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# Form **990-PF**

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 www.lrs.gov/form990pf. Department of the Treasury Internal Revenue Service

| For calendar year 2016 or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | tax year beginning APF                                                  | R 1, 2016                           | , and ending                          | <u>MAR 31, 2017</u>                                    | 7                                            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------|---------------------------------------|--------------------------------------------------------|----------------------------------------------|
| Name of foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                         |                                     |                                       | A Employer identification                              | n number                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                         | \\                                  | 16-                                   |                                                        |                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | T SCHOLARSHIP I                                                         |                                     | -                                     | 23-7430868                                             | <u> </u>                                     |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | x number if mail is not delivered to stree                              | et address)                         | Room/suite                            | B Telephone number                                     | 6100                                         |
| PO BOX 1803                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                         | <del></del>                         |                                       | <del> </del>                                           | -6100                                        |
| •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | rince, country, and ZIP or foreign (                                    | postal code                         |                                       | C If exemption application is p                        | pending, check here                          |
| DODGE CITY,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                         |                                     | <del></del>                           | <u> </u>                                               |                                              |
| G Check all that apply:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Initial return                                                          | <del></del>                         | ormer public charity                  | D 1. Foreign organization                              | s, check here                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Final return                                                            | Amended return                      |                                       | 2 Foreign organizations me<br>check here and attach co | eeting the 85% test,                         |
| II. Cheek has of excepted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Address change                                                          | Name change                         |                                       | check here and attach co                               | omputation                                   |
| H Check type of organizat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | · · · · · · · · · · · · · · · · · ·                                     | Other taxable private foundation    | ntion                                 | E If private foundation sta                            |                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | nonexempt charitable trust                                              |                                     | Accrual                               | under section 507(b)(1                                 |                                              |
| Fair market value of all a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ·                                                                       | ting method: X Cash Other (specify) | Acciuai                               | F If the foundation is in a                            |                                              |
| (from Part II, col (c), li<br>▶\$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 232,397. (Part I, cold                                                  |                                     | hasis )                               | under section 507(b)(1                                 | )(B), check here                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | /e nue and Expenses                                                     | T                                   |                                       | (a) Advicted not                                       | (d) Disbursements                            |
| (The total of amou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | nts in columns (b), (c), and (d) may not<br>the amounts in column (a) ) | (a) Revenue and expenses per books  | (b) Net investment income             | (c) Adjusted net income                                | for charitable purposes<br>(cash basis only) |
| 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | fts, grants, etc., received                                             |                                     |                                       | N/A                                                    | (Casil basis offly)                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | he foundation is not required to attach Sch. B                          |                                     |                                       | N/A                                                    |                                              |
| <ul> <li>Interest on savings</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                         |                                     |                                       |                                                        | <del> </del>                                 |
| 3 cash investments     4 Dividends and in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | terest from securities                                                  | 5,478.                              | 5,478.                                |                                                        | STATEMENT 1                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | torest from securities                                                  | 3, 10.                              | 3,470.                                |                                                        | DIZITEDIAL I                                 |
| 5a Gross rents  b Net rental income o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | r (loss)                                                                |                                     | · · · · · · · · · · · · · · · · · · · |                                                        |                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | orn sale of assets not on line 10                                       | 5,613.                              |                                       |                                                        |                                              |
| b Gross sales price for assets on line 6a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                         | 0,0200                              |                                       |                                                        |                                              |
| Capital gain net inc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ome (from Part IV, line 2)                                              |                                     | 5,613.                                | RE                                                     | CEIVED                                       |
| ba Net gain or (loss) from the gain of the gain or (loss) from the gain or (lo |                                                                         |                                     |                                       |                                                        | 78                                           |
| 9 Income modifica                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                         |                                     |                                       | 100                                                    |                                              |
| Gross sales less ref                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | urns                                                                    |                                     |                                       | 0                                                      | \$                                           |
| b Less Cost of goods                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | sold                                                                    |                                     |                                       | 000                                                    |                                              |
| c Gross profit or (I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | oss)                                                                    |                                     |                                       | L OG                                                   | DEN, UT                                      |
| 11 Other income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · ·                                                                     |                                     |                                       |                                                        |                                              |
| 12 Total. Add lines                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1 through 11                                                            | 11,091.                             | 11,091.                               |                                                        |                                              |
| 13 Compensation of o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | fficers, directors, trustees, etc                                       | 0.                                  | 0.                                    |                                                        | 0.                                           |
| 14 Other employee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | salaries and wages                                                      |                                     |                                       |                                                        | <u> </u>                                     |
| 15 Pension plans, e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | mployee benefits                                                        |                                     |                                       |                                                        |                                              |
| 16a Legal fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                         |                                     |                                       |                                                        |                                              |
| b Accounting fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | STMT 2                                                                  | 666.                                | 333.                                  |                                                        | 333.                                         |
| c Other profession                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | al fees STMT 3                                                          | 1,991.                              | 1,991.                                |                                                        | 0.                                           |
| ₹ 17 Interest                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                         | ļ                                   |                                       |                                                        | <del> </del>                                 |
| b Accounting fees c Other profession life interest las Taxes las Taxes las Depreciation and cocupancy las Travel, conference las Printing and pub                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | STMT 4                                                                  | 77.                                 | 0.                                    |                                                        | 0.                                           |
| 19 Depreciation and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | depletion                                                               |                                     |                                       |                                                        |                                              |
| 20 Occupancy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                         |                                     |                                       |                                                        |                                              |
| 21 Travel, conference                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ces, and meetings                                                       |                                     |                                       |                                                        |                                              |
| 22 Printing and pub                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                         | 1.00                                | 122                                   |                                                        |                                              |
| 23 Other expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | STMT 5                                                                  | 166.                                | 133.                                  | <del> </del>                                           | 33.                                          |
| 24 Total operating                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | and administrative                                                      | 2 000                               | 2 457                                 |                                                        | 266                                          |
| ~ i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ines 13 through 23                                                      | 2,900.<br>10,400.                   | 2,457.                                |                                                        | 366.<br>10,400.                              |
| 25 Contributions, gi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | · -                                                                     | 10,400.                             |                                       | <del> </del>                                           | 10,400.                                      |
| 26 Total expenses<br>Add lines 24 and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | and disbursements                                                       | 13,300.                             | 2,457.                                |                                                        | 10,766.                                      |
| 27 Subtract line 26                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                         | 13,300.                             | 4,43/.                                | <del></del>                                            | 10,700.                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ver expenses and disbursements                                          | -2,209.                             |                                       |                                                        |                                              |
| i i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ncome (if negative, enter -0-)                                          | 2,207.                              | 8,634.                                |                                                        | <del> </del>                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Ome (if negative, enter -0-)                                            |                                     | 0,001.                                | N/A                                                    | <u> </u>                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | or Paperwork Reduction Act Notic                                        | ce, see instructions.               |                                       | ·                                                      | Form <b>990-PF</b> (2016)                    |

