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990-PF

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning January 1 , 2015, and ending December 31 20 15 Name of foundation A Employer identification number GILLCRIST CHARITABLE FOUNDATION 47-6587533 Number and street (or P.O. box number if mail is not delivered to street address) Room/surte B Telephone number (see instructions) 913-859-9552 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► OVERLAND PARK, KS US 66212 Initial return of a former public charity D 1. Foreign organizations, check here . . . Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, □ Address change □ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization:

☐ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust
 Other taxable private foundation F 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) line 16) ▶ \$ 433143 (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 expenses per books amounts in columns (b), (c), and (d) may not necessarily equal purposes the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 88880 2 Check ► ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments n 0 4 Dividends and interest from securities 9068 9068 0 5a 0 0 O b Net rental income or (loss) 0 6a Net gain or (loss) from sale of assets not on line 10 4691 ь Gross sales price for all assets on line 6a 91213 7 Capital gain net income (from Part IV, line 2) 4691 Net short-term capital gain 8 0 9 Income modifications 0 10a Gross sales less returns and allowances 0 b Less: Cost of goods sold . . . 0 Gross profit or (loss) (attach schedule) C 0 Other income (attach schedule) 11 12 Total. Add lines 1 through 11 . . 102639 13759 0 13 Compensation of officers, directors, trustees, etc. 0 Operating and Administrative Expenses 14 Other employee salaries and wages 0 0 0 0 15 Pension plans, employee benefits 0 0 0 Legal fees (attach schedule) 16a 0 0 0 0 b Accounting fees (attach schedule) 0 0 0 0 Other professional fees (attach schedule) . . . 3926 3926 0 0 17 0 O 0 18 Taxes (attach schedule) (see instructions) 3097 0 3097 0 19 Depreciation (attach schedule) and depletion . . . 0 0 0 20 0 0 0 0 21 Travel, conferences, and meetings 0 n n 0 22 Printing and publications . . . 15 0 0 0 23 Other expenses (attach schedule) 0 0 0 O 24 Total operating and administrative expenses. Add lines 13 through 23 7038 7023 25 Contributions, gifts, grants paid 20000 20000 26 Total expenses and disbursements. Add lines 24 and 25 27038 7023 0 20000 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 75601 **Net investment income** (if negative, enter -0-) . 6736 c Adjusted net income (if negative, enter -0-) . . .

Da	art li	Attached schedules and amounts in the description column	Beginning of year		End o	f year
	ut ii	Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	е	(c) Fair Market Value
	1	Cash-non-interest-bearing	0	0		0
	2	Savings and temporary cash investments	0	23212		23212
	3	Accounts receivable ▶ 0				
		Less: allowance for doubtful accounts ▶ 0	0	0		0
	4	Pledges receivable ▶ 0				
		Less: allowance for doubtful accounts ▶ 0	0	0		0
	5	Grants receivable	0	0		0
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)	0	0		0
	7	Other notes and loans receivable (attach schedule) ▶				
	-	Less: allowance for doubtful accounts ▶	0	0		0
B	8	Inventories for sale or use	0	0		0
Assets	9	Prepaid expenses and deferred charges	0	0		0
AS	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	-	0
•	b	Investments—corporate stock (attach schedule)	404285	456674		409931
	C	Investments—corporate stock (attach schedule)	0	0		0
	11	Investments—corporate bonds (attach schedule)	0	0		0
	' '	Less: accumulated depreciation (attach schedule) ▶ 0	0			0
	12	Investments—mortgage loans	0	0		0
	13		· · · · · · · · · · · · · · · · · · ·	0		0
		Investments—other (attach schedule)	0	U	\longrightarrow	U
	14	Land, buildings, and equipment: basis ▶ 0				
	46	Less: accumulated depreciation (attach schedule) ▶	0	0		0
	15 16	Other assets (describe ►) Total assets (to be completed by all filers—see the	0	0		0
	10	instructions. Also, see page 1, item I)				400440
	47		404285	479886		433143
	17	Accounts payable and accrued expenses	0	0		
es	18	Grants payable	0	0		
Liabilities	19 20	Deferred revenue	0	0		1
Ö		Loans from officers, directors, trustees, and other disqualified persons	0	0		1
Ë	21	Mortgages and other notes payable (attach schedule)	0	0		ì
	22	Other liabilities (describe >)	0	0		,
	23	Total liabilities (add lines 17 through 22)	0	0		
S		Foundations that follow SFAS 117, check here > \square and complete lines 24 through 26 and lines 30 and 31.				,
ည		•				
<u>a</u>	24	Unrestricted	404285	479886		•
Ba	25	Temporarily restricted	0	0		
ק	26	Permanently restricted	0	0		(
֓֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		Foundations that do not follow SFAS 117, check here ►				1
or Fund Balances		and complete lines 27 through 31.	1			!
	27	Capital stock, trust principal, or current funds				
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund		 		
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds				1
×	30	Total net assets or fund balances (see instructions)	404285	479886		
ž	31	Total liabilities and net assets/fund balances (see				
		instructions)	404285	479886		<u>'</u>
	irt III	Analysis of Changes in Net Assets or Fund Balances		A source with		
1		Il net assets or fund balances at beginning of year-Part II, colu			_	
_		of-year figure reported on prior year's return)			1	404285
_		er amount from Part I, line 27a			2	75601
3	Othe	er increases not included in line 2 (itemize) ▶			3	0
4		lines 1, 2, and 3			4	479886
5	Deci	reases not included in line 2 (itemize) ▶			5	0
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ine 30	6	479886

