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Form **990-PF** Department of the Treasury Internal Revenue Service

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.
Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>

For cale	ndar year 2016 or tax year beginning		, and ending		<del></del>
Name o	f foundation		ı	A Employer identification	number
THE	MCGEE FOUNDATION				
C/0	BERNARD J. DUFFY, III			44-6006285	
	and street (or P.O. box number if mail is not delivered to street a			<b>B</b> Telephone number	
_830	0 NE UNDERGROUND DR, PII	LLAR	121B	816-471-47	00
-	town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	nding, check here
_KAN	SAS CITY, MO 64161		<del></del>		F
<b>G</b> Checl	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		Foreign organizations med check here and attach cor	eting the 85% test.
	Address change	Name change		check here and attach cor	nputation
	k type of organization: X Section 501(c)(3) ex			E If private foundation stat	
		Other taxable private founda		under section 507(b)(1)	(A), check here
	arket value of all assets at end of year J Accounti		Accrual ED CASH	F If the foundation is in a (	
	, 4.1 11, 001 (0), 1110 10	ther (specify) MODIFI		under section 507(b)(1)	(B), cneck nere
<b>▶</b> \$	15, 263, 776. (Part I, colu				(d) Disbursements
Part	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
-	necessarily equal the amounts in column (a) )		, p y 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	N/A E	(CBST DBSIS UTIY)
1,	Contributions, gifts, grants, etc., received  Check X if the foundation is not required to attach Sch B	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			
2	Interest on savings and temporary	**/ * * * * * * * * * * * * * * * * * *			
1 3	cash investments  Dividends and interest from securities	278,980.	278,980.		STATEMENT 1
5.	a Gross rents				* * .\$ * .; *
1	Net rental income or (loss)	3. 3. 3. 3.		4 4 7 6 3	
	Net gain or (loss) from sale of assets not on line 10	398,830.		Barry Barry	% × × ×
i ii	Gross sales price for all 981,481.			1. 1 1 1 1 1	
Revenue 2	Capital gain net income (from Part IV, line 2)		398,830.	\$ 33 E 25 3 S	
æ 8	Net short-term capital gain				
9	Income modifications	33 4 5 \$ \$			
10:	Gross sales less returns and allowances				
[ ]	D Less Cost of goods sold				
- 1 -	c Gross profit or (loss)		4 4 2 3 3		
11	Other income	57.	57.		STATEMENT 2
12	Total. Add lines 1 through 11	677,867.	677,861		
13	Compensation of officers, directors, trustees, etc	0.	97	ECENTER	0.
14		<del> </del>	181	TVEU,	<del>/</del>
15	• • •	<del></del> -	121 M	AY 1 9 200 TO	<b>}</b> }
ات	a Legal fees	10,403.	1,56,0,;	- <del>* 4 4 1                                 </del>	8,842.
Den	b Accounting fees STMT 3	10,403.		DEN LES	0,042.
ш	c Other professional fees	<del></del>		JEN, UT Y	<del></del>
<u>9</u> 17	A	6,603.	0.		0.
81 trat	Taxes STMT 4  -Depreciation and depletion		======	=	W. 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
siuiu 20			<del></del>	<del></del>	
E 20				<del> </del>	
D 22	-				
@		41,699.	16,009.		25,690.
23 24 24	Total operating and administrative				
<u> </u>	expenses. Add lines 13 through 23	58,705.	17,569.		34,532.
려25		698,400.	25 ( )		698,400.
	Total expenses and disbursements.				
_ [	Add lines 24 and 25	757,105.	17,569.	<u> </u>	732,932.
27	Subtract line 26 from line 12:	and attended to the same of the same of	\$ 1 \$ A		, , ,
1	8 Excess of revenue over expenses and disbursements	<79,238.>		**	7.43, 37, 4
-	b Net investment income (if negative, enter -0-)	S 3	660,298.		<u>`</u>
	c Adjusted net income (if negative, enter -0-)	, y 48.	<u> </u>	N/A	- 000 DE
623501	11-23-16 LHA For Paperwork Reduction Act Notic	e, see instructions.		(rXT)	Form <b>990-PF</b> (2016)

