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Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491135023097

2016

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

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number JELLISON BENEVOLENT SOCIETY INC 48-6106092 Number and street (or P O box number if mail is not delivered to street address) PO BOX 145 B Telephone number (see instructions) (785) 762-5566 City or town, state or province, country, and ZIP or foreign postal code JUNCTION CITY, KS $\,$ 66441 $\,$ C If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here line 16) \$ 4,500,542 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment Adjusted net for charitable (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 2.433 2.433 2.433 3 Interest on savings and temporary cash investments Dividends and interest from securities 135,045 135,045 135,045 Gross rents b Net rental income or (loss) [چە 19,604 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,229 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 6,974 3,874 6,974 11 142,581 144,452 Total. Add lines 1 through 11 164,056 13 Compensation of officers, directors, trustees, etc 18.000 14 Other employee salaries and wages 689 688 1,377 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 1,200 Accounting fees (attach schedule) 2,400 1,200 9 Other professional fees (attach schedule) 32,385 16,193 16,193 [چە 2,873 2,527 346 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 5,577 2.789 2.788 21 Travel, conferences, and meetings 22 Printing and publications . 23 Other expenses (attach schedule) اروه 8.360 4.180 4,180 Total operating and administrative expenses. 24 Add lines 13 through 23 . . . 70.972 27,578 25,395 165,149 25 Contributions, gifts, grants paid 165,149 26 Total expenses and disbursements. Add lines 24 and 25 236,121 27,578 190,544 27 Subtract line 26 from line 12 Excess of revenue over expenses and -72,065 disbursements 115 003 Net investment income (If negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

| | | Less allowance for doubtful accounts P | | 1 | |
|--------|-----|--|--------|--------|--|
| | 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 ▶ | | | |
| 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) | 44,340 | 40,422 | |
| | ь | Investments—corporate stock (attach schedule) | 74,388 | 74,388 | |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |

42,192 4,188,774

253,220

4,500,542

234,030

365,199

984,799

-619.600

365,199

365,199

437,264

-72,065

365,199

365,199

Form **990-PF** (2016)

1

2

3

4

5

6

984,799

-547,535

437,264

437,264

291,372 13 Investments—other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶ 15 Other assets (describe > __ Total assets (to be completed by all filers—see the 16 437,264 instructions Also, see page 1, item I) 17 18

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Liabilities

Balances

or Fund

Assets 27

Net 30

19

20

21

22 23

24

25

26

28

29

31

Part III

2

Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Yes V No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (a) (d) Distribution ratio

1,229 Base period years Calendar Adjusted qualifying distributions Net value of noncharitable-use assets year (or tax year beginning in) (col (b) divided by col (c)) 2015 193,033 4,191,091 0 046058 2014 186,720 3,973,523 0 046991 2013 184,171 3,845,322 0 047895 2012 188,555 3,673,705 0 051326 2011 183,983 3,601,491 0 051085 2 Total of line 1, column (d) 2 0 243355 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the 3 0 048671 number of years the foundation has been in existence if less than 5 years

4 4,396,074 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 5 Multiply line 4 by line 3 213,961 6 Enter 1% of net investment income (1% of Part I, line 27b) . 6 1,150 7 215,111 8 Enter qualifying distributions from Part XII, line 4 8 190,544

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

Page 3

(d)

Date sold

| ь | Did the foundation, during the year, | рау [| premiums, directly or ind | irectly, on a personal ber | nefit contract? | NO | 6b | | No |
|-----|---|-------|--|---|---|-------|-----------------|------------------|----|
| | If "Yes" to 6b, file Form 8870 | | | | | | | | |
| 7a | At any time during the tax year, was | the | foundation a party to a p | rohibited tax shelter tran | saction? Yes | No | | | |
| ь | If yes, did the foundation receive any | y pro | ceeds or have any net in | come attributable to the | transaction? | | 7b | | |
| Pa | Information About O and Contractors | ffice | ers, Directors, Trust | ees, Foundation Ma | nagers, Highly Paid E | mplo | yees, | | |
| 1 | List all officers, directors, trustee | s, fo | undation managers an | d their compensation | (see instructions). | | | | |
| | (a) Name and address | (E | Title, and average hours per week b) devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | | Expen other | se acc allowa | |
| See | Addıtıonal Data Table | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 2 | Compensation of five highest-paid | d em | ployees (other than th | ose included on line 1 | -see instructions). If no | ne, e | nter " | NONE. | ." |
| Na | (a) ame and address of each employee par more than \$50,000 | ıd | Title, and average hours per week (b) devoted to position | (c) Compensation | Contributions to employee benefit plans and deferred (d) compensation | | Expens other | | |
| NON | E | - | | | | | | | |
| | | | | | | | | | |

