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Department of the Treasury

Internal Revenue Service

DLN: 93491117000076

OMB No 1545-0052

Return of Private Foundation 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.

Open to Public Inspection ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2015, or tax y	year beginning 01-0	1-2015	, aı	nd ending 1	2-31-2015	
	e of four	ndation ARK FOUNDATION				A Employer ide	entification numbe	er
	NOONE	THE POST OF THE PROPERTY OF TH				48-6284565		
		street (or P O box number if mail is	not delivered to street address)	Room/suite		B Telephone nur	nber (see instruction	s)
HE	RITAGE	GRP 7309 E 21ST N NO 120				(316) 261-5301		
		state or province, country, and ZIP of 672061178	or foreign postal code	1		C If exemption	application is pendin	g, check here 🕨 🦵
G CI	neck al	I that apply Tinitial return	Initial return of a fo	rmer public charity		B.4 Famaran an		
		Final return	A mended return	,		_	ganizations, check h ganizations meeting	, the 050/
		Address chang				test, checl	here and attach co	mputation
		pe of organization					ndation status was t i 507(b)(1)(A), chec	
		et value of all assets at end	J Accounting method		I	F If the founda	tion is in a 60-mont	h termination
		rom Part II, col. (c),	Other (specify)	he on cash basis.)		under sectior	1 507(b)(1)(B), chec	ck here
		\$ 1,213,079		50 011 Cu511 5u5151)				T
Pa	rt I	Analysis of Revenue a (The total of amounts in columns in necessarily equal the amounts in constructions)	(b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach					
		schedule)		30,000				
	2	Check ► ┌ If the foundation	ıs not required to attach					
		Sch B						
	3	Interest on savings and temp	porary cash investments					
	4	Dividends and interest from s	securities	12,199		12,199		
	5a	Gross rents						
	b	Net rental income or (loss)		F2 020				
Ę	6a	Net gain or (loss) from sale o		52,920				
Revenue	b	Gross sales price for all asse	ets on line 6a					
Re	7	Capital gain net income (fron	n Part IV, line 2)			52,920		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and						
	Ь	allowances Less Cost of goods sold .						
	°	Gross profit or (loss) (attach						
	11	Other income (attach schedu	•					-
	12	Total.Add lines 1 through 11		95,119		65,119		-
	13	Compensation of officers, dir		0		0		0
	14	O ther employee salaries and						
ø.	15	Pension plans, employee ben	nefits					
Š	16a	Legal fees (attach schedule).	[
Expenses	ь	Accounting fees (attach sch	edule)	2,644		661		1,983
	С .	Other professional fees (atta	ch schedule)					
and Administrative	17	Interest						
ST 72	18	Taxes (attach schedule) (see	e instructions)	3,846		427		0
₫	19	Depreciation (attach schedul	le) and depletion					
늘	20	Occupancy						
9	21	Travel, conferences, and mee	etings					
	22	Printing and publications.	-	65 7				_
Operating	23	Other expenses (attach sche	·	4,352		4,352		0
erat	24	Total operating and administ	-	40.043		E 440		1.003
ă	3.5	Add lines 13 through 23 Contributions afts grants n		10,842		5,440		1,983 60,500
_	25 26	Contributions, gifts, grants p	ľ	00,300				30,300
		Total expenses and disburser 25	iichts.Aud iiiles 24 and	71,342		5,440		62,483
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expe		23,777				
	b	Net investment income (if ne				59,679		
Ecr '	C	Adjusted net income(If negation Act Notice, see			C - 1	t No. 11289V	F	990-PF (2015)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of	·
	1	Cash—non-interest-bearing	(a) Book Value 70,482	(b) Book Value 71,919	(c) Fair Market Value 71,919
	2	Savings and temporary cash investments	,	. =,5.13	,
	3	Accounts receivable -			
	3	Less allowance for doubtful accounts			
	4	Pledges receivable			
	4	Less allowance for doubtful accounts			
	_				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,028,981	1,051,321	1,141,160
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			_
	15	Other assets (describe 🟲)			
	16	Total assets(to be completed by all filers—see the			
		instructions Also, see page 1, item I)	1,099,463	1,123,240	1,213,079
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ę.	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
a de	21	Mortgages and other notes payable (attach schedule)			
コ	22	Other liabilities (describe			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
φ		and complete lines 24 through 26 and lines 30 and 31.			
Balances	24	Unrestricted			
<u>8</u>	25	Temporarily restricted			
	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here			
7		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	913,230	975,730	
Ř	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
Assets	29	Retained earnings, accumulated income, endowment, or other funds	186,233	147,510	
Net	30	Total net assets or fund balances(see instructions)	1,099,463	1,123,240	
Z		Total liabilities and net assets/fund balances(see instructions)	1,099,463	1,123,240	
	31		1,055,405	1,123,240	
	rt III		/	1 1	
1		Total net assets or fund balances at beginning of year—Part II, column (4 000 455
_		with end-of-year figure reported on prior year's return)			1,099,463
2		Enter amount from Part I, line 27a			23,777
3		Other increases not included in line 2 (itemize)		_ 3	0
4		Add lines 1, 2, and 3		4	1,123,240
5		Decreases not included in line 2 (itemize)		- 5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lin	e 30 . 6 	1,123,240