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income					
				(c) Date acquired (mo., day, yr.)		(d) Date sold (mo , day, yr)		
<u>1a</u>	see attached schedule	ached schedule D						
b								
<u>c</u>				 			 	
<u>d</u> e								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	other basis nse of sale			in or (loss) (f) minus (g)	
а	a 91213 0 86522 4691				4691			
b								
c	····							
<u>d</u>					· · · · · · · · · · · · · · · · · · ·			
<u>е</u>	Complete only for assets sh	wing gain in column (h) and owned	by the foundation	on 12/31/69	·			
	(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any		(f) Gains (Col. (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
<u>a</u>								
<u>b</u>		· · · · · · · · · · · · · · · · · ·						
<u>c</u>								
<u>a</u>								
2	Capital gain net income o		also enter in Pa), enter -0- in Pa					
3	If gain, also enter in Part	in or (loss) as defined in section: t I, line 8, column (c) (see instru	s 1222(5) and (6)	: , enter -0- in }	2 469	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·			3 0			
Part		der Section 4940(e) for Red						
(For o	ptional use by domestic pr	rivate foundations subject to the	section 4940(a)	tax on net invest	ment inc	ome.)		
If sect	tion 4940(d)(2) applies, leav	ve this part blank.						
		e section 4942 tax on the distribute t qualify under section 4940(e). I			base peri	od?	☐ Yes <page-header> No</page-header>	
1	Enter the appropriate am	ount in each column for each ye	ear; see the instru	uctions before m	aking any	entries.		
Cale	(a) Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	ns Net value o	(c) f noncharitable-use a	ssets	(d) Distribution ratio (col. (b) divided by col. (c))		
	2014	0	26376		0	0		
	2013							
	2012							
	2011							
	2010							
2	Total of line 1, column (d)			. 2	0		
3		o for the 5-year base period—div ndation has been in existence if I				0		
4	Enter the net value of nor	ncharitable-use assets for 2015	from Part X, line	5	. 4	390852	2	
5	Multiply line 4 by line 3				. 5	0		
6	Enter 1% of net investme	ent income (1% of Part I, line 27I	b)		. 6	67		
7	Add lines 5 and 6				. 7	67		
8	Enter qualifying distributions or great VI instructions	ions from Part XII, line 4 eater than line 7, check the box i	 in Part VI, line 1b	o, and complete	. 8 that part		1% tax rate. See the	

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	-see	instru	ictio	ns)		
	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ► 🖬 and enter 1% of Part I, line 27b						
	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-)	0 _					
3	Add lines 1 and 2	67					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	67					
6	Credits/Payments:						
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 247						
	Exempt foreign organizations—tax withheld at source 6b 0						
	Tax paid with application for extension of time to file (Form 8868) . 6c 0				į		
	Backup withholding erroneously withheld 6d 0	_					
7	Total credits and payments. Add lines 6a through 6d	247					
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	<u> </u>					
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0					
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶ 11			_			
Part \		180					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it	Γ'	Yes	No		
	participate or intervene in any political campaign?		1a		1		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes 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	erials	·		_		
	published or distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?		1c		1		
d	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. ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impoon foundation managers. ▶ \$	sed					
	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	•	2		1		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, artic incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	les of	3				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		1		
ь	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		1		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	٠	5		1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1		ĺ		
	By language in the governing instrument, or		İ				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions	s that					
	conflict with the state law remain in the governing instrument?	•	6	1			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pa	irt XV	7	1			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶						
	Kansas						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	neral			ł		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	✓.	<u> </u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)		-		-		
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "	res,"					
10	complete Part XIV	Lthoir	9	ļ	V		
10	names and addresses	u ieli	10				
			1 10	<u></u> _			