For	n 99	0-PF (2016) C/O BERNARD J. DUFFY, 11			6006285 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	of year (c) Fair Market Value
$\neg$	_,	Out and the same	100,913.	242,255.	242,255.
		Cash - non-interest-bearing	100,515.	242,233.	242,233.
	2	Savings and temporary cash investments	<del></del>	<del></del>	<del></del>
	3			wind and a second	
		Less: allowance for doubtful accounts			<del></del>
	4	Pledges receivable	2. 2. 1. 1. 10. 10. 10. 10. 10. 10. 10. 10.	~ ) ,	, , , , , , , , , , , , , , , , , , ,
		Less: allowance for doubtful accounts		<u> </u>	
	5	Grants receivable		,	
	6	Receivables due from officers, directors, trustees, and other			ì
		disqualified persons			<u> </u>
	7	Other notes and loans receivable			* · · · · · · · · · · · · · · · · · · ·
		Less: allowance for doubtful accounts			
10	8	Inventories for sale or use			
Assets	9	Prepard expenses and deferred charges			
As	_	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 6	8,134,733.	7,873,782.	11,992,183.
			0/202/.000	.,0.0,,0	
		Investments - corporate bonds			, , %
	11	Investments - land, buildings, and equipment basis	A Sale, . E.		- Cus have a see & L
		Less accumulated depreciation	<del></del> -	<del>                                     </del>	
		Investments - mortgage loans	2 027 045	3,082,335.	3 020 330
	13	myddinonia obio	3,037,845.		3,029,338.
	14	Land, buildings, and equipment basis		TO BE OF A	
		Less accumulated depreciation	2 250		
	15	Other assets (describe FEDERAL EXISE TAX R)	3,357.	0.	0.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	11,276,848.	11,198,372.	15,263,776.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
ë.	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
ڌ	22	Other liabilities (describe > ACCRUED FEDERAL EX)	0.	762.	
	23	Total liabilities (add lines 17 through 22)	0.	762.	
	<u> </u>	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
٤	25	Temporarily restricted	· · · · · · · · · · · · · · · · · · ·		
<u>a</u>	26	Permanently restricted	<u> </u>	<del></del>	
Net Assets or Fund Balan	20	Foundations that do not follow SFAS 117, check here	<del></del>		
Ş		,			
ř	l	and complete lines 27 through 31.	0.	0.	
13	27	Capital stock, trust principal, or current funds	0.	0.	
- S	28	Paid-in or capital surplus, or land, bldg., and equipment fund	11,276,848.	11,197,610.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds			
ž	30	Total net assets or fund balances	11,276,848.	11,197,610.	
			44 056 040	44 400 070	
_	31	Total liabilities and net assets/fund balances	11,276,848.	11,198,372.	***************************************
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
Ξ					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30	1	11 000 040
		st agree with end-of-year figure reported on prior year's return)		1	11,276,848.
2		r amount from Part I, line 27a		2	<79,238.>
3		er increases not included in line 2 (itemize)			0.
4	Add	lines 1, 2, and 3		4	11,197,610.
5		reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	11,197,610.
					Form <b>990-PF</b> (2016)

(a) List and descr	tibe the kind(s) of property solo	d (e.g., real estate,	Income	( <b>b)</b> Ho	w acquired Purchase	(c) Date	acquired day, yr.)	(d) Date sold (mo., day, yr.)
2-story brick warehouse; or common stock, 200 shs. MLC Co.)  1a VARIOUS MUTUAL FUNDS				D-	D - Donation			
				$\vdash$	<u>Р</u> Р	VARI VARI		VARIOUS VARIOUS
	DINIDUITONS		<del></del>	$\vdash$		VAIL	003	VARIOUS
				1		· · · · · · · · · · · · · · · · · · ·		
e	<del></del>	<del></del>				<del></del>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) ( (e) plu	Gain or (loss s (f) minus	s) (g)
a 877,938.			582,65	1.				295,287.
ь 103,543.								103,543.
G				$-oldsymbol{\perp}$				
_d								
e								
Complete only for assets showing	g gain in column (h) and owne	d by the foundation	on 12/31/69				Col. (h) gair	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (1)		C	ol. (k), but Losses	not less that (from col.	in -0-) <b>or</b> /b))
(1)1.101.0. as of 1231/09	as of 12/31/69	over	col. (j), if any					· · · ·
a								<u>295,287.</u>
b								103,543.
С								
_d								··
_e					·			
2 Capital gain net income or (net ca	pital loss) { If gain, also	enter in Part I, line iter -0- in Part I, line	7 .7	}[	2			398,830.
3 Net short-term capital gain or (los	•							
If gain, also enter in Part I, line 8,	•	(0) 4.12 (0)		}				
If (loss), enter -0- in Part I, line 8					3		N/A	<u> </u>
Part V Qualification U	nder Section 4940(e)	for Reduced	Tax on Net	Inves	tment Inc	come		
(For optional use by domestic private	foundations subject to the sec	ction 4940(a) tax on	net investment inc	come.)				
16 40 40 (4) (0) leave th	us nort blank							
If section 4940(d)(2) applies, leave th	as part biank.							
Was the foundation liable for the sect	ion 4942 tax on the distributat	ole amount of any ye	ar in the base peri	10d?				Yes X No
If "Yes," the foundation does not quali								·
1 Enter the appropriate amount in e	ach column for each year; see	the instructions bef	ore making any er	ntries.				
(a) Base period years	(b)			(c)			Distri	(d) bution ratio
Calendar year (or tax year beginnin	ng in) Adjusted qualifyir	<u> </u>	Net value of no				(col. (b) dr	vided by col. (c))
2015		717,906.			771,73			.048600
2014		593,157.			957,64			.039656
2013		704,662.			656,28			.051600
2012		611,541.			164,94			.050271
2011		513,108.		12,	328,42	6.		.041620
2 Total of line 1, column (d)						2	Ĺ	.231747
3 Average distribution ratio for the 5	5-year base period - divide the	total on line 2 by 5,	or by the number	of years	3			
the foundation has been in exister	ice if less than 5 years					3		.046349
						)	ì	
4 Enter the net value of noncharitab	le-use assets for 2016 from Pa	art X, line 5				4	1	<u>4,342,694.</u>
5 Multiply line 4 by line 3						5		664,770.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		<u>6</u> ,603.
6 Enter 1% of net investment incom	ie (1% of Part I, line 27b)					6		6,603.
<ul><li>6 Enter 1% of net investment incom</li><li>7 Add lines 5 and 6</li></ul>	ne (1% of Part I, line 27b)					6		
	ne (1% of Part I, line 27b)							6,603. 671,373.
	n Part XII, line 4							