Part IV Capital Gains and Losses for Tax on Investment Income

		l(s) of property sold (e g , re or common stock, 200 shs		How acquired P—Purchase (b) D—Donation	(6)	Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)	
1a OGLAS ASSO	CIATES, A PA	RTNERSHIP LTCG		Р				
b OGLAS ASSO	CIATES, A PA	RTNERSHIP STCL		Р				
С								
d								
<u>е</u>								
(e) Gross sales p	rıce	Depreciation allowe (f) (or allowable)	l l	or other basis expense of sale			n or (loss) (f) minus (g)	
a							53,321	
b							-401	
С								
d								
e								
Complete only for	assets showing	gaın ın column (h) and owne	ed by the foundation	n on 12/31/69		Gains (Col	(h) gain minus	
		A djusted basis		ess of col (ı)		•	ot less than -0-) or	
(i) FMV as of 12	/31/69	(j) as of 12/31/69	(k) ove	rcol (j), ıfany	(I)			
a							53,321	
b							-401	
С								
d								
е								
3 Net short-ter If gain, also e in Part I, line	nter in Part I , li 8	r (loss) as defined in sectione 8, column (c) (see instru	ictions) If (loss), e) nter -0 - • •	3		52,920	
(For optional use by dor If section 4940(d)(2) a Was the foundation liab	nestic private fo pplies, leave th le for the sectio	n 4942 tax on the distribut	ection 4940(a) tax	on net investment	inco	me)	┌ Yes ✔ No	
		y under section 4940(e) Dich column for each year, s			tries			
(a) Base period years Calen year (or tax year beginnir		(b) sted qualifying distributions	(c) Net value of noncha	ritable-use assets		(d) Distributio (col (b) divided	n ratio	
2014		49,469		1,255,986			0 039387	
2013		48,420		1,156,448			0 041870	
2012		56,124		1,008,855			0 055631	
2011		49,074		1,036,709			0 047336	
2010		49,937		1,012,892			0 049301	
2 Totalof line 1	, column (d)				2		0 233525	
the number of	years the found	the 5-year base period—di dation has been in existence	e ıf less than 5 yea	rs	3		0 046705	
		ritable-use assets for 201!	•	<u> </u>	4		1,252,472	
				<u> </u>	5		58,497	
6 Enter 1% of r	et investment i	ncome (1% of Part I, line 2	7b)	[6		597	
7 Add lines 5 a	nd 6				7	<u></u>	59,094	