<u>Part</u>	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
12	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		✓
40	person had advisory privileges? If "Yes," attach statement (see instructions)	12		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address None	13	✓	
14	The backs are in care of high Cilipint Talenbare po 12 950 0	552		
	Located at ▶ 9809 W106 St, Overland Park, KS ZIP+4 ▶ 66212-555			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year		•	▶ 🗌
16	At any time during calendar year 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		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes 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	ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🐼 No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here			
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		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		\
	operating foundation 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?			
ь	If "Yes," list the years ► 20 , 20 , 20 , 20			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.)	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.			
20	➤ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
va	at any time during the year?			
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			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	İ		
	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.)	O.L		٠, ا
4-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		1
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes r Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		*
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		1

Page o

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (contin	ued)			
5a	During the	e year did the foundation pay or incur a	ny amo	unt to:								
	(1) Carry	on propaganda, or otherwise attempt to	o influe	nce legislatio	n (sect	ion 4945(e))? .	☐ Yes	₩ No	·	1 1	
	(2) Influer	nce the outcome of any specific public	election	on (see secti	on 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration drive?									1 .		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?								1			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in											
	section 4945(d)(4)(A)? (see instructions)											
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational									}		
		ses, or for the prevention of cruelty to o						Yes	₩ No		1 1 :	
b		· · · · · · · · · · · · · · · · · · ·										
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?									1			
	_	tions relying on a current notice regardi	_	_		-			▶□	35		
С	•	swer is "Yes" to question 5a(4), does t	_					-				
•		it maintained expenditure responsibility							□No	}]]	
		attach the statement required by Regula					• •	res	NO			
6a		bundation, during the year, receive any					miume					
va							iiiluii ia	☐ Yes	□ Na		,	
_							honofii	_	Mo No	6b		
þ		oundation, during the year, pay premiun o 6b, file Form 8870.	is, dire	city of indirec	Juy, On	a personal	Denem	CONTRACT	•	00		
7-		-	a north (f	o o probibitos	l tay ab	oltor transco	tion?	☐ Yes	□ No			
		e during the tax year, was the foundation a did the foundation receive any proceeds						_	.⊿ No 2	7b	·· -	
		nformation About Officers, Direct									006	
· ur	_	and Contractors	.0.3, 1	rustees, r	Ju.144	LIOII WIGHT	-90.0 ,	····g····y ·	G.G =	p.o,	000,	
1		ficers, directors, trustees, foundation	n mana	gers and the	eir con	npensation	(see i	nstruction	ns).			
			(b) Title	e, and average	(c) Co	mpensation	(d) (Contributions	to	(a) Eyne	nse account,	
		(a) Name and address		s per week ed to position	(If n	ot paid, ter -0-)		yee benefit perred compe			allowances	
John G	allenst 9809	W106 St, Overland Park, KS	10		Ь		0			0		
		99 W106 St, Overland Park, KS	8		0		0			0		
		736 Plass, Topeka, KS	0		0		0			D		
		6 Oak St, Kansas City, MO	0		0		0			0		
		EC2 Veners City Me	0		Ð					D		
		9 W106, Overland Park, KS	0		0		0			0		
	<u> </u>	77 17 130, 3 13101111 1 2.11, 110	D									
NO CC	MPENSATION	ON TO ANY TRUSTEE	0									
2		sation of five highest-paid employee	_	er than thos	se incl	uded on li	ne 1 —	see instr	uction	s). If n	one, enter	
	"NONE."		•							•	·	
				(b) Title, and a	WAT2GA			(d) Contribu				
	(a) Name and	address of each employee paid more than \$50,00	0	hours per v	veek -	(c) Compe	nsation	employee	benefit leferred	(e) Expe	ense account, allowances	
				devoted to p	osmon	<u> </u>		compens	ation			
NONE												
			_									
Total	number of	other employees paid over \$50,000 .	<u> </u>	<u> </u>					. ▶			
										QO	O DE MALEN	

Pan	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	iployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		

Γotal	number of others receiving over \$50,000 for professional services	
Par	IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of lanzations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	NONE	
•	110/16	
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
2	<del></del>	-
3		
4		
Dav	IV D. Common of Drooms Deleted Investments (see instructions)	
	Summary of Program-Related Investments (see instructions) scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		Allodit
•	NONE	
2		
_	~	
	~	
All	other program-related investments. See instructions.	
3		
Tota	Add lines 1 through 3	

Form **990-PF** (2015)