623521 11-23-16

orm 990-PF (2016) C/O BERNARD J. DUFFY, III	4040(-) 40752	1010	44-				age
Part VI Excise Tax Based on Investment Income (Section			948 -	see in	struc	tions	<u> </u>
1a Exempt operating foundations described in section 4940(d)(2), check here					,		
Date of ruling or determination letter: (attach copy of lett	ter if necessary-see in:	structions)			· .		ž
b Domestic foundations that meet the section 4940(e) requirements in Part V, check to	here 🕨 🗶 and er	iter 1%	1		(	5,60	3
of Part I, line 27b		İ	1	1	` .	* .	,
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations e	enter 4% of Part I, line	12, col. (b). ノ	., 4.				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter -0-)		2	<u></u>			0
3 Add lines 1 and 2			3		- 6	5,60	3
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s only. Others enter -0-)	1	4	<u> </u>			0
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0-		_5_		- 6	,60	3
6 Credits/Payments:	1 1		<b> </b> }	( )		1 ,	
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	5,840.		`*	, '>	. , `	
b Exempt foreign organizations - tax withheld at source	6b		<u> </u>	7.	^,^ ,		
c Tax paid with application for extension of time to file (Form 8868)	6c		1	۶	, i, i,	1	Ý.
d Backup withholding erroneously withheld	6d		]. **	.\ \ %	in s		æ.
Total credits and payments. Add lines 6a through 6d			7		5	,84	0
Enter any penalty for underpayment of estimated tax. Check here X if Form 222	20 is attached		88				
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<b>&gt;</b>	9			76	<u>3</u>
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	erpaid	_ , ▶	10				
Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ art VII-A   Statements Regarding Activities		<u>Refunded</u> ▶	11				
							_
a During the tax year, did the foundation attempt to influence any national, state, or local	cal legislation or did it p	participate or intervene	e in			-	
any political compaign?							
any political campaign?					1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for politica					1a 1b		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for politica If the answer is "Yes" to 1a or 1b, attach a detailed description of the active						_ [	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities distributed by the foundation in connection with the activities						***	X X
<ul> <li>b Did it spend more than \$100 during the year (either directly or indirectly) for politica if the answer is "Yes" to 1a or 1b. attach a detailed description of the activities distributed by the foundation in connection with the activities</li> <li>c Did the foundation file Form 1120-POL for this year?</li> </ul>	vities and copies of a				1b	*	X X
<ul> <li>b Did it spend more than \$100 during the year (either directly or indirectly) for politica If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities distributed by the foundation in connection with the activities</li> <li>c Did the foundation file Form 1120-POL for this year?</li> <li>d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the political expenditures (section 4955).</li> </ul>	vities and copies of a	ny matenals publish			1b	*	X X
<ul> <li>b Did it spend more than \$100 during the year (either directly or indirectly) for political if the answer is "Yes" to 1a or 1b. attach a detailed description of the activities distributed by the foundation in connection with the activities</li> <li>c Did the foundation file Form 1120-POL for this year?</li> <li>d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the foundation.</li> <li>\$</li></ul>	vities and copies of a iring the year: ianagers. > \$	ny matenals publish			1b	*	X X X
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valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach

b If "Yes," did it have excess business holdings in 2016 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

statement - see instructions.)

during the year?

N/A

N/A

Yes X No

Form 990-PF (2016)

	1			
THE MCGEE FOUNDATION				
Form 990-PF (2016) C/O BERNARD J. DUFFY, III	orm 4700 May Bo D	a gradua d	44-60062	85 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F.  5a During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions)  (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions).  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945.  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pa personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attribution Part VIII- Information About Officers, Directors, Trustee.	4945(e))?  to carry on, directly or indirectly or educational purposes, or followed the exceptions described in a ctions)?  ere om the tax because it maintal individual	equired (continuent)    Ye	es X No	5b X
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their c  (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		0.	0.	0.
Compensation of five highest-paid employees (other than those incl     (a) Name and address of each employee paid more than \$50,000      NONE	uded on line 1). If none, of (b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	L <del></del>	<u> </u>		<del></del>
Total number of other employees paid over \$50,000	<del></del>		Form \$	990-PF (2016)

