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## Form 990~PF

### **Return of Private Foundation**

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

OMB No 1545-0052

Open to Public Inspection

Internal Revenue Service

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

For calendar year 2015 or tax year beginning 02/26/15, and ending 12/31/15Name of foundation Employer identification number MARCH FAMILY FOUNDATION 47-3485307 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 101 S KANSAS AVE 785-291-2900 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here 66603-3614 TOPEKA G Check all that apply Initial return Initial return of a former public chanty 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the X Address change Name change 85% test, check here and attach computation Section 501(c)(3) exempt private foundation Check type of organization If private foundation status was terminated under Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at Accounting method X Cash J If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 993, 394 tine 16) ▶ \$ (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per ıncome pumoses books the amounts in column (a) (see instructions) ) cash basis only) 1,000,850 Contributions, gifts, grants, etc , received (attach schedule) Check ▶ ☐ if the foundation is **not** required to attach Sch. B 2 3 Interest on savings and temporary cash investments 555 555 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) b 2,132 6a Net gain or (loss) from sale of assets not on line 10 þ Gross sales price for all assets on line 6a 2,132 2,132 Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 1,003,543 2,693 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) STMT 1 431 431 Other professional fees (attach schedule) STMT 2 850 850 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings 22 Printing and publications Other expenses (att sch) Total operating and administrative expenses. 1,281 1,281 Add lines 13 through 23 5,000 SEE STATEMENT 3 5,000 Contributions, gifts, grants paid 1,281 6,281 5,000 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 997,262 Excess of revenue over expenses and disbursements 1,412 Net investment income (if negative, enter -0-) 0

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

1 Cash - non-interest-bearing 2 Savings and temporary cash evvestments 3 Accounts reconsable P Less allowance for doubtful accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance for sale or use full accounts ▶ Less allowance full accounts ↑ Less allowance full accounts ↑ Less allowance full accounts ↑ Less allowance	1	Part II	Balance Sheets Attached schedules and amounts in the description column		Beginning of year		End o	of year
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	_6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, colu	ıırı ( <b>0</b> ),	inie 30			Form 990-PF (2015)

_			
	2010		
2	Total of line 1, column (d)	2	
3	Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	_3_	
4	Enter the net value of noncharitable-use assets for 2015 from 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 from Part XII, line 4	8	
Ī	If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	ne	
			Form 990-PF (2015

	SOUPP (2015) MARCH PARTLE FOUNDATION 47-3465507	<del></del>			age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	<u>+</u>	·····		
та	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	ı			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b		1			28
	here and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	ŧ	•		
	Part I, line 12, col. (b)				^
2		2			0
3		3	_		28
4		4	_		0
5	<del>loo</del>	5			28
6	Credits/Payments				
а	2015 estimated tax payments and 2014 overpayment credited to 2015				
Þ	Exempt foreign organizations – tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)  6c	1			
d	Backup withholding erroneously withheld  Takking and appropriate Add larger Carthering Co.  The larger than 1 and	_			
7	——————————————————————————————————————	7			
8	——————————————————————————————————————	8			28
9		9			
10		0			
11		1			
	at VII-A Statements Regarding Activities			V	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		4.	Yes	No X
L.	participate or intervene in any political campaign?		1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		46		x
	Instructions for the definition)?		1b		
	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.			,	x
C	Did the foundation file Form 1120-POL for this year?  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1c		_
ď	· · · · · · · · · · · · · · · · · · ·				
_	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
е	on foundation managers  \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	:	x
~	If "Yes," attach a detailed description of the activities				-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	_	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b	_,	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5		X
-	If "Yes," attach the statement required by General Instruction T.		<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
-	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6_	_ <b>X</b>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
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	ı			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses STMT 5	_	10	X	
		F	om 99	IU-PF	(2015)

Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 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

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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X