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

62,483

8

ĽŒL	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49	74U(E),	01 4940—See	: page	- TO OL	the ms	LIUCLIO	115)	
1a		· ┌		1					
	and enter "N/A" on line 1 Date of ruling or determination letter			Į					
	(attach copy of letter if necessary-see instructions)			(
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			ļ	1				597
	here 🟲 🔽 and enter 1% of Part I, line 27b			. ′					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	enter 4% of						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter -0-)	ndation	s only Other	s	2				0
3	Add lines 1 and 2				3				 597
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable four	ndation	s only Other	rs	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	nter - N	_		5				0 597
6	Credits/Payments	iitei -0		•	5				397
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a] 2	,000					
b	Exempt foreign organizations—tax withheld at source	6b		,000					
c	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7				2,000
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2			3	8				2,000
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed.			•	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10			-	1,403
10 11	Enter the amount of line 10 to be Credited to 2015 estimated tax	600	Refunded	•	11				803
	t VII-A Statements Regarding Activities		1101411404						
1a	During the tax year, did the foundation attempt to influence any national, state	or loc	al legislation	or di	<u></u>			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	olitica	l purposes (s	ee In	structi	ons			
_	for definition)?		•				1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities			ateria	ls				
	published or distributed by the foundation in connection with the activities.		,						
c	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos	sed dui	ng the year						
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers	- \$ _		0					
e	Enter the reimbursement (if any) paid by the foundation during the year for poli	itical e	xpenditure ta	x ımp	osed				
	on foundation managers 🕨 \$0								
2	Has the foundation engaged in any activities that have not previously been rep	orted	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts gove	rning instrum	nent,	articles	;			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confe	ormed o	copy of the ch	anges			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d	urıng t	he year?				4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45) sa	tisfied either						
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so the								
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? and Part XV.	?If "Yes	s," complete Pa	art II,	. col. (c,),	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions	- •	- •	•			
	►KS		,						
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attorn	ey					
	General (or designate) of each state as required by General Instruction G? If '						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r				(3)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s		_						
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	a schedule li	stıng	their na	ames			
	and addresses.						10		No

Pai	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►MEADOWLARK FOUNDATION Telephone no ►(316) 261	-5301	
	Located at ▶7309 E 21ST STREET N WICHITA KS ZIP+4 ▶6720611	.78		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		b [-
13	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 over	مدا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V 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? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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			
L	after termination of government service, if terminating within 90 days) Yes V No			
Ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	ID		
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
С	that were not corrected before the first day of the tax year beginning in 2015?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		NO
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	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? Yes Vo			
	If "Yes," list the years > 20			
ь	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 allyears 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			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise 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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	ıf the foundation had excess business holdings in 2015.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Statements Rega	rding Activities for	Which Form 4/20	may be Required (Cont	tinuea)
During the year did the foundation	n pay or incur any amoun	t to		
(1) Carry on propaganda, or other	wise attempt to influence	e legislation (section 49	45(e))? \(\sum Yes \subseteq 	No
(2) Influence the outcome of any	specific public election (see section 4955), or to	carry	
				√ No
		• •	,	
				Z No
			, 193 ,	
			□ Ves 5	Z No
			, ,	
				5b
			<u>_</u>	_
				_ _{No}
			, 193 ,	
·	· -		nremums on	
· · · · · ·			·	Z No.
·			, ,	
	ir, pay premiums, anced	, or manectry, on a perso	shar benefit contract	. OB NO
·	no the foundation a party	to a probabiled tax chal	tor transaction?	- No
	•	•	, ,	
	conicers, Directors	s, Trustees, Touride	idon Hanagers, ingini	raid Lilipioyees,
	s, foundation managers a	nd their compensation (see instructions).	
	Title and average	(c) Compensation(If	(d)	
(a) Name and address	hours per week	not paid, enter		Expense account,
	(b) devoted to position	-0-)		(e) other allowances
S P SALGO	TRUSTEE	0		†
LENBROOK DRIVE	0 00			
Compensation of five highest-paid	employees (other than	those included on line 1-		nter "NONE."
(a)	Title, and aver	age		Expense account,
	hours per wee			(e) other allowances
more than \$50,000	(b) devoted to posi	tion	(d) compensation	
E				
				1
	During the year did the foundation (1) Carry on propaganda, or other (2) Influence the outcome of any on, directly or indirectly, any on, directly or individual (4) Provide a grant to an individual (4) Provide a grant to an organization section 4945 (d)(4)(A)? (see (5) Provide for any purpose other educational purposes, or for the foundations as extreme to 53 4945 or individual or grant of the foundation section 53 4945 or individual or grant of the answer is "Yes" to question tax because it maintained expending the foundation, during the year a personal benefit contract? Did the foundation, during the year of the foundation, during the year of the foundation during the year of the foundation receives the foundation of the foundation receives the foundation and Contractors. List all officers, directors, trustees the section of the foundation of five highest-paid (a) Compensation of five highest-paid (a)	(1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election (on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or otherwise attempt to influence the outcome of any specific public election (on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other than a charitation in section 4945(d)(4)(A)? (see instructions). (5) Provide for any purpose other than religious, charitable educational purposes, or for the prevention of cruelty than answer is "Yes" to 5a(1)–(5), did anyof the transact Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disast If the answer is "Yes" to question 5a(4), does the foundate tax because it maintained expenditure responsibility for the If "Yes," attach the statement required by Regulations section Did the foundation, during the year, receive any funds, directly apersonal benefit contract? Did the foundation, during the year, pay premiums, directly If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party If yes, did the foundation receive any proceeds or have an and Contractors List all officers, directors, trustees, foundation managers and Contractors List all officers, directors, trustees, foundation managers and Contractors LENBROOK DRIVE SBOROUGH, CA 94010 Compensation of five highest-paid employees (other than thous per week hours p	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 49) (2) Influence the outcome of any specific public election (see section 4955), or to on, directly or indirectly, any voter registration drive?	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). 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 serv	ices	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Incluorganizations and other beneficiaries served, conferences convened, research paper		Expenses
1 NONE		С
2		
3		
4		
Part IX-B Summary of Program-Related Investme		T
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	Amount
1 NONE		C
2		
All abbancas many malabad manasharanta Casa matimathana		
All other program-related investments See instructions 3		
3		
Total, Add lines 1 through 3		