Form 990-PF (2016) C/O BERNARD J. DUFFY, III	44-6	006285 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	NONE."	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
		<del>-  </del>
		<del></del>
Total number of others receiving over \$50,000 for professional services	1	<b>D</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product	cal information such as the ced, etc.	Expenses
1		
SEE STATEMENT 11		34,532.
3		
4		
Part IX-B, Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lift N/A	nes 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	<u> </u>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;	شـُـــــــــــــــــــــــــــــــــ	<del></del>
a	Average monthly fair market value of securities	1a	14,391,249.
Ь	Average of monthly cash balances	1b	169,604.
c	Fair market value of all other assets	1c	258.
d	Total (add lines 1a, b, and c)	10	14,561,111.
е	Reduction claimed for blockage or other factors reported on lines 1a and	2	
	1c (attach detailed explanation) 1e 0.	1.00 L	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	14,561,111.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	218,417.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,342,694.
6	Minimum investment return. Enter 5% of line 5	6	717,135.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	717,135.
2a	Tax on investment income for 2016 from Part VI, line 5 2a 6,603.		
þ	Income tax for 2016. (This does not include the tax from Part VI.)	}	
C	Add lines 2a and 2b	2c	6,603.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	710,532.
4	Recoveries of amounts treated as qualifying distributions	4	<u>0.</u>
5	Add lines 3 and 4	5	710,532.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	710,532.
P	art;XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1 1	<del></del>
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a *	732,932.
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., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	No.	
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	732,932.
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	5	6,603.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,603. 726,329.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies f	
	4940(e) reduction of tax in those years.		
			5 000 DE (00.40)

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,			2010	2010
line 7				710,532.
2 Undistributed income, if any, as of the end of 2016				710,332.
a Enter amount for 2015 only		^	711,986.	
<b>b</b> Total for prior years:				
<u>2014</u> , <u>2013</u> , <u>2012</u>		0.	` `	
3 Excess distributions carryover, if any, to 2016:			· ·	,
<b>a</b> From 2011	, ,		<b>i</b> ′.	, ,
<b>b</b> From 2012	, * <i>'</i>	× ,/	, ,	, , , , , , , , , , , , , , , , , , ,
c From 2013	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	, · ( · ) ( · )	* , <	,
d From 2014		\$ ,> ,	,, ,	2 À
e From 2015		, > , > , 3		,
f Total of lines 3a through e	0.	/ (»).	ř.	,
4 Qualifying distributions for 2016 from		) '\$ .\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	E x 3 5	* 3.87
Part XII, line 4: ►\$ 732,932.			6m 2 22 23 3	
a Applied to 2015, but not more than line 2a			711,986.	
<b>b</b> Applied to undistributed income of prior				3
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount	(\$1° (\$1))			20,946.
e Remaining amount distributed out of corpus	0.	·\$1. (\$) \$.	\$* X\$ }* }\$	· 14 > 1, 1
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.		\$ 18x 4 13x 1	0.
must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	\$\$; \$1. `1 `2		
b Prior years' undistributed income. Subtract		. 46 87 8 47	\$ 60, \$1,	
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	\$, <b>\</b> \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.		
e Undistributed income for 2015. Subtract line				». 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
4a from line 2a. Taxable amount - see instr.	***		0.	
f Undistributed income for 2016. Subtract		`		
lines 4d and 5 from line 1. This amount must				
be distributed in 2017	<u> </u>			<u>689,</u> 586.
7 Amounts treated as distributions out of			* * * * * * * * * * * * * * * * * * * *	3 2
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	· ; ; ; · · · · · · · · · · · · · · · ·	* * * * / /	<u> </u>
8 Excess distributions carryover from 2011		O X	\*	*
not applied on line 5 or line 7	0.			<u>```</u>
9 Excess distributions carryover to 2017.	_	*	· · · · · · · · · · · · · · · · · · ·	\$ 1
Subtract lines 7 and 8 from line 6a	0.	<u> </u>		, > , » , ,
Analysis of line 9:     a Excess from 2012	,		,	· · · · · · · · · · · · · · · · · · ·
		· ,	<b>'</b>	
b Excess from 2013 c Excess from 2014		,		,
d Excess from 2015	*		`	
e Excess from 2016	`	, 1		,
G LAUGOS HUIII ZU IU			l	

Form **990-PF** (2016)

SEE	STATEMENT	12	
<b>b</b> The	form in which applica	ons should be submitted and information and materials they should include:	

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

Form **990-PF** (2016)

c Any submission deadlines:

3 Grants and Contributions Paid During the Ye	ear or Approved for Future I	Pavment	<u> </u>	T
Recipient	If recipient is an individual		T	<del> </del>
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		<del> </del>
AVII A VIVIVIDA CITA				
AVILA UNIVERSITY 11901 WORNALL			SCHOLARSHIPS	
KANSAS CITY, MO 64145				50,000.
CARITAS CLINICS (DBA DUCHESNE CLINIC)			PROGRAM SUPPORT	
636 TAUROMEE AVENUE				
KANSAS CITY, MO 66101		<u></u>		15,000.
CATHOLIC EDUCATION FOUNDATION			SCHOLARSHIPS	
12615 PARALLEL PARKWAY KANSAS CITY, KS 66109				16,200.
				20,200.
COMMUNITY SERVICES LEAGUE			OPERATING SUPPORT	
404 NORTH NOLAND ROAD INDEPENDENCE , MO 64050				30,000.
,			<del></del>	30,000.
DON BOSCO COMMUNITY CENTER			PROGRAM SUPPORT	
580 CAMPBELL STREET KANSAS CITY, MO 64106				15,000.
	TINUATION SHEE	T(S)	<b>▶</b> 3a	698,400.
b Approved for future payment				
NOVE				
NONE				
		<del></del>	=	<del></del>
	-		<del> </del>	
Total		<u></u>	▶ 3b	0.
			F	orm <b>990-PF</b> (2016)

Form 990-PF (2016) Part XVI-A

C/O BERNARD J. DUFFY, III

**Analysis of Income-Producing Activities** 

Takes are a mounts unless atherwise indicated	Unrelate	ed business income	Exclud	ded by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction arcome
å	- <del> </del> -		+ +		
b	-				
<u> </u>		***	╂╌┤		
d			<del>   </del>		<del></del>
e	-		+		
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			14	278,980.	
5 Net rental income or (loss) from real estate:		, 250 260 260	,	\(\)\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	***. ******
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			18	57.	
8 Gain or (loss) from sales of assets other			1 1		
than inventory			18	398,830.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
8	-				
b	_				
C	I I	<u></u>	+		
d	-		+	1	<del></del>
e	-	0.	+	677,867.	0.
12 Subtotal. Add columns (b), (d), and (e)		<u> </u>	1	13	
13 Total. Add line 12, columns (b), (d), and (e)				13	0//,00/.
(See worksheet in line 13 instructions to verify calculations.)			4	D	
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which inc			A contrib	uted importantly to the accon	nplishment of
the foundation's exempt purposes (other that	n by providing fu	nds for such purposes).			
		<del></del>			
					- <del></del> -
				<del></del>	
				<del></del>	
	· · · ·				· <del></del>
					····-
	<del></del>				<del> </del>
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<del>-  </del>		-			
	-	-			
	<u> </u>	-			
	<del></del>			<del></del>	
		<del></del>		·	· · · · · · · · · · · · · · · · · · ·
					· · ·

36560\_\_1

623621 11-23-16

	THE MCGEE FOUNDATION					
Form 990-PF (2016)	C/O BERNARD J. DUFFY, III	44-6006285 P				
1 Did the organization d	lirectly or indirectly engage in any of the following with any other organization	described in section 501(c) of Yes				

		Exempt Organi						
1				e following with any other organization		7	Yes	No
				section 527, relating to political organiza	ations?		'	1
a		sfers from the reporting foundar	ition to a noncharitable ex	kempt organization of:			'	٠٠ <b>٠</b> ا
	(1) C					1a(1)		<del>                                     </del>
		Other assets				1 <u>a(2)</u>	<del> '</del>	X
þ		r transactions:					ا بعد ا	
		Sales of assets to a noncharitab	· -			1b(1)		X
		Purchases of assets from a non	• •	ization		1b(2)		X
		Rental of facilities, equipment, o				1b(3)	$\overline{}$	X
	٠,	Reimbursement arrangements				1b(4)	-	X
		Loans or loan guarantees				1 <u>b(5)</u>	_	X
		Performance of services or mer				1b(6)	<del> </del> '	X
		ing of facilities, equipment, mai	-		· · · · · · · · · · · · · · · · · · ·	16	'ـــبـٰ	X
đ					ays show the fair market value of the goods, of		ets,	
					in any transaction or sharing arrangement, sl	now in		
- 1,		nn (d) the value of the goods, o			141 a series transactions and			
a)L	Line no	(b) Amount involved	<del> </del>	ncharitable exempt organization	(d) Description of transfers, transactions, and s	sharing and	angeme	nts
	'	<b></b>	<del> </del>	N/A	<del></del>			
		<b></b>	<del> </del>		<del> </del>			
	'	<b></b>	<del> </del>		<del></del>	——		
	'	<b></b>	<del></del>		<del></del>			
		<b></b>	<del> </del>		<del></del>			
		<del> </del>	<del> </del>		<del></del>			
_		<del> </del>	<del></del>		+			
—		<del> </del>	<del></del>		<del></del>			
_		<del> </del>	<b></b>		<del> </del>			
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_		<del> </del>	<del></del>		<del></del>			
—		<b>↓</b> '	<del> </del>		<del></del>			
—		<del> </del>	<del></del>		<del>+</del>			
_		<del> </del>	<del></del>		<del> </del>			
_		<del></del>	<del></del>		<del></del>			
<u> </u>		1 11 distribution indicate	" "Stated with or role	· · · · · · · · · · · · · · · · · · ·				
2a		•	•	ted to, one or more tax-exempt organiza	Mions described	Yes	<u> </u>	No.
		ection 501(c) of the Code (other		OF IN SECTION 521	L	163	43	<u>.</u> Nu
D	II TE	es," complete the following scho (a) Name of org		(b) Type of organization	(c) Description of relations	chin		
	——	N/A	Janization	(6) 1) 10 5. 5. 9.	(6)	ипр		
		11/A						
			<del></del>					
				<del></del>				
				<del></del>				
_	$\overline{}$	Under nenalties of persury, I declare	that I have examined this retu	rn, including accompanying schedules and state	tements, and to the best of my knowledge		_	
	ign   i ere	and belief, it is true, correct, and com	mplete Declaration of preparer	or (other than taxpayer) is based on all information	on of which preparer has any knowledge retished	lay the IRS of sturn with the nown below	he prepare v (see inst	rer