3b

4a

X No

N/A

Yes

orn	n 990-PF (2015) MARCH FAMILY FO	UNDATION	47-3	3485307		_	F	age 6
P	art VII-B Statements Regarding A	ctivities for Which Form	4720 May Be R	<b>equired</b> (conti	nued)			
5a	During the year did the foundation pay or incur a	ny amount to.						
	(1) Carry on propaganda, or otherwise attempt to	to influence legislation (section 49	45(e))?		Yes 🔀 No			ŧ
	(2) Influence the outcome of any specific public	election (see section 4955), or to	carry on,					l
	directly or indirectly, any voter registration dr	nve?			Yes 🗓 No			1
	(3) Provide a grant to an individual for travel, stu	udy, or other similar purposes?			Yes 🔀 No			
	(4) Provide a grant to an organization other than	n a chantable, etc , organization d	escribed in	_				
	section 4945(d)(4)(A)? (see instructions)			$\Box$	Yes 🔀 No			l
	(5) Provide for any purpose other than religious,	, chantable, scientific, literary, or e	educational	_				
	purposes, or for the prevention of cruelty to	children or animals?		Π,	Yes X No			ĺ
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e transactions fail to qualify under	the exceptions desc	cribed in				
	Regulations section 53.4945 or in a current notice				N/A	5b	]	ĺ
	Organizations relying on a current notice regarding	- ·			▶ 🗀 Ì			
С	If the answer is "Yes" to question 5a(4), does the	<del>-</del>						ł
_	because it maintained expenditure responsibility	•		N/A 🗍 ·	Yes ☐ No			ĺ
	If "Yes," attach the statement required by Regula	<del>-</del>		· Ц				į
6a			premiums				1	į
	on a personal benefit contract?	,,, ,	<b>-</b>	Π,	res 🗓 No		1	Ė
b	Did the foundation, during the year, pay premium	ns, directly or indirectly, on a perso	onal benefit contract			6ь	Ī	X
_	If "Yes" to 6b, file Form 8870.	to, anothly of mandolly, and a post-						<del></del>
72	At any time during the tax year, was the foundation	on a party to a prohibited tax shell	ter transaction?	$\Box$	res 🗓 No		1	
	If "Yes," did the foundation receive any proceeds				N/A	7b	ŧ	
	art VIII Information About Officers							
	and Contractors	,, 5,,00,0,0,, 1,00,000, 1,0		goro, riigiiiy i	aid Employee	,,		
1	List all officers, directors, trustees, foundation	managers and their compensa	tion (see instructi	ons).				
					(d) Contributions to			
	(a) Name and address		(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit		ense ac	
	(-,		devoted to position	enter -0-)	plans and deferred compensation	other	r allowan	ices
7.7	INDA MARCH	OVERLAND PARK	TRUSTEE					
	3913 NICKLAUS DR.	KS 66223	1.00	o	o	ł		0
	RISTEN HANE	OLATHE	TRUSTEE					
	4310 S. CAENEN LANE	KS 66062	1.00	o	٥			0
	RETCHEN HEMBREE	LEAWOOD	TRUSTEE					
			1.00	o	o			^
3:	519 W 101ST ST	KS 66206	1.00			<del></del>		0
			1			1		
_	Compensation of five highest-paid employee	os (other than these included o	n line 1 – see instr	uctions) If none	ontor			
2	"NONE."	es (other than those included of	ii iiile i – see iiistii	ictions). Il fione,	Circei			
	HONE.		T	<del></del>	(d) Contributions to			
	(a) Name and address of each employee paid more	than \$60,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense ac	
	(a) Name and address of each employee paid more	man \$50,000	devoted to position	(c) compensation	plans and deferred compensation	other	rallowan	ces
			<del> </del>		Compensation			
N	ONE		1					
			<del> </del>			_		
				II				
			<del></del>		<del></del>			
			<del></del>					
			1					
			1					
			<u> </u>				т	
nt a	at number of other employees paid over \$50,000						1	0

Form 990-PF (2015)

orm 990-PF (20	015) MARCH_FAMILY FOUNDATION	47-3485307_	Page
Part VIII	Information About Officers, Directors, Trustees, Found Contractors (continued)	indation Managers, Highly Paid E	mployees,
	est-paid independent contractors for professional services (see ins	structions). If none, enter "NONE."	
-	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	· · · · · · · · · · · · · · · · · · ·		
	<del></del>		
otal number of	others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct chantable activities during the tax year. Include relevant statistical information ther beneficianes served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
3			<del> </del>
			<del> </del>
4			
Part IX-B	Summary of Program-Related Investments (see ins	tructions)	
Describe the two la	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments. See instructions		
J			

Total. Add lines 1 through 3

b Cash distribution test (attach the required schedule)
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income
Enter 1% of Part I, line 27b (see instructions)
5 0
6 Adjusted qualifying distributions. Subtract line 5 from line 4
5 , 000

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

qualifies for the section 4940(e) reduction of tax in those years

Amounts set aside for specific charitable projects that satisfy the.