Part X Minimum Investment Return

Pe	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	71,196
c	Fair market value of all other assets (see instructions)	1 c	1,200,349
d	Total (add lines 1a, b, and c)	1d	1,271,545
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,271,545
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	19,073
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,252,472
6	Minimum investment return. Enter 5% of line 5	6	62,624
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	62,624
2a	Tax on investment income for 2015 from Part VI, line 5 2a 597		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	597
3	Distributable amount before adjustments Subtract line 2c from line 1	3	62,027
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	62,027
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	62,027
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	62,483
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	62,483
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	597
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	61,886
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIIII Undistributed Income (see insti	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				62,027
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			57,891	
Ь	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
	From 2011				
c	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e		0		
	Qualifying distributions for 2015 from Part				
•	XII, line 4 > \$ 62,483				
a	Applied to 2014, but not more than line 2a			57,891	
	Applied to undistributed income of prior years		0	,	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount		_		4,592
е	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		
	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)		0		
_	tax has been previously assessed				
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			0	
_	instructions			o .	
Т	Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must				
	be distributed in 2015				57,435
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		0		
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.		0		
10	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011 Excess from 2012				
	Excess from 2013 Excess from 2014				
е	Excess from 2015				

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

c Any submission deadlines

factors

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 60,500 **b** Approved for future payment

Form 990-PF (2015) Part XVI-A Analysis of Income-Produc	sina Activitie				Page 12
Enter gross amounts unless otherwise indicated	Γ	usiness income	Excluded by section	n 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income (See
1 Program service revenue	Business code	A mount	Exclusion code	A mount	instructions)
a b					
c d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities5 Net rental income or (loss) from real estate			14	12,199	
a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal property					
7 Other investment income8 Gain or (loss) from sales of assets other than					
inventory			18	52,920	
10 Gross profit or (loss) from sales of inventory.					
b					
c					
e					
12 Subtotal Add columns (b), (d), and (e) 13 Total.Add line 12, columns (b), (d), and (e)			1	65,119 L3	
(See worksheet in line 13 instructions to verify Part XVI-B Relationship of Activities to	calculations)				
Line No. Explain below how each activity for wh the accomplishment of the foundation's instructions)	ıch ıncome ıs re	ported in column	(e) of Part XVI-A c	ontributed importa	

Part	: XVI	Information Re Noncharitable				actions	and R	elationships	With			
		rganization directly or i	ndırectly e	ngage in any o	f the following wit						Yes	No
	janizat	• •			, 0. 9424	5 5 5 1. 5	5 = 7 , .	ciating to pointie	-			
_		s from the reporting four	ndation to a	a noncharitable	e exempt organiza	ition of						
		h			• •					1a(1)		No
		erassets								1a(2)		No
` `	•	insactions								(-)		
		s of assets to a noncha	ritable exe	mpt organizati	on					1b(1)		No
		hases of assets from a								1b(2)		No
		tal of facilities, equipme								1b(3)	<u> </u>	No
										1b(4)		No
										- 		
			•	_						- ` ` 		
	_		_	•								140
of t	the god any tra	ods, other assets, or se	rvices give angement,	en by the repor show in colum	ting foundation I n (d) the value of	the found the goods	lation re s, other	ceived less thar assets, or servic	fair marke es receive	et value ed		ıts
des	scribe	d in section 501(c) of th	ne Code (ot								s 🔽	No
b If'	'Yes,"	· -		1	(h) Type of omaniza	tion	ı	(c) Descrir	ition of relation	anshin		
		(a) Harrie or organization			(b) Type of organiza			(C) Descrip	tion of relati	энэтр		
	1											
Sign	the	best of my knowledge a	ınd belief, i	t is true, corre					n taxpaye	r) is bas	ed on	all
Here		*****			2016-04-21	-) -			return with t	he prepar		
	Ţ,	Signature of officer or t	rustee		Date	. 1	itie		(see ı	nstr)? 🗸	Yes	lo
				Preparer's Sıç	gnature	Date		Check if self- employed ►	PTIN P(010687	40	
Use	arer		С			1		Firm's EIN ► 4	8-120882	3		
(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. 1												

