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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

2016

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

1711011	101011	Piniorniauon about Form 990-FF and its se				Оттооорт	
<u>For</u>	calen	dar year 2016 or tax year beginning	, 2016	i, and			, 20
Na	me of fou	undation			A Employer	identification number	Ī
		THAN M SMITH FOUNDATION				48-1224115	
Nu	mber and	d street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephone	e number (see instruction	ons)
630	6302 SW 48TH LANE					785-554-4285	
Cit	y or towr	n, state or province, country, and ZIP or foreign postal code			C If exempti	on application is pendi	ng, check here ▶ 🗌
то	PEKA.	KS 66610					
			of a former public	charity	D 1. Foreign	organizations, check h	nere ▶ 🔲
		☐ Final return ☐ Amended	return		2 Foreign	organizations meeting	the 85% test
		Address change	nge			nere and attach compu	
H	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation			oundation status was t	
		n 4947(a)(1) nonexempt charitable trust		lation	section 50	07(b)(1)(A), check here	▶⊔
		arket value of all assets at J Accounting method	: 🗹 Cash 🔲 A	ccrual	F If the four	ndation is in a 60-month	termination
-		year (from Part II, col. (c),				tion 507(b)(1)(B), check	
	line 16		on cash basis.)				
Р	art I						(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment ncome	(c) Adjusted net income	for chantable purposes
		the amounts in column (a) (see instructions).)	books	"			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	540	. 4	·		
	2	Check ► ☐ if the foundation is not required to attach Sch. B	1 1 1 1 1 1 1 1			* 1 - 2 2 2 2	9 5 14
	3	Interest on savings and temporary cash investments	***	 	13		7 2 10
	4	Dividends and interest from securities		l			75.0
	5a	Gross rents		<u> </u>			The same of the sa
	b	Net rental income or (loss)		1 3.4	3, 10, 13	124 7 2 2	7 7 7
4		Net gain or (loss) from sale of assets not on line 10	* * * * * * * * * * * * * * * * * * * *		W	La transfer Mark	3 ×2 ×25 , 12 3
Revenue	6a	• • • • • • • • • • • • • • • • • • •	The same of the sa		, X		
ě	b	Gross sales price for all assets on line 6a		<u> </u>	. , , , , , , , , , , , , , , , , , , ,		- W
چ	7	Capital gain net income (from Part IV, line 2)	A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	- 3, &	¥ 1	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
2	8	Net short-term capital gain		7 4 7 T	· · · · · · · · · · · · · · · · · · ·		The state of the s
_	9	Income modifications	1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	, 45 pm			
֭֡֝֟֝֟֝֟֝	10a	Gross sales less returns and allowances	The state of the s	7		The second	
-	b	Less: Cost of goods sold	12 3 ch 8	1 1	4. 7 4.4		
د آ	C	Gross profit or (loss) (attach schedule)		ء دعة فرسره			7-
Z	11	Other income (attach schedule)		-			
<u>-</u> _	12	Total. Add lines 1 through 11	540	 	0	0	
ير اير	13	Compensation of officers, directors, trustees, etc.		ļ	<u> </u>		
SC enses	14	Other employee salaries and wages					
ĕ	15	Pension plans, employee benefits					
EXP	16a	Legal fees (attach state of the legal fees (attach state of th		<u> </u>			
٥		Accounting fees (attach schedule)	500	 			500
Ş	C	Other professional fees (attach schedule)		ļ			
크	17	Interest . O WIAI. A. J. LOT		 			
<u>Jis</u>	18	Taxes (attach schedule) (see instructions)	40				40
Ē	19	Depreciation attach schedule and depletion	4800		4800	4800	
ğ	20	Occupancy		<u> </u>			
P	21	Travel, conferences, and meetings		 			
a	22	Printing and publications		<u> </u>			
ğ	23	Other expenses (attach schedule)		ļ		_	
草	24	Total operating and administrative expenses.					
Operating and Administrative		Add lines 13 through 23	5340	1 1	4800	4800	540
ğ	25	Contributions, gifts, grants paid	8215		<u> </u>	5 5 6	8215
	26	Total expenses and disbursements. Add lines 24 and 25	13555	ļ	4800	4800	8755
	27	Subtract line 26 from line 12:					Profession of the second
	а	Excess of revenue over expenses and disbursements	-13015				, , ,
	b	Net investment income (if negative, enter -0-)	. ,		-4800		<u>, , , , , , , , , , , , , , , , , , , </u>
	C	Adjusted net income (if negative, enter -0-)	1, 1			-4800	



Рa	rt II	Balance Sheets Attached schedules and amounts in the description column		End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	` 1	Cash—non-interest-bearing	11652	22325	22325
	2	Savings and temporary cash investments	94355	75467	75467
	3	Accounts receivable ►	-		
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		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 ▶			
छ	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)			
	C	Investments—corporate bonds (attach schedule)			
	11	· · · · · · · · · · · · · · · · · · ·			
	•••	Investments —land, buildings, and equipment: basis ► 24000 Less: accumulated depreciation (attach schedule) ► 16800	12000		7200
	12	Investments—mortgage loans	12000	1200	7200
	13	Investments—other (attach schedule)			
	14	Lond buildings, and equipments begin		Typin Page 4 of the State	
	1-4	Land, buildings, and equipment: basis		- 1 - war war of the said of	<u> - 12-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-</u>
	15	Less: accumulated depreciation (attach schedule) ▶			
	16	Other assets (describe >) Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)			
	17		118007	104992	104992
		Accounts payable and accrued expenses	<u> </u>		
es	18	Grants payable			
Liabilities	19	Deferred revenue	— <u></u>	- ·. ··	The second
idi	20	Loans from officers, directors, trustees, and other disqualified persons			
Li	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)			
S.		Foundations that follow SFAS 117, check here >			
alances		and complete lines 24 through 26 and lines 30 and 31.			
lar	24	Unrestricted			
Ba	25	Temporarily restricted			
Ð	26	Permanently restricted			The state of
֓֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞֞		Foundations that do not follow SFAS 117, check here ►			
Net Assets or Fund Ba		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
158	29	Retained earnings, accumulated income, endowment, or other funds	118007	104992	
,t /	30	Total net assets or fund balances (see instructions)			*
2	31	Total liabilities and net assets/fund balances (see			
		instructions)	118007	104992	· · · · · · · · · · · · · · · · · · ·
	rt III	Analysis of Changes in Net Assets or Fund Balances		,	
1		I net assets or fund balances at beginning of year—Part II, colu		- j	
		of-year figure reported on prior year's return)		<u> </u>	118007
2		r amount from Part I, line 27a			-13015
3					
4		lines 1, 2, and 3			104992
5	Deci	reases not included in line 2 (itemize) ▶		5	
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30 6	104992

Part	IV Capital Gains an	d Losses for Tax on Investme	ent Income				
		ne kind(s) of property sold (e.g., real estate, use, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date (mo , d		(d) Date sold (mo., day, yr.)
<u>1a</u>							
b							
<u>c</u>				<u> </u>			
<u>d</u>				-			
<u> e </u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	r other basis ense of sale			n or (loss) f) minus (g)
a							
<u>b</u>				· -			
<u> </u>	: 			_ 			
<u>d</u>					ļ. <u>. </u>		
<u>e</u>	Complete only for accets ab	outing gain in column (h) and award h	, the foundation	on 19/21/60			
	(i) F M.V. as of 12/31/69	owing gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i) 1. (j), if any		. (k), but no	l. (h) gain minus t less than -0-) or rom col (h))
a							
<u></u>	<u> </u>						
C							
d							
е							
2	Capital gain net income of		so enter in Pa enter -0- in Pa		2		
3	If gain, also enter in Part	in or (loss) as defined in sections 1 t I, line 8, column (c) (see instruct	ions). If (loss), enter -0- in \			•
		<u> </u>			3		
Part		der Section 4940(e) for Reductivate foundations subject to the se					
Was t		ve this part blank. e section 4942 tax on the distributa t qualify under section 4940(e). Do			base peri	od?	☐ Yes ☐ No
1		ount in each column for each year			aking any	entries.	····
Cal	(a) Base penod years endar year (or tax year beginning ii	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use a	ssets		(d) tribution ratio divided by col. (c))
	2015	11	361	1(03444		10.98
	2014	13	462	11	17069		11.50
	2013	9	779	13	36215	·	7.18
	2012	15	637	15	55740		10.04
	2011		909	1	59849		6.82
2 3	Total of line 1, column (d	i)			the 2	 	46.52
	number of years the foun	dation has been in existence if les	s than 5 years		. 3	 	9.30
4	Enter the net value of nor	ncharitable-use assets for 2016 fro	m Part X, line	5	. 4		93986
5	Multiply line 4 by line 3				. 5	-	8741
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	 	
7	Add lines 5 and 6				. 7	-	8741
8		ons from Part XII, line 4					8755
	Part VI instructions.	ator than into 1, theta the box III	. a * 1, 11110 11	o, and complete	wat part	Joniy a 1	v tax rate. Gee the

Part '	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstruction	ns)	
1a	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		00	
_	here and enter 1% of Part I, line 27b		1	
С	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-)		 	
3	Add lines 1 and 2		00	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		00	
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		00	
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a	•		
b	Exempt foreign organizations—tax withheld at source 6b			
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		1	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
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 overpaid 10			
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11		00	
	VII-A Statements Regarding Activities	TV	Las	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a	+	
U	Instructions for the definition)?	1b	1	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	13 1 2	7 E 8" B	
	published or distributed by the foundation in connection with the activities.		7 .	
С	Did the foundation file Form 1120-POL for this year?	1c	1	
d		1	1 4 YPF	
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$		1 5 5	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$		-1, m	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
3				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1	
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 during the year?	5	V	
	If "Yes," attach the statement required by General Instruction T.	6 i	1.6.	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or	*		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6 /	4	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 ~	+	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	4,3	1 . (2)	
р	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b 🗸	4	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	OD V	. 5 - 1	
ð	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"		التقتا	
	complete Part XIV	9	1	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		
		ן וט ן	1 -	

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		>
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	V	
	Website address ▶			
14	The books are in care of ► THE JONATHAN M SMITH FOUNDATION Telephone no. ► 78	5-554-	4285	
	Located at ► 6302 SW 48TH LANE, TOPEKA, KS ZIP+4 ►	6661	0	
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		, l	▶ □
16	At any time during calendar year 2016, 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	L	~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	ľ	. 1	
Doub		<u> </u>		
Part	Statements Regarding Activities for Which Form 4720 May Be Required	,	Yes	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly):	 -	103	7
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No	. ;	· 3. 2	,
	(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 No	\	, 77	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		<i>[</i> 6.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		1	
	the benefit or use of a disqualified person)?	The second		15.55
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1.	5.4	w.z 4,
	foundation agreed to make a grant to or to employ the official for a period after		À. 8.	- 4
	termination of government service, if terminating within 90 days.)		4	1 2 35
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	, W ,	·
	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 2016?	1c		~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1	ñ	i Kin
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	. ""		
	6e, Part XIII) for tax year(s) beginning before 2016?		4	1
	If "Yes," list the years ▶ 20, 20, 20, 20	i in		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	a G	44	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			31
	all years listed, answer "No" and attach statement—see instructions.)	2b	 , _	70.00
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	·		; ,
За	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
ya.	at any time during the year?	, .	i, 1	1
		'.'	. *	6
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	1.	,,	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	ļ.	ļ.' `] :]
	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 2016.)	3b		-
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		V
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-,		15,
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		~

Page	6

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 N	May Be R	equire	d (contir	nued)			
5a	(1) Carry (2) Influer	e year did the foundation pay or incur a on propaganda, or otherwise attempt to nce the outcome of any specific public y or indirectly, any voter registration dri	o influe election	nce legislatio	on 495	5); or to ca	irry on,	☐ Yes	☑ No ☑ No			
	(3) Provid (4) Provid	le a grant to an individual for travel, stu- le a grant to an organization other than n 4945(d)(4)(A)? (see instructions)	dy, or c	other similar pritable, etc., o	ourpose organiza	es? ation desci	 ribed in	☐ Yes	☑ No			
		le for any purpose other than religious, ses, or for the prevention of cruelty to c						□Yes	_ ☑ No		* '1	
b		wer is "Yes" to 5a(1)-(5), did any of the as section 53.4945 or in a current notice							ibed in	5b		
	Organizat	ions relying on a current notice regardir	ng disa	ster assistan	ce chec	k here .			▶ □			
С	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?								,	2		
6a								,	· ` ,			
	•							Yes	✓ No			أنن
	If "Yes" to	undation, during the year, pay premium o 6b, file Form 8870.						_		6b	7/ 3	*
_		e during the tax year, was the foundation a						Yes	☑ No		1	لتتعنف
b		did the foundation receive any proceeds								7b		
		nformation About Officers, Directed Contractors								mploy 	ees,	
1	LIST All OT	ficers, directors, trustees, foundation										
		(a) Name and address	hou	e, and average rs per week ed to position	``(If n	npensation ot paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expe	nse acc allowan	
IARO	LD W AND	DEBORAH S SMITH										
		NE, TOPEKA, KS 66610	DIREC	TOR		0			0			0
VANC.	Y AND CRA	IG BROWN										
		E DR, TOPEKA, KS 66512	DIREC	TOR		0			0			0
OHN	MOYER	***************************************										
029 S	W 26TH ST	, TOPEKA, KS 66614	DIREC	TOR		0			0	<u></u>		0
2	Compens	sation of five highest-paid employee	es (oth	er than thos	se inclu	uded on li	ne 1—:	see instr	uction	s). If n	one,	enter
	(a) Name and	address of each employee paid more than \$50,00	10	(b) Title, and a hours per v devoted to p	/eek ¯	(c) Compe		(d) Contribution of the compensation (d) Contribution (d)	benefit deferred	(e) Expe	ense acc allowan	count,
NONE				<u> </u>								
									,			
						·						
				<u> </u>						.		
<u>rotal</u>	number of	other employees paid over \$50,000 .			<u> </u>			<u> </u>	<u>. ▶</u>	<u></u>		

Pa	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE	, n
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
_		
Tota	Il number of others receiving over \$50,000 for professional services	<u></u>
Pa	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	FARM HOUSE CHURCH	

		5020
2	VARIOUS OUTREACH ACTIVITIES OF ASSEMBLIES OF GOD CHURCHES, ROYAL FAMILY KIDS CAMP,	
	MISSONETTS, HOME MISSIONS	004
3	LIFE POINT CHURCH	234
_		
		100
4	YOUTH FOR CHRIST	
Do	t IV P. Summons of Brognore Boleted Inscotnents (see instructions)	750
	rt IX-B Summary of Program-Related Investments (see instructions) escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
- 1	source and the language program return and the manual styling and tack your on miles 1 and 2.	
·		
2		
A	I other program-related investments See instructions.	
3		
<u></u>	1 Addition of the court O	
100	al. Add lines 1 through 3	

Form **990-PF** (2016)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	ations,
	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	1a	
b	Average of monthly cash balances	1b	19950
c	Fair market value of all other assets (see instructions)	1c	75467
d	Total (add lines 1a, b, and c)	1d	95417
ē	Reduction claimed for blockage or other factors reported on lines 1a and		30 717
_	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	00
3	Subtract line 2 from line 1d	3	95417
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1431
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	93986
6	Minimum investment return. Enter 5% of line 5	6	4699
Part		oundation	
	and certain foreign organizations check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	4699
2a	Tax on investment income for 2016 from Part VI, line 5	1, 1,	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4699
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4699
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	4699
David			
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	8755
b	Program-related investments—total from Part IX-B	1b	00
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:	7	
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	8755
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8755
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	·	
		Гоч	m QQA-DF (2016)

Part.	XIII Undistributed Incom	e (see instruction	ons)	<u> </u>		
1	Distributable amount for 2016	6 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7			23-23-20-50-00		4699
2	Undistributed income, if any, as of	the end of 2016:				HATCH ATA
а	Enter amount for 2015 only .					LOCAL COMMO
b	Total for prior years: 20,20	0,20	顯式小風神影光照		理學的問題的學可	表表表示。
3	Excess distributions carryover,	ıf any, to 2016 [.]			CALEDON C	
а	From 2011	2917				
b	From 2012	7850				
C	From 2013	2984				
đ	From 2014	7609 6189				
e 4	Total of lines 3a through e	6189	07540			
4	Qualifying distributions for 201	6 from Part XII	27549	THE THREE TORK	N. THERMAN AND A	· · · · · · · · · · · · · · · · · · ·
•	line 4: ► \$	o nom ran An,				
а	Applied to 2015, but not more t	than line 2a				
b	Applied to undistributed incom			Machine and Harman Machine Control of the Control		
	(Election required—see instruct					
С	Treated as distributions out of o	corpus (Election			NOT THE PLANT	The state of the s
	required—see instructions) .					
d	Applied to 2016 distributable ar	mount	ME CANADA COM	THE SERVICE OF	THE CALL STREET	
е	Remaining amount distributed of	•	1139	新 野、北京	3. 常味学到每5	克斯特。特斯斯
5	Excess distributions carryover a	• •	to which a party to an instantially, in the foreign of the			Like his reductive care is a size in the second
	(If an amount appears in colum					
e	amount must be shown in colur Enter, the net total of each					
6	indicated below:	n column as				
а	Corpus Add lines 3f, 4c, and 4e.	Subtract line 5			Service and the	
b	Prior years' undistributed inc		TAKUSA MARANGA NE	THE PERSON NAMED IN THE PE		ALL RESIDENCE AND
	line 4b from line 2b					
С	Enter the amount of prior years	s' undistributed				
	income for which a notice of					
	been issued, or on which the	, ,				
	tax has been previously assess		等待(3) 整理		TO THE MARKET SERVICE	Mary Andrews
d	Subtract line 6c from line	6b. Taxable				
	amount—see instructions .			1.24544 mg 16-00-1600 _ 5	が対象を対象を	The second second
е	Undistributed income for 2015 4a from line 2a. Taxable					
	instructions	amount—see				
f	Undistributed income for 2016	Subtract lines		THE STATE OF THE S		大台 水石油医丁油 医水子丁二乙二烷 经经济股份 电电
•	4d and 5 from line 1. This ar					
	distributed in 2017					
7	Amounts treated as distribution	ns out of corpus			经上海 的	STATE OF STATE OF
	to satisfy requirements impos	sed by section				A CONTRACTOR
	170(b)(1)(F) or 4942(g)(3) (Ele					
	required—see instructions) .					
8	Excess distributions carryover					
^	applied on line 5 or line 7 (see ii			MANAGE AND		COLUMN TO A MARKET
9	Excess distributions carryon Subtract lines 7 and 8 from line		*****			
10	Analysis of line 9.		28688	Y 4000 C. AND AND THE SERVICE	THE RESIDENCE OF THE PARTY OF T	AND THE PARTY OF T
10 a	Excess from 2012	7850				
b	Excess from 2013	2984				
c	Excess from 2014	7609				
d	Excess from 2015	6189				
е	Excess from 2016 .	4056				

Page	1	1
Page		٩

Form	990-PF	(2016)
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Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A. question 9)	
1a						
	foundation, and the ruling is effective for	2016, enter the da	ate of the ruling .			
b	Check box to indicate whether the four		operating foundate		ection 🔲 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	· · · · · · · · · · · · · · · · · · ·
	each year listed			 		
b	85% of line 2a					
•	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	·		<u> </u>		
e	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					
С	"Support" alternative test—enter:			<u> </u>		
	(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)					
	(4) Gross investment income			 		
Part		on (Complete th	is part only if t	he foundation h	ad \$5,000 or me	ore in assets at
	any time during the year-	•				
1	Information Regarding Foundation					
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
	LD W SMITH					·
b	List any managers of the foundation					rge portion of the
A1/A	ownership of a partnership or other e	inty) of which the	iounuation has a	1076 of greater int	51 5 31.	
N/A 2	Information Regarding Contribution	. Grant. Gift. Loa	n Scholarship, e	etc Programs:		
_	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the fother conditions, complete items 2a,	only makes controundation makes	ributions to prese	elected charitable		
а	The name, address, and telephone nu	ımber or e-mail ac	dress of the pers	on to whom applic	ations should be a	ddressed:
N/A_						
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	
С	Any submission deadlines:			<u> </u>	····	
	Any rootrictions or limitations as a	words such as b	v goographical a	ross sheritable #	oldo kindo of !	titutions or other
d	Any restrictions or limitations on av factors:	vards, such as b	y geographical a	reas, charitable in	eias, kinas ot ins	ututions, or other

Part	Supplementary information (conti	inuea)			·
3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
SEE A	TTACHED				
	Total			▶ 3a	8215
b	Approved for future payment				
N/A					
	Total			> 2h	1

ilei 9	ross amounts unless otherwise indicated.	(a)	(b)	Excluded by section (c)	(d)	(e) Related or exemp function income
4 P	ogram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.
a	NONE			 	·	
b	NONE					
C						
d		-		 		
e				†		+
f	•					
g	Fees and contracts from government agencies			1		
_	embership dues and assessments			-		1
	terest on savings and temporary cash investments			 	· · · · · · · · · · · · · · · · · · ·	
	ividends and interest from securities			 	···	
	et rental income or (loss) from real estate:		, , , , ,	 		111111111111111111111111111111111111111
a	Debt-financed property		1	† · · · · · · · · · · · · · · · · · · ·	·	
b						
	et rental income or (loss) from personal property			 		
	ther investment income			 		1
	ain or (loss) from sales of assets other than inventory			 	 	
	et income or (loss) from special events			 		
	ross profit or (loss) from sales of inventory			 		
		ļ				
b	ther revenue: a					
				 		
C			-	 		
d					· · · · · · · · · · · · · · · · · · ·	
e 2 0	hatatal Add actions (b) (d) and (c)	C 01 + 98+4;	 -	The state of the s		
2 3	ubtotal. Add columns (b), (d), and (e)					.
·~ T						
13 T					13	
ee w	orksheet in line 13 instructions to verify calculation	ıs.)			13	
ee w art	orksheet in line 13 instructions to verify calculation KVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	ot Purposes		importantly to th
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3 Tee ward art ine N	orksheet in line 13 instructions to verify calculation KVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) Accomplishm	ent of Exemp	ot Purposes		importantly to thuctions.)
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i3 Tee w Part Line N	orksheet in line 13 instructions to verify calculation KVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	ıs.) Accomplishm	ent of Exemp	ot Purposes		importantly to thuctions.)

Part	XVII		n Regarding Tran ganizations	sfers To and Transac	tions and R	elationshi	ps With Noncha	ritab		90 10
1	in se	ne organization d	lirectly or indirectly e	engage in any of the followection 501(c)(3) organization					Yes	No
а	Trans	sfers from the rep	oorting foundation to	a noncharitable exempt	organization	of:				
	(1) C	ash						1a(1)		~
	(2) O	ther assets .						1a(2)		~
b	Othe	r transactions:								
	(1) S	ales of assets to	a noncharitable exe	mpt organization				1b(1)		V
	(2) P	urchases of asse	ets from a noncharita	ble exempt organization				1b(2)		~
	(3) R	ental of facilities,	, equipment, or other	rassets				1b(3)		~
	(4) R	eimbursement ar	rrangements					1b(4)		V
	(5) L	oans or loan gua	rantees					1b(5)		~
	(6) P	erformance of se	ervices or membersh	ip or fundraising solicitat	ions			1b(6)		V
C	Shari	ng of facilities, e	quipment, mailing lis	ts, other assets, or paid	employees .			1c		~
d	If the	answer to any o	of the above is "Yes	s," complete the following	g schedule. (Column (b) s	should always sho	w the	fair m	arket
	value	of the goods, of	ther assets, or service	ces given by the reporting	g foundation.	If the found	lation received less	s than	fair m	narket
				ement, show in column (c						
(a) Line	ono I	(b) Amount involved	(c) Name of nonch	antable exempt organization	(d) Descri	ption of transfe	rs, transactions, and sh	aring an	angem	ents —
	_	N/A							 ,.	
	-		· · · · · · · · · · · · · · · · · · ·							
			· · · · · · · · · · · · · · · · · · ·							
				······						
									-	
										
						 				
						·				
			·							
2a b	desc	ribed in section 5		iliated with, or related to ther than section 501(c)(3] Ye	s 🗆	No
		(a) Name of organi		(b) Type of organiza	tion		(c) Description of relation	nship		
		.,,								
										
				·						
	Unde	er penalties of periury.	declare that I have examine	d this return, including accompany	ing schedules and	statements and	to the best of my knowle	dge and	helief I	is true
Sign Here	corre	ct, and complete. Declar	aration of preparer (other tha	in taxpayer) is based on all informa	tion of which prepared by the	arer has any kno	Medge May the with the (see instru	IRS disc	uss this shown	return below
	Sign	ature of officer or trus			nue /	T Data	- Lauren	OTIN!		
Paid		Print/Type preparer	ः ।।वाग्रम	Preparer's signature		Date	Check if self-employed	PTIN		
Prep		Firm's no		<u> </u>					-	
Use	Only	Firm's name					Firm's EIN ►			
		Firm's address 🕨					Phone no.			

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, 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.

OMB No 1545-0047

Employer identification number

THE JON	IATHAN M SMITH FOU	48-1224115					
Organiz	zation type (check on	е):					
Filers o	f:	Section:					
Form 990 or 990-EZ		501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private for	undation				
		527 political organization					
Form 99	00-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: O instructi	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.						
Genera	Rule						
V		filing Form 990, 990-EZ, or 990-PF that received, during the year, con r property) from any one contributor. Complete Parts I and II. See inst ontributions.					
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½ % 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.						

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Employer identification number

Part I	Contributors (See instructions). Use duplicate copie	s of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HAROLD W SMITH 6302 SW 48TH LN TOPEKA, KS 66610	\$540 	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

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				
	NONE	\$					
(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				
		\$					
(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				
		\$					

Employer identification number

Part III	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.)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
-		(e) Trans	fer of gift	<u></u>		
-	Transferee's name, address, a	ind ZIP + 4	Relation	nship of transferor to transferee		
1						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
]						
L						
}	(e) Transfer of gift					
1	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			

Ţ						

(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		
	***************************************	*				
L						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
F						
[
Ì						
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held		

T		(e) Trans	fer of gift			
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
ſ						
ŀ						

The Jonathan M. Smith Foundation

2016

48-1224115

PART 1

Questions 1, 16a, 18, and 19

Contributions, gifts, grants, etc re	eceived
Harold Smith 6302 SW 48TH LN Topeka, KS 66610	\$540
16b) Accounting fees	\$500
18) Taxes (990-PF)	
2015 Kansas Annual Return	\$40
Total Taxes	\$40
19)	Column A
Asset Description	1 ATM Machine
Date Purchased	12/07/12
Date In Service	01/01/13
Cost	\$12000
Business Use %	100%
Depreciable Basis	\$12000
Life	5 years
Method of Depreciation	Straitline
Prior Depreciation	\$4800
Depreciation this year	\$2400
Asset Description	1 ATM Machine
Date Purchased	4/22/14
Date In Service	4/22/14
Cost	\$12000
Business Use %	100%
Depreciable Basis	\$12000
Life	5 years
Method of Depreciation	Straitline
Prior Depreciation	\$2400
Depreciation this year	\$2400
Total Depreciation	\$4800

THE JONATHAN M SMITH FOUNDATION RECIPIENT LISTING 2016 48-1224115 PART XV

				Amount
NAME				
Farm House Church	6302 SW 48TH LN	Topeka, KS 66610	Charitable Contribution	\$ 5,020.00
First Assembly Total	500 SW 27th Street	Topeka, KS 66611	Charitable Contribution	\$ 2,345 00
LifePoint Church	400 S Abilene Ave	Valley Center, KS 67147	Charitable Contribution	\$ 100 00
Youth for Christ	2714 NW Topeka Blvd	Topeka, KS 66618	Charitable Contribution	\$ 750.00
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•	-		\$ 8,215.00