| Form 990-PF (2016) Information About Officers, Directors, Trustees, | Foundation Managers, Highly | Page 7 Paid Employees. |
|--|---|--------------------------|
| and Contractors (continued) | . canadas i i anagere, ingini, | Tara Emproyecs, |
| 3 Five highest-paid independent contractors for professional service | es (see instructions). If none, en | ter "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| | | |
| Tatal number of others recover average from the forest and comments | | > |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include rele | evant statistical information such as the nun | nher of |
| organizations and other beneficiaries served, conferences convened, research papers produc | | Expenses |
| 1 | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
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| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see | nstructions) | |
| Describe the two largest program-related investments made by the foundation during the | | Amount |
| 1 N/A | le tax year off filles I and 2 | Amount |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | . ▶ |
| | | Form 990-PF (2016 |

1b

2

За 3b

4

5

190.544

190.544

Form 990-PF (2016)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

income Enter 1% of Part I, line 27b (see instructions).

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

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

b

2

3

4

Page 9

13,201

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

| | air viii | Ollaistiib | uteu |
|---|--------------|---------------|---------|
| | | | |
| | | _ | |
| 1 | Distributabl | e amount for | 2016 |
| 2 | Undistribute | ed income, if | any, as |

| | Distributable amount for 2016 from Part XI, line 7 | |
|---|---|--|
| 2 | Undistributed income, if any, as of the end of 2016 | |

- a Enter amount for 2015 only.
 - Excess distributions carryover, if any, to 2016 6,993
- **b** Total for prior years a From 2011. . . .
- 6.766 **b** From 2012. . . . c From 2013. . . **d** From 2014. . . .
- e From 2015. f Total of lines 3a through e.
- 4 Qualifying distributions for 2016 from Part
- XII, line 4 ▶ \$ a Applied to 2015, but not more than line 2a

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. . **b** Excess from 2013. . c Excess from 2014. . . d Excess from 2015. . e Excess from 2016. .

Subtract lines 7 and 8 from line 6a

indicated below:

b Applied to undistributed income of prior years

same amount must be shown in column (a))

- (Election required—see instructions).
- c Treated as distributions out of corpus (Election required—see instructions).

(a)

Corpus

13,759

(b)

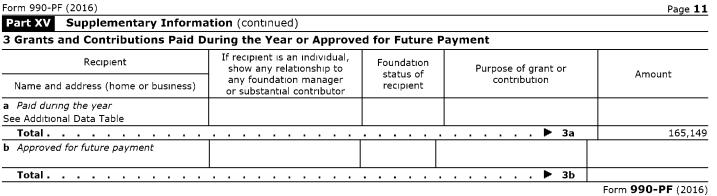
Years prior to 2015

190.544 13,759 13,759

(c)

THE SAME MANNER WITH PREFERENCE BEING GIVEN TO CHARITIES ACTIVE IN GEARY COUNTY, BUT WITH OCCASIONAL GRANTS TO

CHARITABLE ORGANIZATIONS LOCATED OUTSIDE OF GEARY COUNTY



| gross | amounts unless otherwise indicated | Unrelated bus | siness income | Excluded by section | 512, 513, or 514 | (e) Related or exem |
|--|---|--|---------------|-------------------------------------|-------------------|---------------------------------------|
| | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| - | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | + | | |
| | | | | | | |
| | nd contracts from government agencies | | | | | |
| Interes | ship dues and assessments t on savings and temporary cash | | | | | |
| | nents | | | 14 | 2,433 135,045 | |
| | al income or (loss) from real estate | | | 14 | 135,045 | |
| | nanced property | | | | | |
| | bt-financed property | | | | | |
| | ntal income or (loss) from personal property | | | | 2.5 | |
| | vestment income | | | 15 | 3,874 | |
| invento | ory | | | | | 19, |
| | me or (loss) from special events | | | | | |
| iross pi Other re | rofit or (loss) from sales of inventory | | | + | | |
| | DS OF GRANT MONEYS | | | | | 3, |
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| | • | | | | | |
| | | | | | | |
| | | | | | 141 352 | 22. |
| Subtota | Add columns (b), (d), and (e) | | | 13 | 141,352 | · · · · · · · · · · · · · · · · · · · |
| Subtota F otal. A | Add columns (b), (d), and (e). I Add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation | ns) | | | | <u> </u> |
| Subtota Fotal. A worksh | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation Relationship of Activities to th | ^{ns}) e Accomplish ı | ment of Exem | pt Purposes | | 164,0 |
| Subtota Total. A Worksh Total | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Total. A Worksh Total | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which i | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota F otal. A | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Total. A Worksh Total | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Total. A Worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Sotal. A Worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
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| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Sotal. A Worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Sotal. A Worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| Subtota Sotal. A Worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |
| ubtota otal. A worksh t XVI | Add columns (b), (d), and (e). add line 12, columns (b), (d), and (e). eet in line 13 instructions to verify calculation B Relationship of Activities to th Explain below how each activity for which is the accomplishment of the foundation's ex- | ns) e Accomplishi income is reporte | ment of Exem | pt Purposes of Part XVI-A contribut | ed importantly to | 164,0 |

| . , | / | | |
|-----|--|------|--|
| | Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations | able | |
| | | | |

| Par | : XVI | Information Re Exempt Organi | | ansf | ers To a | and Transa | ctio | ns and | Relatio | nships With No | ncharit | able | | |
|--------------|---------|--|------------------|---------|--------------|-------------------------|---------|------------|--------------|-------------------------|--------------|----------------|------------|----------|
| 1 Did | the o | rganization directly or in Code (other than sectio | directly engag | ge in a | any of the | following wit | hany | other or | rganizatio | n described in sect | ion 501 | | Yes | No |
| | | from the reporting foun | | - | • | | | _ | political | organizacions. | | | | |
| | | | | | | | | | | | | 1a(1) | | No |
| (2 |) Othe | er assets | | | | | | | | | | 1a(2) | | No |
| | | nsactions | | | | | | | | | | | | |
| • | • | s of assets to a nonchar | • | _ | | | | | | | | 1b(1) | | No |
| • | - | hases of assets from a r al of facilities, equipmer | | | | | | | | | | 1b(2) 1b(3) | | No No |
| • | • | nbursement arrangemen | • | | | | | · • • | | | | 1b(4) | | No |
| • | • | s or loan guarantees. | | | | | | | · . · . · | | | 1b(5) | | No |
| | | rmance of services or m | | | | | | | | | | 1b(6) | | No |
| c Sh | arıng o | f facilities, equipment, n | naılıng lısts, o | ther a | assets, or | paid employe | es. | | | | | 1c | | No |
| | | wer to any of the above ods, other assets, or ser | | | | | | | | | | | | |
| | | insaction or sharing arra | | | | | | | | | | е | | |
| | s. 1 | | lassi c | | | | | | | | | | | |
| (a) Lin | e No | (b) Amount involved | (c) Name of r | noncna | aritable exe | mpt organizatioi | + | (a) Des | scription of | transfers, transactions | s, and shar | ing arra | ngemen | ts |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| | | indation directly or indire | • | | | • | | | | | Г | ٦., | | |
| | | in section 501(c) of the | • | than : | section 50 | 01(c)(3)) or in | sect | ion 52/7 | | | L | 」 Yes | ✓ N | 0 |
| БП | Yes, c | complete the following si (a) Name of organization | | ı | Ι (| b) Type of orgar | nizatio | n | I | (c) Descriptio | n of relatio | ınshıp | | |
| | | (-, | *** | | | - , .,,, | | | | (-) | | | | |
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| | | | | | | | | | + | | | | | |
| | Unc | ler penalties of perjury, | I declare that | I hav | ve examın | ned this return | , ıncl | uding ac | companvi | ng schedules and s | statement | s, and | to the | best |
| | of r | ny knowledge and belief | , it is true, co | | | | | | | | | | | |
| Sign | · | ch preparer has any kno ***** | wieage | | | 1 2047 05 44 | | | **** | 1 | May the IF | S diccin | ee thie r | oturn |
| Here | | ***** | | | | 2017-05-11 | | _ | **** | | with the p | | | |
| | | Signature of officer or t | rustee | | | Date | | 7 T | itle | | (see ınstr |)? 🗆 🛚 | es 🗆 N | lo |
| | | Print/Type preparer's | name | Prena | arer's Sigi | nature | | Date | | | PTIN | | | |
| | | , , , pe preparer a | | pt | | | | Date | | Check if self- | | P00496 | 288 | |
| | | DALE L RAMSEY C | _{PA} | | | | | 2017 | -05-10 | employed ▶ 📙 📗 | | F00450 | 3300 | |
| Paid | | | | | | | _ | | | | | | | |
| | arei | | E L RAMSEY C | PA IN | IC | | | | | | Firm's E | IN ▶20 | -05309 | 52 |
| use | Only | | 3 WEST 7TH | STPF | FT | | | | | | | | | |
| | | ininis audiess ► 12 | .5 WEST / ITT : | ⊃ ! K⊑ | <u>- 1</u> | | | | | | Phone n | n (785 | 1 762- | 7658 |
| | | JU | NCTION CITY | , KS | 66441 | | | | | | , none n | . (/03 | , , 52-1 | . 556 |
| | | | | | | | | | | | | | | |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (c) Compensation (If (a) Name and address Title, and average (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DALE ANN CLORE PRESIDENT 0 0 50 3410 TOP OF THE WORLD DRIVE MANHATTAN, KS 66503 SUSAN F WILLIAMS SEC/TREAS 18,000 0 15 00 **576 COUNTY ROAD 1475** MOUNT PLEASANT, TX 75455 BARBARA CRAFT DIRECTOR 0 0 0 50 110 S GARFIELD JUNCTION CITY KS 66441 JUNCTION CITY, KS 66441 DIRECTOR JAMES WARD 0 000 00 PO BOX 482

| JONETION CITT, NO TOTAL | | | | |
|--------------------------------|----------|---|---|---|
| TED HAYDEN | DIRECTOR | 0 | 0 | 0 |
| 2150 VANE CHAPMAN, KS 67431 | 0 50 | | | |
| JANETTE VOGELSANG | DIRECTOR | 0 | 0 | 0 |
| 102 N RITTER ROAD | 0 50 | | | |

0

0

DIRECTOR

DIRECTOR 0.50

0 50

OTTAWA, KS 66067 KIMBERLY MILLESON

TOPEKA, KS 66614

7014 ROCKWOOD DRIVE MILFORD, KS 66514 MICHAEL R MUNSON

3500 SW FAIRLAWN RD SUITE 210

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | |
|--|--|--------------------------------------|-------------------------------------|--------|--|--|--|--|
| 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 | Amount | | | | |
| a Paid during the year | | | | | | | | |
| BARTON COMMUITY COLLEGE 245 NE 30 RD GREAT BEND, KS 67530 | NONE | NON-PROFIT | EDUCATIONAL | 800 | | | | |
| BENEDICTINE COLLEGE 1020 N 2ND STREET ATCHISON, KS 66002 | NONE | NON-PROFIT | EDUCATIONAL | 3,400 | | | | |
| BETHEL COLLEGE 300 27TH STREET NORTH NEWTON, KS 67117 | NONE | NON-PROFIT | EDUCATIONAL | 800 | | | | |
| BUTLER COUNTY COMMUNITY COLLEGE 901 S HAVERHILL RD EL DORADO, KS 67042 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 | | | | |
| CLOUD COUNTY COMMUNITY COLLEGE 631 CAROLINE AVENUE JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | EDUCATIONAL | 1,500 | | | | |
| CREIGHTON UNIVERSITY 2500 CALIFORNIA PLAZA OMAHA, NE 68102 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 | | | | |
| EMPORIA STATE UNIVERSITY 1200 COMMERCIAL EMPORIA, KS 66801 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 | | | | |
| FORT HAYS STATE UNIVERSITY 600 PARK STREET HAYS, KS 67601 | NONE | NON-PROFIT | EDUCATIONAL | 10,800 | | | | |
| FRANCISCAN UNIVERSITY OF STEUBENVIL 1235 UNIVERSITY BLVD STEUBENVILLE, OH 43952 | NONE | NON-PROFIT | EDUCATIONAL | 1,400 | | | | |
| FRIENDS UNIVERSITY 2100 W UNIVERSITY ST WICHITA, KS 67213 | NONE | NON-PROFIT | EDUCATIONAL | 1,200 | | | | |
| HUTCHINSON COMMUNITY COLLEGE 1300 N PLUM HUTCHINSON, KS 67501 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 | | | | |
| ILLINOIS COLLEGE OF OPTOMETRY 3241 S MICHIGAN AVE CHICAGO, IL 60616 | NONE | NON-PROFIT | EDUCATIONAL | 1,200 | | | | |
| JOHNSON COUNTY COMMUNITY COLLEGE 12345 COLLEGE BLVD OVERLAND PARK, KS 66210 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 | | | | |
| KANSAS STATE UNIVERSITY 2322 ANDERSON AVENUE MANHATTAN, KS 66502 | NONE | NON-PROFIT | EDUCATIONAL | 21,300 | | | | |
| MANHATTAN CHRISTIAN COLLEGE 1415 ANDERSON AVENUE MANHATTAN, KS 66502 | NONE | NON-PROFIT | EDUCATIONAL | 800 | | | | |

Total .

165,149

| Form 990PF Part XV Line 3 - Grant | ts and Contributions Paid | During the ` | Year or Approved for Future | Payment |
|--|--|--------------------------------------|----------------------------------|---------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | or substantial contributor | | | |
| MCPHERSON COLLEGE 1600 E EUCLID ST MCPHERSON, KS 67460 | NONE | NON-PROFIT | EDUCATIONAL | 1,000 |
| MID-AMERICA NAZARENE UNIVERSITY 2030 E COLLEGE WAY OLATHE, KS 66062 | NONE | NON-PROFIT | EDUCATIONAL | 800 |
| NORTH CENTRAL KANSAS TECHNICAL COLL 3033 US 24 BELOIT, KS 67420 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 |
| NORTHEASTERN STATE UNIVERSITY 600 N GRAND AVE TAHLEQUAH, OK 74464 | NONE | NON-PROFIT | EDUCATIONAL | 2,800 |
| ROCKHURST UNIVERSITY 1100 ROCKHURST RD KANSAS CITY, MO 64110 | NONE | NON-PROFIT | EDUCATIONAL | 1,000 |
| SAINT LOUIS COLLEGE OF PHARMACY 4576 PARKVIEW PLACE ST LOUIS, MO 63110 | NONE | NON-PROFIT | EDUCATIONAL | 1,600 |
| TABOR COLLEGE 400 S JEFFERSON HILLSBORO, KS 67063 | NONE | NON-PROIFIT | EDUCATIONAL | 2,800 |
| UNIVERSITY OF KANSAS PO BOX 928 LAWRENCE, KS 66044 | NONE | NON-PROFIT | EDUCATIONAL | 8,200 |
| UNIVERSITY OF SAINT MARY 4100 S 4TH ST LEAVENWORTH, KS 66048 | NONE | NON-PROFIT | EDUCATIONAL | 1,800 |
| UNIVERSITY OF WEST ALABAMA 100 US-11 LIVINGSTON, AL 35470 | NONE | NON-PROFIT | EDUCATIONAL | 1,200 |
| WASHBURN UNIVERSITY 1700 SW COLLEGE AVE TOPEKA, KS 66621 | NONE | NON-PROFITY | EDUCATIONAL | 3,000 |
| WICHITA STATE UNIVERSITY 1845 FAIRMOUNT WICHITA, KS 67260 | NONE | NON-PROFIT | EDUCATIONAL | 7,800 |
| ARMED SERVICES YMCA OF USA 6359 WALKER LN STE 200 ALEXANDRIA, VA 22310 | NONE | NON-PROFIT | CHARITABLE | 10,000 |
| C L HOOVER OPERA HOUSE 135 W 7TH ST JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 5,000 |
| FRIENDS OF ANIMALS PO BOX 580 JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 750 |
| Total | | | | 165,149 |

| 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 | Amount | | | | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | | | | | |
| a Paid during the year | | | | | | | | |
| GEARY COUNTY UNITED WAY PO BOX 567 JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 5,000 | | | | |
| THE CRISIS CENTER INC PO BOX 1526 MANHATTAN, KS 66505 | NONE | NON-PROFIT | CHARITABLE | 6,000 | | | | |
| THE FOOD PANTRY OF GEARY COUNTY 136 W 3RD ST JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 10,000 | | | | |
| THE OPEN DOOR COMMUNITY HOUSE INC 136 W 3RD ST JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 10,000 | | | | |
| JUNCTION CITY FAMILY YMCA PO BOX 113 JUNCTION CITY, KS 66441 | NONE | NON-PROFIT | CHARITABLE | 31,000 | | | | |
| GIRL SCOUTS OF NE KANSAS & NW MISSO 8383 BLUE PARKWAY DRIVE KANSAS CITY, MO 64133 | NONE | NON-PROFIT | CHARITABLE | 1,000 | | | | |
| BOY SCOUTS OF AMERICA PO BOX 912 SALINA, KS 67402 | NONE | NON-PROFIT | CHARITABLE | 1,000 | | | | |
| AMBER STANLEY 1676 2600 AVE ABILENE, KS 67410 | NONE | INDIVIDUAL | GENERAL | 599 | | | | |
| ABILENE, KS 67410 Total | | | | 165,149 | | | | |

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|---|-------------------|--------------------------|------------------------|---|--|--|--|--|
| TY 2016 Accounting Fees Schedule | | | | | | | | |
| | | | | | | | | |
| Name: JELLISON BENEVOLENT SOCIETY INC EIN: 48-6106092 | | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | |
| DALE L RAMSEY CPA | 2,400 | 1,200 | | 1,200 | | | | |

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Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

TY 2016 Gain/Loss from Sale of Other Assets Schedule

Name: JELLISON BENEVOLENT SOCIETY INC

EIN: 48-6106092

| Name | Date Acquired | How Acquired | Date Sold | Purchaser Name | Gross Sales Price | Basis | Basis Method | Sales Expenses | Total (net) | Accumulated Depreciation |
|-------------------------------------|------------------|-----------------|--------------|-------------------|----------------------|--------|-----------------|-------------------|----------------|-----------------------------|
| ISHARES TR SMLL VAL INDX | 2016-08 | PURCHASE | 2016-12 | | 11,203 | 9,944 | | | 1,259 | |
| AMERICAN FUNDS CAPITAL WORLD GROWTH | 2014-03 | PURCHASE | 2016-12 | | 10,875 | 10,620 | | | 255 | |
| DELAWARE GROUP EQUITY INCOME | 2014-12 | PURCHASE | 2016-07 | | 17,902 | 16,699 | | | 1,203 | |
| FRANKLIN STRATEGIC SER SMCAP | 2013-07 | PURCHASE | 2016-07 | | 35,210 | 31,792 | | | 3,418 | |
| MFS INTERNATIONAL NEW DISCOVERY | 2010-09 | PURCHASE | 2016-07 | | 4,445 | 3,830 | | | 615 | |
| NEW WORLD FUND INC | 2013-06 | PURCHASE | 2016-07 | | 3,990 | 4,084 | | | -94 | |
| OKALOOSA CNTY FL REV | 2007-11 | PURCHASE | 2016-10 | | 4,000 | 3,918 | | | 82 | |
| OPPENHEIMER DEVELOPING MARKETS | 2013-03 | PURCHASE | 2016-12 | | 4,291 | 4,488 | | | -197 | |
| RIDGEWORTH CEREDEX MID CAP | 2013-02 | PURCHASE | 2016-12 | | 15,637 | 14,397 | | | 1,240 | |
| VANGUARD BD INDEX FD | 2012-09 | PURCHASE | 2016-07 | | 12,888 | 10,352 | | | 2,536 | |
| VANGUARD TRUSTEES EQUITY FD | 2013-03 | PURCHASE | 2016-12 | | 12,969 | 12,213 | | | 756 | |
| VANGUARD INDEX FDS MID CAP | 2012-09 | PURCHASE | 2016-12 | | 7,021 | 4,992 | | | 2,029 | |
| VANGUARD INDEX FDS 500 | 2012-06 | PURCHASE | 2016-12 | | 18,585 | 13,846 | | | 4,739 | |
| VOYA GLOBAL REAL ESTATE | 2012-12 | PURCHASE | 2016-12 | | 5,800 | 5,266 | | | 534 | |

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| TY 2016 Investments Corporat | e Stock Sche | dule |

DLN: 93491135023097

Name: JELLISON BENEVOLENT SOCIETY INC.

EIN: 48-6106092

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|------------------------|---------------------------|----------------------------------|
| CENTRAL OF KANSAS, INC | 74,388 | 4,188,774 |

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| TY 2016 Investments Govern | nent Obligat | ions Schedule | _ |
| | _ | | |
| Name: | JELLISON BEN | EVOLENT SOCIETY INC | |
| EIN: | 48-6106092 | | |
| US Government Securities - End of Year Book Value: | | | |
| US Government Securities - End of Year Fair Market Value: | | | |
| State & Local Government Securities - End of Year Book Value: | | 40,422 | |
| State & Local Government Securities - End of Year Fair Market Value: | | 42,192 | |

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|---------------|------------------------|-----------------|---------------------|
| | | | |

TY 2016 Investments - Other Schedule

Name: JELLISON BENEVOLENT SOCIETY INC

ETN: 40 C10C00

| EIN: 48-6106092 | | | | | |
|--------------------------------------|-----------------------|------------|----------------------------------|--|--|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value | | |
| AMERICAN FUNDS CAP WORLD GR & INCOM | AT COST | 24,152 | 22,796 | | |
| DELAWARE GROUP EQUITY FDS II | AT COST | 32,599 | 34,647 | | |
| FRANKLIN STRATIGIC SER SMCAP | AT COST | | | | |
| ISHARES TR SMLL VAL INDX | AT COST | 21,603 | 23,562 | | |
| MFS INTERNATIONAL NEW DISCOVERY | AT COST | 10,980 | 12,233 | | |
| NEW WORLD FD INC NEW CL | AT COST | 10,060 | 9,486 | | |
| OPPENHEIMER DEVELOPING MKTS CL | AT COST | 9,960 | 9,528 | | |
| RIDGEWORTH FDS MID CAP | AT COST | 25,095 | 26,620 | | |
| VOYA GLOBAL REAL ESTATE FUND | AT COST | 16,316 | 15,998 | | |
| VANGUARD TRUSTEES EQUITY FD INTL VAL | AT COST | 28,296 | 26,821 | | |
| VANGUARD INDEX FD MIDCAP INDEX SIGNA | AT COST | 10,016 | 13,245 | | |
| VANGUARD INDEX FD 500 INDEX SIGNAL | AT COST | 25,499 | 34,483 | | |
| VANGUARD SMCP GROWTH INDEX FD | AT COST | 19,454 | 23,801 | | |

Book Value

Name: JELLISON BENEVOLENT SOCIETY INC.

EIN: 48-6106092

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MINERAL RIGHTS

Other Assets Schedule Beginning of Year -

End of Year - Book Value

End of Year - Fair Market Value

DLN: 93491135023097

Description

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|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|--|--|--|
| TY 2016 Other Expenses Schedule | | | | | | | |
| | | | | | | | |
| Name: | JELLISON BENE | EVOLENT SOCIET | Y INC | | | | |
| EIN: | 48-6106092 | | | | | | |
| Other Expenses Schedule | | | | 4 | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | |
| EXPENSES | | | | | | | |

750

1,864

1,274

4,000

472

ASSOCIATION OF SMALL FOUNDATI

INSURANCE

OFFICE EXPENSE

DIRECTORS FEES

MISCELLANEOUS

375

932

637

2,000

236

375

932

637

236

2,000

DLN: 93491135023097

Name: JELLISON BENEVOLENT SOCIETY INC EIN: 48-6106092

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| Other Income Schedule | | | | | | |
|-------------------------|-----------------------------------|--------------------------|---------------------|--|--|--|
| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income | | | |
| KANSAS GAS ROYALTIES | 3,874 | 3,874 | 3,874 | | | |
| REFUNDS OF GRANT MONEYS | 3,100 | | 3,100 | | | |

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|---|---------------|--------------------------|------------------------|---------------------------------|--|--|--|--|
| TY 2016 Other Professional Fees Schedule | | | | | | | | |
| | | | | | | | | |
| Name: JELLISON BENEVOLENT SOCIETY INC EIN: 48-6106092 | | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable | | | | |

16,193

32,385

CNB TRUST DEPARTMENT FEES

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|--------------------------------------|------------------------|--------------------------|------------------------|---|--|--|
| TY 2016 Taxes Schedule | | | | | | |
| ı | | | | 1 | | |
| Name: | JELLISON BF | ENEVOLENT SOCIE | TY INC | l | | |
| EIN: | EIN: 48-6106092 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| REAL ESTATE TAXES | 604 | 302 | | 302 | | |
| SECRETARY OF STATE | 40 | 20 | | 20 | | |
| OIL ROYALTY CONSERVATION TAX | 47 | 23 | | 24 | | |
| TAXES ON INVESTMENT INCOME | 2,182 | 2,182 | | | | |