		(a) Name of organization		(b) Type of organization		(c) Description of r	<u>elationship</u>
		N/A					
			<u>.                                    </u>				
					<b>↓</b>		<del></del>
					<u> </u>	_ <del></del>	
Sign Here	and be	penalties of perjury, I declare that I have examinated, it is true, correct, and complete. Declaration			ition of which preparer	has any knowledge	May the IRS discuss this- return with the preparer shown below (see instr.)?  X Yes No
Paid	`.	Print/Type preparer's name  MICHELLE BROWN	Preparer's s		3/6/17	Check if self- employed	PTIN P00225262
Prepa Use (		Firm's name ► CBIZ MHM,	LLC			Firm's EIN ► 3	4-1874260
		Firm's address ► 700 WEST	47TH STR	ERT, SUITE 1	100		

Form **990-PF** (2016)

Phone no. 816-945-5500

KANSAS CITY, MO 64112

Account Name: The McGee Foundation

Account Number: 142538 Statement Period: Dec. 1 - Dec. 31, 2016

Page 6 of 13

Statement of Investment Position (continued)	ontinued)						•	
		Cost Basis	.ea	Market Value	lue Lee		Estimated	
-	Symbol					Unrealized	Annual Yield	
Units Description	Cusip	ë.	Total	Unit	Total	Gain / (Loss)	Income %	
Money Markets & Cash (continued)					7,000			
Cash								
0 Cash		0.00	0.00	1,00	0.00		0	
Total Cash			0.00		0.00	0.00	0	
Total Money Markets and Cash			242,254.47		242,254,47	00'0	916	
Account Total		1	11,198,371.99	15,	15,263,775.97	4,065,403.98	275,705	

<u>;</u>†.

C/0	BERNARD	J.	DUFFY,	III

3 Grants and Contributions Paid During the Y	T		<del></del>	<del> </del>
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Hambana dedicasa (nama ar adamasa)	or substantial contributor	recipient		<u> </u>
EL CENTRO INC			OPERATING SUPPORT	
650 MINNESOTA AVENUE				
KANSAS CITY, KS 66101				22,000
FIRST CALL ALCOHOL DRUG PREVENTION &			PROGRAM SUPPORT	
RECOVERY			TROGRAM SOFFORT	
9091 STATE LINE ROAD	1		ľ	
KANSAS CITY, MO 64114	}			5,000
				· · · · · · · · · · · · · · · · · · ·
GUADALUPE CENTER INC.	1		PROGRAM SUPPORT	ļ
1015 AVENIDA CESAR E CHAVEZ				
KANSAS CITY, MO 64108				15,000
	į į			
JOURNEY TO NEW LIFE INC.	]		PROGRAM SUPPORT	
3120 TROOST AVENUE				
KANSAS CITY, MO 64109				20,000
KANSAS CITY COMMUNITY GARDENS, INC.			PROGRAM SUPPORT	
6917 KENSINGTON				
KANSAS CITY, MO 64132	<del></del>		· · · · · · · · · · · · · · · · · · ·	6,000
LITTLE BROTHERS OF THE LAMB			OPERATING SUPPORT	
801 VERMONT AVENUE			1	
KANSAS CITY, MO 66101		<del></del>		25,000
LITTLE SISTERS OF THE POOR			OPERATING SUPPORT	
8745 JAMES A REED ROAD				
KANSAS CITY, MO 64138			<del>-</del>	50,000
MERCEDERIAN MISSIONARIES OF BERRIZ			OPERATING SUPPORT	!
2115 MATURANA DR				
LIBERTY, MO 64068	<del> </del>		<del>                                     </del>	49,820.
METROPOLITAN ORGANIZATION TO COUNTER			PROGRAM SUPPORT	
SEXUAL ASSAULT				
3100 BROADWAY, SUITE 400	[·			
KANSAS CITY, MO 64154	<u> </u>			9,380.
			DDDD ATM	
NEWHOUSE INC. PO BOX 240019			OPERATING SUPPORT	
KANSAS CITY, MO 64124				25,000.
Total from continuation sheets				572,200.