Part	<del></del> -	gn fo	undations,
	see instructions.)	_	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	]	
	purposes:		
а	Average monthly fair market value of securities	<b>—</b>	370267
b	Average of monthly cash balances	<u> </u>	20585
C	Fair market value of all other assets (see instructions)	<del></del>	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	390852
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	390852
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	390852
6	Minimum investment return. Enter 5% of line 5		19543
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► □ and do not complete this part.)	ound	ations
1	Minimum investment return from Part X, line 6	1	19543
2a	Tax on investment income for 2015 from Part VI, line 5		
ь	Income tax for 2015. (This does not include the tax from Part VI.) 2b 0	l	
C	Add lines 2a and 2b	2c	67
3	Distributable amount before adjustments. Subtract line 2c from line 1	3_	19476
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	19476
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	19476
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	20000
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	<del></del>
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	20000
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_	67
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	19933
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	g who	ether the foundation

Part :	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
	line 7				19476
2	Undistributed income, if any, as of the end of 2015:			-	
а	Enter amount for 2014 only			(1531)	
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:				
а	From 2010 0			l	
b	From 2011 0				,
С	From 2012 <u>0</u>				
d	From 2013 0				
e	From 2014 <u>0</u>				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2015 from Part XII,				,
	line 4: ▶ \$ 20000				
а	Applied to 2014, but not more than line 2a .			(1531)	<u> </u>
р	Applied to undistributed income of prior years				
	(Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0		-	
d	Applied to 2015 distributable amount				(1531)
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0		
е	Undistributed income for 2014. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions	<b>i</b> .		0	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2016				17945
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)	0			
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions) .	0		ļ.,,	ļ
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	0		ļ	
10	Analysis of line 9:				
а	Excess from 2011 0	4	ļ		
b	Excess from 2012 0	4	ļ		
C	Excess from 2013 0	4			
d	Excess from 2014 0	1			
е	Excess from 2015 0			1	<u> </u>

						Page <b>10</b>
	0-PF (2015) XIV Private Operating Founda	tions (see instru	ections and Part	VII-A question 9)		Page 10
Part	If the foundation has received a ruling				<del> </del>	
	foundation, and the ruling is effective fo					
b	Check box to indicate whether the four	ndation is a private	operating founda	ition described in sec	tion 🗌 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(-/
b b	85% of line 2a					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"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	<del>,</del> ,				
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 and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part			_	the foundation ha	d \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
1 a	Information Regarding Foundation List any managers of the foundation before the close of any tax year (but of	who have contribu				by the foundation
John (	Gillenst	1004			/	
Þ	List any managers of the foundation ownership of a partnership or other e					arge portion of the
NONE		- 0	Cabala-ahin	ete Dreggeren		
2	Information Regarding Contribution Check here ▶ ☑ if the foundation unsolicited requests for funds. If the other conditions, complete items 2a,	only makes cont foundation makes	ributions to pres	elected charitable o		
а	The name, address, and telephone no		ddress of the pers	son to whom applica	tions should be	addressed:
b	The form in which applications should	d be submitted an	d information and	d materials they shou	ld include:	
	Any pubminging deadliness	• • • • • • • • • • • • • • • • • • • •				
С	Any submission deadlines:					

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

factors:

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount				
Name and address (home or busines	any foundation manager or substantial contributor	recipient	contribution					
a Paid during the year								
Mother Teresa of Calcutta Catholic Church 2014 NW 46 St, Topeka, KS 66618		PC	Support Church in its missions	20000				
Takel				<b>3a</b> 20000				
b Approved for future payment	<u> </u>	<del></del>		3a 20000				
NONE		S. C.						
Total				36				

Ра	rt XVI	Analysis of Income-Producing Ac	ctivities				
Ente	r gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Prog	ram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
·		NONE					
	ь <u>"</u>	HONE					
	~ -						
	ر م						
	` -						
	e _						
	T _						
	g F	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments				· · · · · · · · · · · · · · · · · · ·	
4	Divid	lends and interest from securities					
5		ental income or (loss) from real estate:	-				
-		Debt-financed property					
		lot debt-financed property					
_		ental income or (loss) from personal property			<del> </del>	<del></del>	
_						<del></del>	
7		r investment income				<del>" " " " " " " " " " " " " " " " " " " </del>	
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10	Gros	s profit or (loss) from sales of inventory					
11	Othe	r revenue: a					
	b						
	C						_
	d _						
	е —						
12	Subt	otal. Add columns (b), (d), and (e)			<u> </u>		
13	Total	I. Add line 12, columns (b), (d), and (e)		· · · · ·	I	13	l
		sheet in line 13 instructions to verify calculation					
	rt XVI			ent of Evemn	t Dumoses	<del> </del>	· -
	e No.					A	
Liii	<b>▼</b>	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo poses (other tha	ortea in column n by providing fur	e) of Part XVI) ds for such purp	-A contributed ii oses). (See instru	mportantly to the ctions.)
		NONE	·				
		HONE					
			<del></del> · <del>_</del> .	<del></del>	<del></del>		
				<del></del>			
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				<del></del>	<del></del>		
							<del></del>
						<u> </u>	
						<del></del>	
				<del></del>			