Suitability test (prior IRS approval required)

Form 990-PF (2015)

P8	R XIII Unaistributed income (see instructions)		<del></del>	<del></del>	
		(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI,	Corpus	Tears prior to 2014	2014	
	line 7				10,368
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only				
	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
	From 2010		‡ ‡		
	From 2011				
	From 2012				
	From 2013				
	From 2014	i			
	Total of lines 3a through e		<u> </u>		
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 5,000			;	
	Applied to 2014, but not more than line 2a				
D	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				5,000
	Applied to 2015 distributable amount	<u></u>			5,000
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015			-1-11	
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a) ) Enter the net total of each column as				
6	indicated below:				
_	Corpus Add lines 3f, 4c, and 4e. Subtract line 5		1		
	Prior years' undistributed income Subtract				
U	line 4b from line 2b				
_	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				
ч	Subtract line 6c from line 6b Taxable				
u	amount – see instructions				
_	Undistributed income for 2014 Subtract line				
Ŭ	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2015 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2016		,		5,368
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)		, ,		
8	Excess distributions carryover from 2010 not				
-	applied on line 5 or line 7 (see instructions)				H., in
9	Excess distributions carryover to 2016.				
,	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2011		1		
b	Excess from 2012				
c	Excess from 2013				
d	Excess from 2014				
e	Excess from 2015			<b></b>	<u> </u>

Fórn	1990-PF (2015) MARCH FAMILY	FOUNDATION	1	47-3485	307	Page <b>1</b>
P	art XIV Private Operating For	undations (see in	structions and Par	t VII-A, question	9)	
1a	If the foundation has received a ruling or o				1	
	foundation; and the ruling is effective for 2			•		
b	Check box to indicate whether the founda			d in section	4942(j)(3) or 494	(2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	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		<del></del>	<u> </u>	<del></del>	
	each year listed					
b	85% of line 2a	··-			† <del></del>	
c	Qualifying distributions from Part XII,	<u> </u>			<del> </del>	<del> </del>
_	line 4 for each year listed					
d	Amounts included in line 2c not used directly	<del></del> _	<del></del>		<u> </u>	<del></del>
_	for active conduct of exempt activities			ĺ		
е	Qualifying distributions made directly	<del></del>			<del> </del>	
•	for active conduct of exempt activities	,		ľ		1
	Subtract line 2d from line 2c				1	
3	Complete 3a, b, or c for the		<del></del>			
•	alternative test relied upon					
а	"Assets" alternative test – enter	•	<u> </u>			
a	(1) Value of all assets					
	(2) Value of assets qualifying under				<del> </del>	<del> </del>
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3	<u> </u>			<del>                                     </del>	
U	of minimum investment return shown in					
	Part X, line 6 for each year listed		1			
С	"Support" alternative test – enter	<del></del>			<del> </del>	_ <del></del>
·	(1) Total support other than gross		}	}		
	investment income (interest,					
	dividends, rents, payments on	16		1		
	securities loans (section					
	512(a)(5)), or royalties)	L		<del></del>		
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in	•		1		
	section 4942(j)(3)(B)(iii)  (3) Largest amount of support from				<del> </del>	<del></del>
	an exempt organization					
	(4) Gross investment income				<del>                                     </del>	
D.	rt XV Supplementary Inform	nation (Complete	this part only if t	he foundation h	ad \$5 000 or more	in assets at
J: 4	any time during the ye			no roundation n	au 40,000 or more	iii assets at
1	Information Regarding Foundation Ma					
-	List any managers of the foundation who h	-	than 2% of the total cor	ntabutions received by	the foundation	
а	before the close of any tax year (but only i			<del>-</del>	the loandation	
	LINDA MARCH	i tiley have contributed	more man \$5,000). (O	ee section 507 (d)(2) )	\$1	,000,850
	List any managers of the foundation who	own 10% or more of the	e stock of a comporation	(or an equally large n		70007030
U	ownership of a partnership or other entity)				orabit of the	
	N/A	of which the loundatio	irilas a 10 % or greater	merest.		
2	Information Regarding Contribution, G	rant Gift Loan Sch	lambin etc. Program			
2	Check here ► X if the foundation only				es not accent	
	unsolicited requests for funds. If the found					
	other conditions, complete items 2a, b, c,		its, etc (see instruction	s) to individuals of org	ariizationa ariaar	
	The name, address, and telephone number		the person to whom an	plications should be a	ddressed	<del></del>
а	N/A	or or e-mail address or	the person to whom ap	piloations should be a	duicased	
	N/A					
	The form in which applications should be s	submitted and informat	on and materials they	should include		
ь	N/A	Suprimited and imormat	ion and materials trey .	SHOULD INCIDATE		
С	Any submission deadlines <sup>-</sup>					
	Any restrictions or limitations on awards, s	uch as hy departables	al areas chantable field	s, kinds of institutions	or other	
ď	·	uuri as by geograpiiloa	. Grous, Grantable nelu	s, and or mondrons,		
	factors N/A					
DAA						Form 990-PF (2015