3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	- Contribution	
PERATION BREAKTHROUGH INC			PROGRAM SUPPORT	
3039 TROOST AVENUE				
CANSAS CITY, MO 64109				30,00
REDEMPTORIST SOCIAL SERVICES CENTER,			PROGRAM SUPPORT	
INC.				
207 WEST LINWOOD				
KANSAS CITY, MO 64111				40,000
	:			
RESTART, INC			PROGRAM SUPPORT	
918 E. 9TH STREET				
KANSAS CITY, MO 64106	·	<del> </del>		15,000
ROCKHURST HIGH SCHOOL	]		SCHOLARSHIPS	
9301 STATE LINE ROAD				
KANSAS CITY, MO 64114				50,000
ROCKHURST UNIVERSITY			OPERATING SUPPORT	
1100 ROCKHURST ROAD				50.000
KANSAS CITY, MO 64110				50,000
ROSE BROOKS CENTER			PROGRAM SUPPORT	
P.O. BOX 320599			PROGRAM SOFFORT	
KANSAS CITY, MO 64132				15,000
SAMUEL U. RODGERS HEALTH CENTER, INC.			PROGRAM SUPPORT	
825 EUCLID AVENUE				20.000
KANSAS CITY, MO 64124				20,000
SETON CENTER, INC. 2816 E 23RD STREET			PROGRAM SUPPORT	
KANSAS CITY, MO 64127				30,000
,				
SHEFFIELD PLACE			PROGRAM SUPPORT	
6604 EAST 12TH STREET				
KANSAS CITY, MO 64126				15,000
SHEPHERDS CENTER			PROGRAM SUPPORT	
5200 OAK ST.				
KANSAS CITY, MO 64112	1		1	10,000

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient ST. TERESA'S ACADEMY PROGRAM SUPPORT 5600 MAIN ST. KANSAS CITY, MO 64113 50,000. SYNERGY SERVICES, INC. PROGRAM SUPPORT 400 EAST 6TH STREET PARKVILLE, MO 64152 20,000. Total from continuation sheets

FORM 990-PF DI	IVIDENDS	AND INT	EREST	FROM SECU	RITIES S	STATEMENT 1
GROSS GA		CAPITA GAINA DIVIDE	S REVENUE		(B) NET INVEST- MENT INCOME	
STOCK DIVIDENDS	278,980.		0.	278,980	. 278,980.	
TO PART I, LINE 4	278,980.		0.	278,980	278,980.	
FORM 990-PF		OTHER	INCO	ME		STATEMENT 2
DESCRIPTION			RE		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
LITIGATION PROCEEDS		•		57.	57.	
		-				
TOTAL TO FORM 990-PF, I	PART I,	LINE 11		57.	57.	
TOTAL TO FORM 990-PF, I	PART I,	LINE 11	TING			STATEMENT 3
		:	NE			(D)
FORM 990-PF		ACCOUN (A) EXPENSES	NE S ME	FEES (B) T INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FORM 990-PF  DESCRIPTION		ACCOUN  (A)  EXPENSES PER BOOK	NE S ME	FEES  (B) T INVEST- ENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE
FORM 990-PF  DESCRIPTION  ACCOUNTING FEES		ACCOUN  (A)  EXPENSES PER BOOK  10,40	NE S ME	FEES (B) T INVEST- ENT INCOME 1,560.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 8,842.
FORM 990-PF  DESCRIPTION  ACCOUNTING FEES  TO FORM 990-PF, PG 1, 1	LN 16B	ACCOUN  (A)  EXPENSES PER BOOK  10,40  T  (A)	NES ME	FEES  (B) T INVEST- ENT INCOME  1,560.  1,560.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  8,842.  8,842.  STATEMENT 4  (D)
FORM 990-PF  DESCRIPTION  ACCOUNTING FEES  TO FORM 990-PF, PG 1, 1	LN 16B	ACCOUN  (A)  EXPENSES PER BOOK  10,40  T  (A)	NES MES	FEES  (B) T INVEST- ENT INCOME  1,560.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  8,842.  8,842.  STATEMENT 4  (D)
FORM 990-PF  DESCRIPTION  ACCOUNTING FEES  TO FORM 990-PF, PG 1, 1	LN 16B	ACCOUN  (A)  EXPENSES PER BOOK  10,40  T  (A)  EXPENSES	NES MES	(B) T INVEST- T INCOME 1,560.  1,560.	(C) ADJUSTED NET INCOME  (C) ADJUSTED ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  8,842  8,842  STATEMENT 4  (D) CHARITABLE

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
MISCELLANEOUS CUSTODIAL FEES CONTRACT ADMINISTRATION FEES	2,223. 11,476. 28,000.	11,	333. ,476. ,200.		1,890. 0. 23,800.	
TO FORM 990-PF, PG 1, LN 23	41,699.	16,009.			25,690.	
FORM 990-PF DESCRIPTION	CORPORAT	E STOCK	воо	K VALUE	STATEMENT 6 FAIR MARKET VALUE	
	CHED		7	,873,782.	11,992,183.	
TOTAL TO FORM 990-PF, PART II	, LINE 10B		7	,873,782.	11,992,183.	
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT 7	
DESCRIPTION		LUATION ETHOD	B00	K VALUE	FAIR MARKET VALUE	
FIXED INCOME INVESTMENTS - SE ATTAHCED	E	COST	3	,082,335.	3,029,338.	
TOTAL TO FORM 990-PF, PART II	, LINE 13		3	,082,335.	3,029,338.	
FORM 990-PF	OTHER	ASSETS			STATEMENT 8	
DESCRIPTION		NING OF K VALUE		OF YEAR K VALUE	FAIR MARKET VALUE	
FEDERAL EXCISE TAX RECEIVABLE (NET OF ESTIMATES PAID)	:	3,357.		0.	0.	

3,357.

TO FORM 990-PF, PART II, LINE 15

## THE MCGEE FOUNDATION C/O BERNARD J. DUFF

44-6006285

FORM 990-PF	OTHER LIABILITIES		STATEMENT 9
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
ACCRUED FEDERAL EXCISE TAX		0.	762.
TOTAL TO FORM 990-PF, PART II,	LINE 22	0.	762.

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI	RECTORS SERS	STAT	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
THOMAS R. MCGEE, JR.	VICE PRESIDENT		0.	
KANSAS CITY, MO 64112	0.00	0.	0.	0.
SIMON P. MCGEE	PRESIDENT	0	0	
KANSAS CITY, MO 64163	0.00	0.	0.	0.
SHEILA M. LILLIS	SECRETARY	•	•	•
GLADSTONE, MO 64118	0.00	0.	0.	0.
VIRGINIA L. COPPINGER	DIRECTOR	•		
KANSAS CITY, MO 64113	0.00	0.	0.	0.
JOHN R. MCGEE	DIRECTOR	•		
KANSAS CITY, MO 64108	0.00	0.	0.	0.
BERNARD J. DUFFY III	TREASURER	•	•	
KANSAS CITY, MO 64113	0.00	0.	0.	0.
CLYDE WENDEL	DIRECTOR	•	•	•
KANSAS CITY, MO 64112	0.00	0.	0.	0.
MOLLY MCGEE	DIRECTOR	0	٥	•
KANSAS CITY, MO 64113	0.00		0.	
STEPHEN REINTJES	DIRECTOR	^	•	^
NORTH KANSAS CITY, MO 64116	0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 11

#### ACTIVITY ONE

FOOTNOTE 1 - PAGE 7, PART IX-1 - SUMMARY OF DIRECT CHARITABLE ACTIVITIES
TOTAL GRANTS PAID DURING THE YEAR EQUALED \$698,400 AND WENT TO MANY DIFFERENT ORGANIZATIONS. SEE THE ATTACHED STATEMENT. TOTAL EXPENSES RELATED TO GRANTS AND PROGRAM RELATED INVESTMENTS TOTALED \$34,532.

THIS AMOUNT INCLUDES \$8,843 IN PROFESSIONAL FEES, \$23,800 IN CONTRACT ADMINISTRATION FEES & \$1,889 IN MISCELLANEOUS EXPENSES. ALLOCATION BETWEEN INVESTMENT & CHARITABLE PURPOSE IS BASED ON THE APPROXIMATE TIME SPENT ON GRANTS & PROGRAM INVESTMENTS. IF NO ALLOCATION IS POSSIBLE, EXPENSES ARE SPLIT 15% TO INVESTMENTS AND 85% TO GRANT COSTS.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 1

34,532.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MR. MATTHER FULLER 1055 BROADWAY, SUITE 130 KANSAS CITY, MO 64105

TELEPHONE NUMBER

816-627-3420

#### FORM AND CONTENT OF APPLICATIONS

REQUESTS SHOULD BE PRESENTED IN A ONE OR TWO PAGE LETTER DESCRIBING THE NEED, PURPOSE, PROGRAM OF THE REQUESTING ORGANIZATION, PROOF OF THE ORGANIZATION'S TAX-EXEMPT ELIGIBILITY FOR CHARITABLE CONTRIBUTIONS, AS WELL AS THE AMOUNT SOUGHT AND WHEN NEEDED.

#### ANY SUBMISSION DEADLINES

THERE ARE NO SUBMISSION DEADLINES: REQUESTS ARE ACCEPTED THROUGHOUT THE YEAR.

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION GENERALLY DOES NOT FUND INSTITUTIONS OR PROGRAMS OUTSIDE THE GREATER METROPOLITAN KANSAS CITY AREA. THE FOUNDATION DOES NOT MAKE CONTRIBUTIONS TO PRIVATE FOUNDATIONS OR TO ORGANIZATIONS CLASSIFIED AS PRIVATE FOUNDATIONS AND, WITH RARE EXCEPTION, THE FOUNDATION DOES NOT FUND INSTITUTIONS OF PROGRAMS IN THE VISUAL AND PERFORMING ARTS OR PROJECTS FOR THE PRESERVATION OF HISTORIC PLACES. WITH THE EXCEPTION FOR APPLIED RESEARCH, THE FOUNDATION DOES NOT FUND SCHOLARLY RESEARCH PROJECTS AND PROGRAMS.