		Exempt Or	rganizations	_										
1	in se	the organization of the cition 501(c) of the citions?											Yes	No
а	Tran	sfers from the rep	porting foundat	tion to a nonch	aritable exe	mpt orga	nization	of:						
	(1) (	Cash										1a(1)		1
	(2)	Other assets .										1a(2)		<b>1</b>
b	Othe	er transactions:												
	(1) 5	Sales of assets to	a noncharitab	le exempt orga	anization .							1b(1)		1
		ourchases of asse				ition						1b(2)		1
		Rental of facilities										1b(3)		1
		Reimbursement a										1b(4)		1
		oans or loan gua										1b(5)		1
		Performance of se		bership or fun	draisina soli	citations						1b(6)		1
C		ing of facilities, e			_							1c		1
d 	value value	e answer to any e of the goods, o e in any transacti	ther assets, or on or sharing a	services giver irrangement, sl	n by the rep how in colur	orting fou nn (d) the	indation. value o	If the found f the goods	dation , other	receiv	ed les	s than ervices	fair m	narket ived.
(a) Line	no.	(b) Amount involved	(c) Name o	f nonchantable ex	empt organizati	on	(d) Descr	iption of transf	ers, tran	sactions	s, and sl	naring arr	angem	ents
													_	
													_	
		·												
2a b	desc	e foundation dire	501(c) of the C	ode (other thar								☐ Yes	 5 🞣	No
		(a) Name of organ	nization		(b) Type of org	anization			(c) Des	cription	of relat	onship		
		er penalties of perjury, I								pest of n	ny knowl	edge and	belief, r	t is true,
Sign	con	ect, and complete. Decl	aration of preparer (	outer trian taxpayer)	is dased on all if	normation of	wnich prep	euer nasany Kno	wieage.			IRS disci		
Here		nature of officer or tru	1 Istoe		3/7/16 Date	Trust	ee			_	with the (see inst	preparer ructions)?	shown <b>Yes</b>	below No
	47	Print/Type preparer		Prenarer	's signature	1100		Date			=	РΠΝ	===	
Paid	•	, Typo preparer	<del>.</del>	1, 1659.61	- 5-5-14-td1-6						if			
Prep		Funda a			_			<u> </u>			.picyeu	<u> </u>		
Use	Only					·			1	EIN ►	-			
		Firm's address							Phone	no.				

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

#### Schedule B

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

### Schedule of Contributors

OMB No 1545-0047

Department of the Treasury internal Revenue Service

▶ 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. **Employer identification number** Name of the organization 47-6587533

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

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

Name of organization

Employer identification number

GILLCR	IST CHARITABLE FOUNDATION	4	7-6587533
Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	JOHN GILLCRIST 9809 W106 ST OVERLAND PARK, KS 66212-5556	<b>\$</b> 00 000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

**Employer identification number** 

Noncash Property (see instructions). Use duplicate co	pies of Part II if additional spa	ce is needed.
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
NIKE INC CL B. 500 SHARES		
	\$ 64,260	12/18/15
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$ 24,620	12/18/1
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>\$</b>	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		· · · · · · · · · · · · · · · · · · ·
	\$	
	Description of noncash property given  NIKE INC CL B. 500 SHARES  Description of noncash property given  STARBUCKS CORP. 420 SHARES  Description of noncash property given  Description of noncash property given  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  NIKE INC CL R  500 SHARES  (b)  Description of noncash property given  (c)  FMV (or estimate) (see instructions)  STARBUCKS CORP  420 SHARES  (b)  Description of noncash property given  (c)  FMV (or estimate) (see instructions)  \$  Less instructions  STARBUCKS CORP  (c)  FMV (or estimate) (see instructions)  S  Column (c)  FMV (or estimate) (see instructions)  S  Description of noncash property given  (c)  FMV (or estimate) (see instructions)  S  Column (c)  FMV (or estimate) (see instructions)  S  Column (c)  FMV (or estimate) (see instructions)  S  Column (c)  FMV (or estimate) (see instructions)  FMV (or estimate) (see instructions)

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Name of organization Employer identification number 47-6587533 GILLCRIST CHARITABLE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee