

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANIED HAY 2 6 2016

Return of Private Foundation OMB No 1545-0052 or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning , and ending

Nam	e of	foundation					A Employer identificatio	n number
_	_						42 452202	_
		K. FAMILY FOUNDATION d street (or P O box number if mail is not delivered to stre				Daam (a.u.b.	43-153393	<u> </u>
		•	et address)		Room/suite	B Telephone number	200
		MAIN ST., SUITE 700					816-283-53	
_		wn, state or province, country, and ZIP or foreign ${ t SAS\ CITY}$, ${ t MO\ 64112}$	postai co	ode			C If exemption application is	pending, check here
				Initial ratura of a fo	rmar public c	harib.	D 4 Foreign organization	a shoot boro
G C	IECK	all that apply: Initial return	_ _		arner public c		D 1 Foreign organization	is, check here
		Address change		Name change			2 Foreign organizations macheck here and attach of	eeting the 85% test,
u (nack	type of organization: X Section 501(c)(3)	vemnt n]	
<u> </u>	-	etion 4947(a)(1) nonexempt charitable trust		axable private founda	ation		E If private foundation st under section 507(b)(
L Fai		rket value of all assets at end of year J Accour			Accr	nal		
		·	Other (sp			uu,	F If the foundation is in a under section 507(b)(
•		710, 480. (Part I, co			basis)	_	ander 50011011 507 (5)(//(D), dilcok licit
		Analysis of Revenue and Expenses) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		penses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		0.			N/A	
}		Check X If the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments		813.		813.		STATEMENT 1
		Dividends and interest from securities		3,264.		3,264.		STATEMENT 2
	5a	Gross rents						
	b	Net rental income or (loss)						
	6a	Net gain or (loss) from sale of assets not on line 10		14,183.				
Ž	b	Gross sales price for all assets on line 8a 56,768.						
Revenue		Capital gain net income (from Part IV, line 2)		7		4,183.		
Ě	8	Net short-term capital gain			コマドロ			
	9	Income modifications		2		70		
	10a	Gross sales less returns and allowances		181 MAY 2	0 2016	181		
	b	Less Cost of goods sold		``	20,0	(6)		
	C	Gross profit or (loss)	<u> </u>	0000		그뜨		
	11	Other income				0,314.		STATEMENT 3
	12	Total. Add lines 1 through 11		<22,054.	> <2	2,054.	<u> </u>	
	13	Compensation of officers, directors, trustees, etc	ļ	0.		0.		0.
	14	Other employee salaries and wages	<u> </u>				<u> </u>	
"		Pension plans, employee benefits						
nses		Legal fees					<u></u>	
per		Accounting fees STMT 4		2,200.		0.	,	0.
ŭ		Other professional fees						-
Ę.		Interest	-	0 000				
and Administrative Expe		Taxes STMT 5	-	2,397.		0.	, <u> </u>	0.
inis	19	Depreciation and depletion		·		_	 	
튣		Occupancy			 	-	-	
Ψþ	1	Travel, conferences, and meetings	<u> </u>					
ä		Printing and publications	<u> </u>	2 724				
Operating	23	Other expenses STMT 6		<u>3,734.</u>	<u> </u>	0	•	0.
irat	24	Total operating and administrative		0 221		^		
Ö		expenses Add lines 13 through 23		8,331.	\	0	•	120 679
	25	Contributions, gifts, grants paid	-	129,678.		· · · · · · · · · · · · · · · · · · ·		129,678.
	26	Total expenses and disbursements		120 000		^		100 670
	<u> </u>	Add lines 24 and 25	-	138,009.	-	0	•	129,678.
	ì	Subtract line 26 from line 12:		-160 062				
		Excess of revenue over expenses and disbursements	-	<160,063.	· -		 	
		Net investment income (if negative, enter -0-)	<u> </u>		+	U	N/A	
	c	Adjusted net income (if negative enter -0-)			ــــــــــــــــــــــــــــــــــــــ		IN/A	

LHA For Paperwork Reduction Act Notice, see instructions.

