2		ionship of transferor to transferee
(a) No.	For Prov Country		·
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, and Z	IP + 4 Relat	ionship of transferor to transferee
	For Prov Country		
(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, and Z		ionship of transferor to transferee
,			
	For Prov Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Tunnels of air	
	Transferee's name, address, and Z	(e) Transfer of gift	ionship of transferor to transferoe
	riansieree's name, audress, and 2	relat	onship of transferor to transferee
	For Prov Country		

## **General Explanation (990-PF)**

		Explanation
Γ	1	
ı	-	
۱		
ı		
ı		
l		
ı		
ı		Part X lines 1a and 1b The foundation was funded and assets purchased October 22, 2015 Assets held 71 days /365 days equals
L		10 1945
ᆫ		

## Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Amount							SIBIO	300	2		ייייי בייייייייייייייייייייייייייייייי	ואכן סמוו	Jall
								Sa	Sales	Depreciation ar	Depreciation and Adjustments	or Loss	SSC
Long Term CG Distributions 4,096						G	Capital Gains/Losses		4,096		0		4,096
Short Term CG Distributions 0		;					Other sales				0		0.
			Check "X" if										
	Check X		Purchaser							Expense of Sale			
	to include		s a	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
Description CUSIP #	In Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
1 Capital Gains Distributions													0

# Part II, Line 10b (990-PF) - Investments - Corporate Stock

, ]						
-			0	427,590	0	412,063
		Num Shares/	Book Value	Book Value	FMV	FMV
	Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year
-	Vanguard Short Term Bond		0	46,860	0	46,371
7	Vanguard Intermediate Term Bond		0	69,370	0	67,804
3	Metropolitan West Total Return		0	71,680	0	960'02
4	Pimco Income Fund		0	60,780	0	58,391
2	Templeton Global Bond Fund		0	43,830	0	43,009
ဖ	Vanguard Small Cap		0	069'6	0	9,441
7	Fidelity Low Priced Stock		0	11,650	0	11,286
ω	Goldman Sachs Growth Opp		0	12,210	0	10,722
6	American Growth Fund		0	12,810	0	11,767
9	Dodge & Cox Stock Fund		0	12,190	0	11,375
1	Fidelity Adv New Insights		0	12,640	0	11,983
12	12 Vanguard Emerging Markets		0	12,560	0	11,461
13	13 American Europacific Growth		0	5,000	0	4,668
4	Harbor International Fund		0	086'6	0	9:036
15	Goldman Sachs MLP Energy		0	10,510	0	9,953
16	Goldman Sachs Satellite		0	25,830	0	24,700

Mary L Alden Trust FBO Topeka Rescue Mission

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

_		
. ,	Expense Account	
)	Benefits	
491	Compensation	491
	Avg Hrs Per Week	0 20
	Tile	Trustee
	Foreign Country	
	Zip Code	9999
	State	S)
	Cıty	Topeka
	Street	PO Box 5049
	Check "X" if Business	×
	Name	CoreFirst Bank & Trust