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			<u> </u>	-
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
ALSTROM SYNDROME INTERNATIONAL 14 WHITNEY FARM ROAD MOUNT DESERT,ME 04660	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	500
AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA,PA 19102	N/A		OPERATING FUND FOR WELFARE ORGANIZATION	1,000
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON,DC 20006	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	2,000
APPALACHIAN MOUNTAIN CLUB FIVE JOY STREET BOSTON,MA 02108	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	1,000
COMMUNITY SOUP KITCHEN 36 SOUTH STREET MORRISTOWN,NJ 07960	N/A		OPERATING FUND FOR WELFARE ORGANIZATION	10,000
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE 2ND FLOOR NEW YORK, NY 10001	N/A		OPERATING FUND FOR MEDICAL ORGANIZATION	5,000
FILOLI CENTER 86 CANADA ROAD WOODSIDE,CA 94062	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	1,000
FRIENDS ACADEMY 270 DUCK POND ROAD LOCUST VALLEY, NY 11560	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	1,000
FRIENDS OF EDGEWOOD NATURE PRESERVE PO BOX 3422 REDWOOD CITY, CA 94064	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	500
HARTWICK COLLEGE ONE HARTWICK DRIVE ONEONTA,NY 13820	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	1,000
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK,NY 10168	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	5,000
KQED 2601 MARIPOSA STREET SAN FRANCISCO,CA 94110	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	500
NATIONAL COUNCIL OF LA RAZA 1126 16TH ST NW WASHINGTON, DC 20036	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	1,000
NEW YORK UNIVERSITY SCHOOL OF MEDICINE 25 WEST FOURTH ST NEW YORK,NY 10012	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	1,000
NEW YORK-NEW JERSEY TRAIL CONFERENCE 156 RAMAPO VALLEY ROAD MAHWAH,NJ 07430	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	1,000
Total			▶ 3a	60,500

Form 990PF Part XV Line 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 contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
PENINSULA HUMANE SOCIETY & SPCA 1450 ROLLINS ROAD BURLINGAME,CA 94010	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	500
RAILS-TO-TRAILS CONSERVANCY	N/A		OPERATING FUND FOR OTHER PUBLIC CHARITY	1,000
2121 WARD COURT NW 5TH FLOOR WASHINGTON,DC 20037			OTHER PUBLIC CHARITY	
ROCK BROOK SCHOOL 109 ORCHARD ROAD SKILLMAN,NJ 08558	N/A		OPERATING FUND FOR EDUCATIONAL ORGANIZATION	10,000
SECOND HARVEST FOOD BANK 750 CURTNER AVENUE SAN JOSE, CA 95125	N/A		OPERATING FUND FOR WELFARE ORGANIZATION	10,000
SOUTH CAIRO UNITED METHODIST CHURCH COUNTY ROUTE 67 SOUTH CAIRO,NY 12482	N/A		OPERATING FUND FOR RELIGIOUS ORGANIZATION	6,000
ST ANTHONY'S PADUA DINING ROOM 3500 MIDDLEFIELD ROAD MENLO PARK,CA 94025	N/A		OPERATING FUND FOR WELFARE ORGANIZATION	1,500
Total			▶ 3a	60,500

TY 2015 Accounting Fees Schedule

Name: MEADOWLARK FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,644	661		1,983

TY 2015 Investments - Other Schedule

Name: MEADOWLARK FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN PARTNERSHIP - SOLKIM ASSOCIATES	AT COST	164,099	164,558
INVESTMENT IN PARTNERSHIP - OGLAS ASSOCIATES	AT COST	887,222	976,602