Page 2

Form **990-PF** (2015)

Form 990-PF (2015)

J.C.K. FAMILY FOUNDATION

502,243.

129,678.

6

7

8

Add lines 5 and 6

See the Part VI instructions.

Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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

	990-PF (2015) J.C.K. FAMILY FOUNDATION	40.40(1) 40.40(1)		<u> 1533 </u>			² age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a),	4940(b), 4940(e), or	4948 -	- see ir	nstru	ctior	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N	/A" on line 1.	1				
	Date of ruling or determination letter: (attach copy of letter if necessary	y-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1				0.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Pa	rt I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others e	inter -0-)	2				0.
	Add lines 1 and 2	•	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others 6	enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	· · · · ,	5		-		0.
6	Credits/Payments:				_		<u> </u>
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a	2,720		-			
	Exempt foreign organizations - tax withheld at source 6b	2,,20	<u> </u>	İ			
	Tax paid with application for extension of time to file (Form 8868) 6c						
	Backup withholding erroneously withheld 6d		┪				
	Total credits and payments. Add lines 6a through 6d		7			2 7	20
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		<u> </u>	 		4,1	<u> 20.</u>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	_	8	 			
			9	 		2 7	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	2 720 2	10			4,/	20.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ► Int VII-A Statements Regarding Activities	2,720. Refunded ▶	11	<u> </u>			0.
						V	NI.
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it participate or intervei	ne in			Yes	
	any political campaign?			ļ	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se		•		16		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	pies of any materials publis	hed or				
	distributed by the foundation in connection with the activities.						
	Did the foundation file Form 1120-POL for this year?				1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ (2) On foundation managers. ► 5	\$0	•	1			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to	ax 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 instrur	ment, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				_3_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			- (-	4a		<u>X</u>
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions	ctions that conflict with the st	ate law				
	remain in the governing instrument?				6	_X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	e Part II, col (c), and Part .	XV		7	X	<u> </u>
g.	Enter the states to which the foundation reports or with which it is registered (see instructions)	•					
	KS						
t	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorne	ey General (or designate)					<u> </u>
	of each state as required by General Instruction G? If "No," attach explanation	, (8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section	4942(i)(3) or 4942(i)(5) for c	alendar		-		
•	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," compa				9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing				10		X
	and a scriedule listing	ng oren riames and addresses		For)-PF	(2015)
						-	,/

Pa	rt VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
-	If "Yes," attach statement (see instructions)	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	1-12
	Website address ► N/A	_ 13	1 22	
14	The books are in care of ► CURTIS A. KRIZEK Telephone no. ►816-	71111	120	
'7	Located at ► 4900 MAIN ST, STE 700, KANSAS CITY, MO			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	74112		
13	and enter the amount of tax-exempt interest received or accrued during the year	ж.	I/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10	1	 ^
	foreign country	ł		}
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
12	During the year did the foundation (either directly or indirectly):		103	110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1ь		
	Organizations relying on a current notice regarding disaster assistance check here	۱ ۲ <u>۰۰</u>		
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
_	before the first day of the tax year beginning in 2015?	1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	1
	defined in section 4942(j)(3) or 4942(j)(5)):		•	
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?	.		
	If "Yes," list the years \blacktriangleright		1	
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		1	
	statement - see instructions.) N/A	2b		_
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>	1		
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	,		
t	olf "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			Ì
	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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2015)	. <u>3b</u>		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
1	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 2015?	4b		X
		Form 99	90-PI	(2015