3 Grants and Contributions Paid During th	e Year or Approved for Fu	uture Payment		<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid duning the year  QUEEN OF THE HOLY ROSARY CT  7023 W 71ST STREET  OVERLAND PARK KS 66204	N/A	PC UTION TO GENE	RAL FUND	5,00
	į			
	<u>}</u>			
Total			▶ 3a_	5,000
b Approved for future payment N/A				
Total			<b>&gt;</b> 3b	

Enter gross amounts unless otherwise indicated					
•	(a) Business code	(b) Amount	(c) Exclusion code	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
1 Program service revenue	<del></del>			<del></del>	
a			+		
b		<del></del>			
С			<del> </del>		
d					
e					<del></del>
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					555
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property		<del></del>			
7 Other investment income					· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other than inventory			1		2,132
9 Net income or (loss) from special events		<del></del>	1		
O Gross profit or (loss) from sales of inventory			1 - 1		
			<del>   </del>		
1 Other revenue a	- <del>                                    </del>		<del>  -  </del>	<del></del>	<del></del> -
b	<del>-</del>		<del>   </del>		
c	- <del>                                    </del>		<del>  </del>	<del></del>	
d			+		
e	— <del>                                    </del>		0	0	2 603
2 Subtotal Add columns (b), (d), and (e)	<u></u>	<del></del>	U]		2,693
3 Total. Add line 12, columns (b), (d), and (e)				13	2 <u>,693</u>
See worksheet in line 13 instructions to verify calculations )	Assemulishment	of Evenue D			<u> </u>
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which incol					
■ accomplishment of the foundation's exempt pu  N/A	rposes (other than by pr	oviding tunds for	such purpos	es) (See instructions)	
N/A					
	<del> </del>				
	· · · · · · · · · · · · · · · · · · ·				

DAA

P	art >		Information Regarization		ansfers To and	d Transaction	ns and Relationship	s With Nonchai	itable		
1	Dıd				un any of the follow	wing with any other	er organization described			Yes	No
•		_			-	-	<del>-</del>	1		105	NO
				r than section	1 50 I(c)(3) organiz	ations) or in secti	on 527, relating to politica	·	l		Ĺ
	-	anization:				_			ĺ		É
a	Tra	nsfers fro	m the reporting founda	ation to a non	ichantable exempt	organization of			-		Ė
	(1)	Cash							1a(1)		_X_
	(2)	Other as	sets						1a(2)		X
b	Oth	er transa	ctions								, ,, ,,
	(1)	Sales of	assets to a noncharita	ble exempt o	rganization				1b(1)	Ī	X
			es of assets from a noi	-	<del>-</del>	1			1b(2)		X
			f facilities, equipment,		-	•			1b(3)		X
			sement arrangements	or ourier asse					1b(4)		X
			-								_
			r loan guarantees						1b(5)		<u>X</u>
			ance of services or me	-	-				1b(6)		<u> </u>
		•	cilities, equipment, ma	-	· · ·	- ·			1c		X
d			•	=	<del>-</del>		(b) should always show the				
	valı	ue of the	goods, other assets, or	services giv	en by the reporting	foundation If the	e foundation received less	than fair market			
	valu	ie in any	transaction or sharing	arrangement	, show in column (	d) the value of the	e goods, other assets, or s	services received.			
	(a) Lin	e no	(b) Amount involved	(c) Nam	e of nonchantable exemp	pt organization	(d) Description of tr	ansfers, transactions, and si	nanng arrangemen	ts	
<u>N/</u>	A									_	
						<u> </u>				-	
				<u> </u>							
					· · · · · · · · · · · · · · · · · · ·	· -		······································		_	
_				<del> </del>	<del>-</del>		· · · · · · · · · · · · · · · · · · ·				
				<del> </del>				<del></del>			
				<del></del>					<del></del>	_	
			<del></del>	<del></del>							—–
			<del></del>				<del></del>				
							<del></del>				
				1							
									· · · · ·		
			·	<del></del>	<del></del>						
	des	cnbed in 'es," com	ation directly or indirectly section 501(c) of the Couplete the following schools a) Name of organization	ode (other th		3)) or in section (	527?	(c) Description of relationship	☐ Ye	s <b>X</b>	No
	NT / 7		ij Name oi organization		(b) Type of o	rganization		c) Description of relationship	<u></u>		
	N/ <i>I</i>	<u> </u>			<del> </del>						
	_						<del></del>				
					<del></del>		<del></del> -			_	
			<del></del>								
					<u> </u>			<del> </del>			
Sig Her		Under pen- correct, an	d complete Declaration of pi	thave examine reparer (other the	an taxpayer) is based or	accompanying screding all information of wh	ales and statements, and to the blich preparer has any knowledge	May the with the	IRS discuss this reforeparer shown belorctions)?	ow	No
	- 1	Signa	ture of officer or trustee	y justos		Date	Title				
		<del></del>	pe preparer's name	<del></del>		Preparer's signature	3			Check Self-empl	if
Paid	1	DAVID	S. KNUDTSON,	CPA			1.S	اما	5/05/16	-on ompi	-,00
rep	arer		2227777077		COMPANY C	PAS, PA	-		P00370	604	—
Jse	Only	Firm's na	5000				<del></del>	PTIN SIN N	74-280		<del></del>
-	y	Firm's ac			H ST STE			Firm's EIN ▶			
		L	TOPEK	A, KS	66614-23	548 		Phone no	785-273		
									Form <b>99</b>	U-PF	(2015)

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

Schedule of Contributors

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

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

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

irs.gov/form990.
Employer identification number

MARCH FAMILY	FOUNDATION	47-3485307				
Organization type (check on	e)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt chantable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
, ,	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  ), (8), or (10) organization can check boxes for both the General Rule and a Special Rule Si	ee				
General Rule						
-	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,00 property) from any one contributor. Complete Parts I and II. See instructions for determining tributions.					
Special Rules						
regulations under sec 13, 16a, or 16b, and t	escnbed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3 % support test of tetrons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II hat received from any one contributor, during the year, total contributions of the greater of (1 ne amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I an	, line )				
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any or year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, il purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and II					
contributor, during the contributions totaled in during the year for an	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, chantable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the					
totaling \$5,000 or mo	s to this organization because it received nonexclusively religious, charitable, etc., contribution re during the year	<b>▶</b> \$				
990-EZ, or 990-PF), but it mu	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form st answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990)	-EZ or on its				

Name of organization
MARCH FAMILY FOUNDATION

Employer identification number 47-3485307

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LINDA MARCH 13913 NICKLAUS DR  OVERLAND PARK KS 66223	s 1,000,850	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
100.	Name, add 355, and an	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

# Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description		Total	Inve	Net estment	Adjusted Net	Charitable Purpose
MANAGEMENT FEES	ഗ	431	တ	431	S	ς, V
TOTAL	S.	431	φ	431	\$	\$

## Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	S	\$	
Adjusted Net		0	
<b>B</b>	ω	ς.	
Net Investment	850	850	
Inve	\$	φ.	
Total	850	850	
F	თ	φ.	
Description	FILING FEES	TOTAL	

# Statement 3 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants

	Date	12/08/15
Book Value	Explanation	
Book Value	Amount	2,000
FM<	Explanation	
Noncash	Description	
	Amount	2,000

## Statement 4 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	993,394	993,394
<u>.</u>	ၯ	δ-
Basis of Valuation	COST	
End of Year	997,262	997,262
	တ	ςς. 
ning sar		0
Beginning of Year	ဟ	S.
Description	NATIONAL FINANCIAL SERVICES	TOTAL

## Federal Statements

47-3485307

# Statement 5 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name

Address

City, State, Zip

LINDA MARCH

13913 NICKLAUS DR

OVERLAND PARK KS 66223

A	7.	21	O	_	2	Λ	-
4	7 -	34	О	ວ	J	U	1

## **Federal Statements**

## Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	<u>Amount</u>
LINDA MARCH	\$ 1,000,850
TOTAL	\$ 1,000,850