DLN: 93491117000076

TY 2015 Other Expenses Schedule

Name: MEADOWLARK FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OGLAS ASSOCIATES, A PARTNERSHIP - DEDUCTIONS RELATED TO PORTFOLIO INCOME	4,018	4,018		0
SOLKIM ASSOCIATES, A PARTNERSHIP - DEDUCTIONS RELATED TO PORTFOLIO INCOME	334	334		0

TY 2015 Taxes Schedule

Name: MEADOWLARK FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHELD	427	427		0
FEDERAL EXCISE TAX CURRENT YEAR	2,000	0		0
FEDERAL EXCISE TAX PRIOR YEAR	1,419	0		0

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93491117000076

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

2015

Employer identification number

MEAD	OWLARK FOUNDA	TION		
			48-6284565	
Organ	ization type (checl	cone)		
Filers	lers of: Section:			
Form 9	90 or 990-EZ	☐ 501(c)() (enter number) organization		
		√ 4947(a)(1) nonexempt charitable trust not treated as a private found.	dation	
		□ 527 political organization		
Form 9	90-PF	▼ 501(c)(3) exempt private foundation		
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation	n	
		□ 501(c)(3) taxable private foundation		
Note.	Only a section 501(c	is covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and the control of the contr		
·		om any one contributor Complete Parts I and II See instructions for determini		
Specia	al Rules			
Γ	under sections 509 received from any	described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the 33^{1} /3% $\theta(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), one contributor, during the year, total contributions of the greater of (1) \$5,00 (ii) Form 990-EZ, line 1 Complete Parts I and II	Part II, line 13, 16a, or 16b, and that	
Γ	during the year, tot	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recall contributions of more than \$1,000 exclusively for religious, charitable, scies of cruelty to children or animals. Complete Parts I, II, and III	•	
Г	during the year, co this box is checked purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recontributions exclusively for religious, charitable, etc., purposes, but no such coll, enter here the total contributions that were received during the year for an implete any of the parts unless the General Rule applies to this organization e, etc., contributions totaling \$5,000 or more during the year	ontributions totaled more than \$1,000 If exclusively religious, charitable, etc, because it received nonexclusively	

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 990PF, 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 MEADOWLARK FOUNDATION Employer identification number 48-6284565