orm 990-PF (2015) J.C.K. FAMILY FOUNDATION			<u>43-15339</u>	<u>35</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir	• •			
 any voter registration drive? 			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	S?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				†
the prevention of cruelty to children or animals?			s X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check					
\boldsymbol{c} If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ııned			
expenditure responsibility for the grant?	ľ	1/A 🗌 Ye	s No		
If "Yes," attach the statement required by Regulations section 53 494	* *				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
\boldsymbol{b} Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
${f 7a}$ At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	s X No		
b If "Yes." did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highly	/		
List all officers, directors, trustees, foundation managers and their		(a) Companyation	(d) Contributes to		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) E accou	xpense nt, other
	to position	(If not paid, enter -0-)	compensation	allov	vances
CURTIS KRIZEK	TRUSTEE				
3515 W 64TH ST			_		_
SHAWNEE MISSION, KS 66208	0.50	0.	0.		0.
JENNIFER KRIZEK	TRUSTEE				
3515 W 64TH ST					_
SHAWNEE MISSION, KS 66208	0.50	0.	0.		0.
	4				
	-				
	-				
	-				
2 Compensation of five highest-paid employees (other than those in	chidad an line 4) Mara	Ontor INCAR			
2 Compensation of the highest-paid employees (other than those in	(b) Title, and average	, enter "NONE."	(d) Contributions to	1015	vnenee
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accou	xpense int, other wances
NONE	devoted to position		compensation	allo	wances
NONE	-				
	-				
	-				
		-			
				1	
	+				
	-				
Table author of other ampleus	1		<u> </u>	L	
Total number of other employees paid over \$50,000					0

Form 990-PF (2015) J.C.K. FAMILY FOUNDATION	43-1	533935 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
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) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	ical information such as the uced, etc.	Expenses
1 N/A		
2		
3		·
4		
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		
2		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	>	0 . Form 990-PF (2015)
		roini 330-FF (2015)

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

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see	instructions)			
	(a)	(b)	(c)	(d)
`	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI, line 7				40,285.
2 Undistributed income, if any, as of the end of 2015				-
a Enter amount for 2014 only			0.	
b Total for prior years:	ļ	0.		
3 Excess distributions carryover, if any, to 2015:		U •		
a From 2010 153,856.				
b From 2011 108,152.				
c From 2012 100,118.				
d From 2013 107,025.				
e From 2014 61,130.				
f Total of lines 3a through e	530,281.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 129,678.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				40,285.
e Remaining amount distributed out of corpus	89,393.			
Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	619,674.			
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				
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016			<u> </u>	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions) 8 Excess distributions carryover from 2010		···	 	
not applied on line 5 or line 7	153,856.			
9 Excess distributions carryover to 2016	133,030.			
Subtract lines 7 and 8 from line 6a	465,818.			
10 Analysis of line 9:	100,010			
a Excess from 2011 108, 152.)
b Excess from 2012 100, 118.				
c Excess from 2013 107,025.				
d Excess from 2014 61,130.	,			
- Events from 2015 89 393			1	

Form 990-PF (2015) J.C.K.	FAMILY FOUN	DATION		43-153	33935 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	>		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described	n section	4942(j)(3) or 494	12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					-
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter;					
(1) Value of all assets(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or roughtee.					
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	<u></u>				
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundatio	n had \$5,000 or mo	re in assets
at any time during	the year-see inst	ructions.)			
Information Regarding Foundation List any managers of the foundation where the second state of th	no have contributed more		tributions received by th	ne foundation before the clos	e of any tax
SEE STATEMENT 9	400/		/		
b List any managers of the foundation we other entity) of which the foundation has			(or an equally large por	tion of the ownership of a pa	artnership or
NONE				· · · · ·	
2 Information Regarding Contribution Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone nur	nber or e-mail address of	the person to whom app	lications should be addr	essed:	
b The form in which applications should	be submitted and informa	ation and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by deodraphic	cal areas, charitable fields	kinds of institutions of	r other factors	
2 7 mg 1000 londono or militations on awar	20, 000.1 do by goographii	sa. aroas, oriarnabio nelus	, and of mondifications, t	. Other factors.	

Part XV Supplementary Information	·	_		
3 Grants and Contributions Paid During the Y	If recipient is an individual,	Payment		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Paid during the year				
ACACIA ALUMNI ASSOCIATION	none	N/A	PROGRAM SUPPORT	
PO BOX 2244				
TOPEKA, KS 66601				500
ACCELERATED SCHOOLS OF OVERLAND PARK 10713 BARKLEY	NONE	N/A	PROGRAM SUPPORT	
OVERLAND PARK KS 66211				1,000.
CHILDREN'S CENTER FOR VISUALLY	NONE	N/A	PROGRAM SUPPORT	
IMPAIRED 3101 MAIN ST				
KANSAS CITY, MO 64111				20,000.
FIRST CALL	NONE	N/A	PROGRAM SUPPORT	
9091 STATE LINE ROAD				
KANSAS CITY, MO 64119			· · · · · · · · · · · · · · · · · · ·	2,500.
KANSAS STATE UNIVERSITY FOUNDATION -	NONE	N/A	PROGRAM SUPPORT	
ATHLETIC DEPARTMENT				
2323 ANDERSON AVE, STE 500				
MANHATTAN KS 66502 Total SEE CO	NTINUATION SHE	<u> </u> ድጥ(ያ)	▶ 3a	50 500
b Approved for future payment	ATTITION BILL		50	129,678,
NONE		;		
NOME				
Total			▶ 3b	0
				000 DE

Analysis	of	Income-Producing	Activities
/ W. IGI J O. O	•	miconic i reaccing	

Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
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	813.	
Dividends and interest from securities			14	3,264.	
5 Net rental income or (loss) from real estate:				3,2010	
a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			01	<40,314.>	
8 Gain or (loss) from sales of assets other				(40,514.)	
than inventory					14,183.
9 Net income or (loss) from special events			 		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
		·	 		
	1	·	 		
		·	 		
ae	_				
12 Subtotal. Add columns (b), (d), and (e)		0.		<36,237.>	14,183.
13 Total Add line 12, columns (b), (d), and (e)			·	13	
(See worksheet in line 13 instructions to verify calculation	e)			10 <u> </u>	
	-			_	
Part XVI-B Relationship of Activitie	es to the Acco	mplishment of Ex	kempt	Purposes	
Line No Explain below how each activity for which	income is reported in		contribut	ted importantly to the accomp	alishment of
the foundation's exempt purposes (other			Continua	ted importantly to the accomp	monnent of
8 N/A				-	
O N/A					
					······
					

Part XVII	Information Re Exempt Organ	egarding Tran	sfers To a	nd Transactions	and Relations	nips With Nonchai	ritable	е	
1 Did the ord			of the following	with any other organizati	on described in section	on 501(c) of	T	Yes	No
			_	, relating to political orga		,,, 55 ,(5) 51	1		
	from the reporting founda						1		ĺ
(1) Cash	, , , , , , ,						1a(1)	 	X
(2) Other	assets	-	•	•	•		1a(2)		Х
b Other trans	sactions:	•	•						
(1) Sales	of assets to a noncharita	ble exempt organizat	tion				16(1)		X
(2) Purch	nases of assets from a no	ncharitable exempt o	organization	_			1b(2)		Х
(3) Renta	il of facilities, equipment,	or other assets	-				1b(3)		X
(4) Reiml	bursement arrangements		-			,	1b(4)		X
(5) Loans	s or loan guarantees	-					1b(5)		Х
(6) Perfo	rmance of services or me	ımbership or fundrai	sıng solicitatıor	ns	•		1b(6)		X
c Sharing of	f facilities, equipment, ma	uling lists, other asse	ts, or paid emp	loyees			1c		Х
d If the ansv	wer to any of the above is	"Yes," complete the	following sched	lule. Column (b) should a	lways show the fair m	arket value of the goods, o	ther as	sets,	
or service:	s given by the reporting f	oundation. If the fou	ndation receive	d less than fair market va	lue in any transaction	or sharing arrangement, sl	how in		
	i) the value of the goods,								
(a)Line no	(b) Amount involved		f noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring ar	Tangeme	ents
	<u> </u>	N/A		·					
									
				·					
	· · · · · · · · · · · · · · · · · · ·	<u> </u>							
									
									
									
	· · · · · · · · · · · · · · · · · · ·					· 			
									
On lothe four	adation directly or indirec	the affiliated with an	related to one	or more tax-exempt orgai			·		
					HIZACIONS DESCRIDED	Г	Yes	ГУ	☐ No
	: 501(c) of the Code (othe omplete the following sch)(3)) or in Secu	UII 527 ?	• •	,	1 res	∟ם	טאו ר
<u>D</u> 11 165, CC	(a) Name of or			(b) Type of organization		(c) Description of relationsl	nin		
N/A	(-)//	<u></u>		(-) .) po o o o gamenado.	<u> </u>	(0) 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	•••		
		· · · · · · · · · · · · · · · · · · ·							
-									
				g accompanying schedules ar			the IRS	dingues	Hain
Sign and b	elief, it is true, correct, and co	mplete Declaration of p	reparer (other than	taxpayer) is based on all info	rmation of which preparer	retu	m with the	пе ргера	rer
Here) 9 / ~		1	TRUSTE		Yes		□ No
Sigi	nature of officer or truster			Date	Title				
	Print/Type preparer's n	ame	Preparer's si	gnature	Date	Check if PTIN			
			6//	// //	6/16/16	self- employed			
Paid	DOUGLAS C.	MILLER	Mous	uc	P110115	P00	0058	3211	
Preparer	Firm's name ►MII	LER HAVII	AND KE	TTER PC, PA		Firm's EIN ► 48-0			
Use Only			/	<u>-</u>					
	Firm's address ▶ 19	01 W. 477	TH PLAC	E, SUITE 20	4				
) WE	STWOOD. I	cs 6620	5		Phone no (913)	432-	272	.7

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual.	5 d-t	B	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CANSAS STATE UNIVERSITY FOUNDATION -	NONE	N/A	PROGRAM SUPPORT	
MIKE AHEARN SCHOLARSHIP FUND				
2323 ANDERSON AVE, STE 500				11.00
1ANHATTAN, KS 66502-2911				11,928
THE NELSON-ATKINS MUSEUM OF ART	NONE	N/A	PROGRAM SUPPORT	
4525 OAK STREET				
KANSAS CITY, MO 64111				5,000
UNIVERSITY OF VIRGINIA - LAW SCHOOL	NONE	N/A	PROGRAM SUPPORT	
FUND	NONE	N/A	PROGRAM SUPPORT	
580 MASSIE ROAD				
CHARLOTTESVILLE, VA 22903				2,50
ZA TE SZALI BY BOINDAMION	MONE	1/2	DDOGDAM CUDDODM	
VAIL VALLEY FOUNDATION 90 BENCHMARK RD.	NONE	N/A	PROGRAM SUPPORT	
AVON CO 81620				5,00
4VON, <u>CO 01020</u>				3,000
KANSAS STATE UNIVERSITY FOUNDATION -	NONE	N/A	PROGRAM SUPPORT	
COLLEGE OF ARTS AND SCIENCES FUND				
2323 ANDERSON AVE, STE 500				
MANHATTAN, KS 66502			 	750
UNIVERSITY OF KANSAS HOSPITAL	NONE	N/A	PROGRAM SUPPORT	
2330 SHAWNEE MISSION PKWY, STE 302		["		
WESTWOOD, KS 66205				25,000
TUD COLD DOUBLE AND OF KINGING CITY	VOVE		DDOGDAY GYDDOD	
THE GOLF FOUNDATION OF KANSAS CITY 8330 MELROSE	NONE	N/A	PROGRAM SUPPORT	
LENEXA, KS 66214				2,50
aunum, No 00214				2,300
WALKING MOUNTAINS SCIENCE CENTER	NONE	N/A	PROGRAM SUPPORT	
PO BOX 9469				
AVON, CO 81620				1,50
TRINITY UNIVERSITY	NONE	N/A	PROGRAM SUPPORT	
1 TRINITY PLACE #49				
SAN ANTONIO, TX 78212		-		1,000
Total from continuation sheets				55,17
				<u> </u>