(a) Name, address, and ZIP+4	Part I	Contributors (see instructions) Use duplicate copies of Part I in	f additional space is needed		
Person F Payrol		Name, address, and ZIP + 4			
S	1	MEADOWLARK TRUST		Person	I
WICHITA, KS67206 Compiler Part II for noncash contributions Person Payroll Payrol		7309 E 21ST ST N STE 120	\$ 30,000	Payroll	Г
(a) No. Name, address, and ZIP + 4 (b) No. Name, address, and ZIP + 4 (c) (c) (d) Type of contribution Person Payroll Part II for noncesh contributions (a) No. Name, address, and ZIP + 4 (b) No. Name, address, and ZIP + 4 (c) (c) (d) Type of contribution Person Payroll Part II for noncesh contributions (c) (d) Type of contribution (c) (d) Type of contribution (d) No. Name, address, and ZIP + 4 (e) (c) (d) Type of contribution (a) No. Name, address, and ZIP + 4 (c) (d) Type of contribution (e) No. Name, address, and ZIP + 4 (c) (d) Type of contribution (e) No. Name, address, and ZIP + 4 (c) (d) Type of contribution (e) No. Name, address, and ZIP + 4 (f) Total contributions (g) (g) Type of contribution (g) No. Name, address, and ZIP + 4 (g) (g) Type of contribution		WICHITA KS67206	400,000	Noncash	Г
No. Name, address, and ZIP+4 Total contributions Person F Payroll F Noncash Contributions (a) No. Name, address, and ZIP+4 (b) No. Name, address, and ZIP+4 Total contributions (b) No. Name, address, and ZIP+4 Total contributions (b) No. Name, address, and ZIP+4 Total contributions (c) Type of contribution Person F Payroll F Noncash Contributions (c) Type of contribution Person F Payroll F Noncash Contributions (a) No. Name, address, and ZIP+4 Total contributions (b) No. Name, address, and ZIP+4 Total contributions (c) Type of contribution Person F Payroll F Noncash Contributions (c) Type of contribution (c) Type of contribution Type of contribution Person F Payroll F Noncash Contribution Type of contribution Type of contribution Type of contribution Person F Payroll F Noncash Complete Part II for noncash contributions (c) Type of contribution Type of contribution Person F Payroll F Noncash Complete Part II for noncash contributions Type of contribution Person F Payroll F Noncash F Complete Part II for noncash contribution Person F Payroll F Noncash F Complete Part II for noncash contribution Person F Payroll F Noncash F Complete Part II for noncash contribution Type of contribution		Wienin, Kos, 200			for noncash
Payroll					
Sample Noncash Complete Part II for noncash contributions Payroll Payro				Person	Γ
Noncash Complete Part II for noncash contributions Payroll Payr				Payroll	Г
(a) No. Name, address, and ZIP+4 (b) No. Name, address, and ZIP+4 (c) Total contributions S				Noncash	Г
No. Name, address, and ZIP+4 Total contributions Person Payroll Person Payroll Person Payroll Payro					for noncash
Payroll					
S				Person	Γ
Noncash Complete Part II for noncash contributions Noncash Complete Part II for noncash contributions				Payroll	Г
(a)			<u>*</u>	Noncash	Γ
No. Name, address, and ZIP+4 Total contributions Person Payroll Complete Part II for noncash contributions (a) No. Name, address, and ZIP+4 Total contributions (b) No. Name, address, and ZIP+4 Total contributions Person Payroll Payroll S Noncash (Complete Part II for noncash contribution) Person Payroll Total contributions (Complete Part II for noncash contribution) S Noncash Complete Part II for noncash contributions (Complete Part II for noncash contributions) Type of contributions Person Payroll Type of contribution Person Payroll For Noncash Complete Part II for noncash Contributions (Complete Part II for noncash Contributions)					for noncash
Payroll			(c) Total contributions		
Sample S				Person	Γ
Noncash Complete Part II for noncash contributions			•	Payroll	Γ
(a) No. Name, address, and ZIP + 4 (b) No. Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions) (a) No. Name, address, and ZIP + 4 Total contributions (b) No. Name, address, and ZIP + 4 Person Type of contribution Type of contribution Person Payroll Payroll Payroll Payroll Complete Part II for noncash (Complete Part II for noncash			Ψ	Noncash	Г
No. Name, address, and ZIP+4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions) (a) No. Name, address, and ZIP+4 Total contributions (c) (d) Total contributions Person Payroll Payroll Payroll Noncash (Complete Part II for noncash contributions) Person Payroll Complete Part II for noncash					for noncash
Payroll Noncash (Complete Part II for noncash contributions) (a) Name, address, and ZIP + 4 Total contributions Person Payroll Payroll Type of contribution Person Payroll Complete Part II for noncash (Complete Part II for noncash)					
\$ Noncash Complete Part II for noncash contributions (c) Total contributions S				Person	Г
Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Person Payroll Payroll Noncash (Complete Part II for noncash contributions) (Complete Part II for noncash			•	Payroll	Γ
(a) (b) (c) (d) Total contributions Person Payroll Payroll Noncash (Complete Part II for noncash			Ψ	Noncash	Г
No. Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash					for noncash
Payroll Noncash (Complete Part II for noncash			(c) Total contributions		
S Noncash (Complete Part II for noncash				Person	Г
Noncash (Complete Part II for noncash			*	Payroll	Γ
			*	Noncash	Г
					for noncash

Name of organization MEADOWLARK FOUNDATION		Employer identification no	ımber
		48-6284565	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a)	(b)	(c)	(d)
No.from Part I	Description of noncash property given	FMV (or estimate) (see instructions) \$\text{\$\sum_{\subset}}\$	Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			_

Schedule B (I	Form 990,	990-EZ, or	990-PF)	(2015)
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chedule B (Form 990	0, 990-EZ, or 990-PF) (2015)		Page 4
ame of organizatio EADOWLARK FOU			Employer identification number 48-6284565
total mor line entr of \$1,000	re than \$1,000 for the year from any o	one contributor. Complete co III, enter the total of <i>exclusive</i> mation once. See instruction	ibed in section 501(c)(7), (8), or (10) that lumns (a) through (e) and the following elyreligious, charitable, etc., contributions
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee
(a) No.from Part I	 (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, and	(e) Transfer of gif d ZIP4	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	Transferee's name, address, and	(e) Transfer of gif	t Relationship of transferor to transferee