FORM 990-PF INTERE	ST ON SAVIN	IGS AN	D TEMP	ORARY	CASH	INV	ESTMENTS	STATEME	NT	
SOURCE INTEREST INCOME TOTAL TO PART I, LINE 3			(A) REVENUE PER BOOKS 813.			(B) NET INVESTMENT INCOME 813.		(C) T ADJUSTED NET INCOME		
			813		813		813.			
FORM 990-PF	DIVIDENDS	S AND	INTERE	ST FRO	OM SEC	URI	TIES	STATEME	NT	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS			(A) REVENUE PER BOOKS		(B) NET INVES MENT INCO	T- ADJ		
DIVIDEND INCOME	3,264.		0.		3,264.		3,26	4.		
TO PART I, LINE 4	3,264.		0		3,26	54.	3,26	4.		
FORM 990-PF		OT:	HER IN	ICOME				STATEME	NT	
DESCRIPTION				(A) REVEN ER BO			(B) ET INVEST- ENT INCOME) STED NCOME	
OTHER INCOME				<4	0,314.	.>	<40,314	.>		
TOTAL TO FORM 990-1	PF, PART I,	LINE	11	<4	0,314	- — .> = =	<40,314	.>		
FORM 990-PF	ACC	ACCOUNTING FEES			 		STATEME	NT		
DESCRIPTION		(A EXPEN PER B		NET I			(C) ADJUSTED NET INCOM	CHAR	D) · LITABL LPOSES	
ACCOUNTING FEES		2,200.			0.				0	
TO FORM 990-PF, PG	1, LN 16B	2	,200.		. (0.			0	

FORM 990-PF	TAX	ES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.		
990-W	2,397.	0.				
TO FORM 990-PF, PG 1, LN 18	2,397.	0.				
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS		
INVESTMENT EXPENSES - FLINT HILLS SELECT MANAGERS NON-DEDUCTIBLE CHARITABLE CONTRIBUTIONS	1,102.	0.			0.	
	2,632.	0.			0.	
CONTRIBUTIONS						
TO FORM 990-PF, PG 1, LN 23	3,734.	0.			0.	
	3,734.		BALANCES	STATEMENT	7	
TO FORM 990-PF, PG 1, LN 23	3,734.		BALANCES	STATEMENT		
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREAS	3,734. ES IN NET AS	SETS OR FUND	BALANCES		7	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREASE DESCRIPTION	3,734. ES IN NET AS N INVESTMENT	SETS OR FUND	BALANCES	AMOUNT	7	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREASE DESCRIPTION NET UNREALIZED GAIN/(LOSS) OF	3,734. ES IN NET AS N INVESTMENT	SETS OR FUND	BALANCES	AMOUNT 137,2	7	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREAS DESCRIPTION NET UNREALIZED GAIN/(LOSS) OF TOTAL TO FORM 990-PF, PART I	3,734. ES IN NET AS N INVESTMENT II, LINE 5 OTHER INV	SETS OR FUND	BALANCES	AMOUNT 137,2 137,2	701.	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREAS: DESCRIPTION NET UNREALIZED GAIN/(LOSS) OF TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION FLINT HILLS SELECT MANAGERS	3,734. ES IN NET AS N INVESTMENT II, LINE 5 OTHER INV	SETS OR FUND	OK VALUE	AMOUNT 137,2 137,2 STATEMENT FAIR MARKE VALUE	7 01. 01.	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF OTHER DECREAS: DESCRIPTION NET UNREALIZED GAIN/(LOSS) OF TOTAL TO FORM 990-PF, PART I FORM 990-PF DESCRIPTION	3,734. ES IN NET AS N INVESTMENT II, LINE 5 OTHER INV	SETS OR FUND	-	AMOUNT 137,2 137,2 STATEMENT FAIR MARKE	7 01. 01. 8 T	

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

9

NAME OF MANAGER

CURTIS KRIZEK JENNIFER KRIZEK