| <u>Fo</u>                   | rm 9  | 00-PF (2016) ELMA SCHMIDT SCHOLARSHIF                                                                          | FUND                 |                                              | 7430868 Page 2            |
|-----------------------------|-------|----------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------|---------------------------|
| F                           | Part  | Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only | Beginning of year    | End of                                       | <del></del>               |
|                             | art   | Balance Sheets column should be for end-of-year amounts only                                                   | (a) Book Value       | (b) Book Value                               | (c) Fair Market Value     |
|                             | 1     | Cash - non-interest-bearing                                                                                    | 693.                 | 883.                                         | 883.                      |
|                             | 2     | Savings and temporary cash investments                                                                         | ···                  |                                              |                           |
|                             | 3     | Accounts receivable ►                                                                                          |                      |                                              |                           |
|                             | 1     | Less: allowance for doubtful accounts                                                                          | 1                    |                                              |                           |
|                             | 4     | Pledges receivable ►                                                                                           |                      |                                              |                           |
|                             |       | Less, allowance for doubtful accounts ▶                                                                        |                      |                                              |                           |
|                             | 5     | Grants receivable                                                                                              | <del></del>          | <del></del>                                  |                           |
|                             | 6     | Receivables due from officers, directors, trustees, and other                                                  |                      |                                              |                           |
|                             | "     | disqualified persons                                                                                           | [                    | [                                            |                           |
|                             | 1 -   |                                                                                                                |                      |                                              |                           |
|                             | 7     | Other notes and loans receivable                                                                               | B                    | }                                            |                           |
|                             | ١.    | Less: allowance for doubtful accounts                                                                          |                      |                                              |                           |
| Assets                      | 8     | Inventories for sale or use                                                                                    |                      |                                              |                           |
| 153                         | 9     | Prepaid expenses and deferred charges                                                                          |                      |                                              |                           |
| ~                           | 1     | Investments - U.S. and state government obligations                                                            |                      |                                              |                           |
|                             | b     | Investments - corporate stock                                                                                  |                      |                                              |                           |
|                             | C     | Investments - corporate bonds                                                                                  |                      |                                              |                           |
|                             | 11    | Investments - land, buildings, and equipment basis                                                             |                      |                                              |                           |
|                             |       | Less accumulated depreciation                                                                                  |                      |                                              |                           |
|                             | 12    | Investments - mortgage loans                                                                                   |                      |                                              |                           |
|                             | 13    | Investments - other STMT 6                                                                                     | 144,565.             | 142,166.                                     | 231,514.                  |
|                             | 14    | Land, buildings, and equipment: basis ▶                                                                        |                      |                                              |                           |
|                             |       | Less accumulated depreciation                                                                                  |                      |                                              |                           |
|                             | 15    | Other assets (describe ▶ )                                                                                     |                      |                                              |                           |
|                             | 16    | Total assets (to be completed by all filers - see the                                                          |                      |                                              |                           |
|                             |       | instructions. Also, see page 1, item ()                                                                        | 145,258.             | 143,049.                                     | 232,397.                  |
| _                           | 17    | Accounts payable and accrued expenses                                                                          |                      | 120/0250                                     | 202700.0                  |
|                             | 18    | Grants payable                                                                                                 |                      |                                              |                           |
|                             | 19    | Deferred revenue                                                                                               | <del></del>          |                                              |                           |
| Liabilities                 | 20    |                                                                                                                |                      |                                              |                           |
| Ē                           | 1     | Loans from officers, directors, trustees, and other disqualified persons                                       | <del></del>          |                                              |                           |
| Ë                           | 21    | Mortgages and other notes payable                                                                              |                      |                                              |                           |
|                             | 22    | Other liabilities (describe )                                                                                  |                      |                                              |                           |
|                             | 1     | T - 15 - 15 - 17 - 1 - 100                                                                                     | 0                    | <u>,                                    </u> |                           |
| _                           | 23    | Total liabilities (add lines 17 through 22)                                                                    | 0.                   | 0.                                           |                           |
|                             | 1     | Foundations that follow SFAS 117, check here                                                                   | }                    |                                              |                           |
| s                           | 1     | and complete lines 24 through 26 and lines 30 and 31.                                                          |                      |                                              |                           |
| ည်                          | 24    | Unrestricted                                                                                                   |                      |                                              |                           |
| ää                          | 25    | Temporarily restricted                                                                                         |                      |                                              |                           |
| Ä                           | 26    | Permanently restricted                                                                                         |                      |                                              |                           |
| Ĕ                           | 1     | Foundations that do not follow SFAS 117, check here                                                            |                      |                                              |                           |
| Ē                           |       | and complete lines 27 through 31.                                                                              |                      |                                              |                           |
| S                           | 27    | Capital stock, trust principal, or current funds                                                               | 170,201.             | 170,201.                                     |                           |
| set                         | 28    | Paid-in or capital surplus, or land, bldg., and equipment fund                                                 | 0.                   | 0.                                           |                           |
| Net Assets or Fund Balances | 29    | Retained earnings, accumulated income, endowment, or other funds                                               | -24,943.             | -27,152.                                     |                           |
| É                           | 30    | Total net assets or fund balances                                                                              | 145,258.             | 143,049.                                     |                           |
| _                           |       |                                                                                                                |                      |                                              |                           |
|                             | 31    | Total liabilities and net assets/fund balances                                                                 | 145,258.             | 143,049.                                     |                           |
|                             |       |                                                                                                                |                      |                                              |                           |
| L                           | art   | Analysis of Changes in Net Assets or Fund Ba                                                                   | liances              |                                              |                           |
| 1                           | Tota  | net assets or fund balances at beginning of year - Part II, column (a), line 3                                 | 0                    |                                              |                           |
|                             |       | st agree with end-of-year figure reported on prior year's return)                                              |                      | 11                                           | 145,258.                  |
| 2                           | •     | r amount from Part I, line 27a                                                                                 |                      | 2                                            | -2,209.                   |
|                             |       | r increases not included in line 2 (itemize)                                                                   |                      | 3                                            | 0.                        |
|                             |       | lines 1, 2, and 3                                                                                              |                      | 4                                            | 143,049.                  |
|                             |       | eases not included in line 2 (itemize)                                                                         |                      | 5                                            | 0.                        |
|                             |       | net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu                               | ımn (h) line 30      | 6                                            | 143,049.                  |
| <u>~</u>                    | . 014 | The second of this buildings at one of you fine a fitting of a diffigure                                       | 2 \D <sub>H</sub> 00 |                                              | Form <b>990-PF</b> (2016) |

Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) 10/07/14 07/20/16 1a DEUTSCHE SHORT DURATION P b DDFA EMERGING MARKEETS P 08/13/04 09/21/16 c DFA US CORE EQUITY 1 INSTL P 12/28/05 12/14/16 08/13/04 11/29/16 d DFA US SMALL CAP VALUE P e CAPITAL GAINS DIVIDENDS (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 704. 731. -27. a 583. 266. 849. b 5,424 3,009. 2,415. C 2,126. 3,354. 1,228. d 1,731. 1,731. Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) (j) Adjusted basis (k) Excess of col. (I) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any -27. 266. b 2,415. C 1,228. d 1,731. If gain, also enter in Part I, line 7 5,613. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 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 X 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 the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years (b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 10,175. 207,309. .049081 2015 206,078. .048972 10,092. 2014 9,133. 196,361 .046511 2013 184,898. .050082 2012 9,260. 2011 10,261 185,364 .055356 .250002 2 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .050000 the foundation has been in existence if less than 5 years 3 216,418. Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 4 10,821. Multiply line 4 by line 3 5 86. Enter 1% of net investment income (1% of Part I, line 27b) 6 10,907. 7 Add fines 5 and 6 10,766. Enter qualifying distributions from Part XII, line 4 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.

|    | 990-PF (2016) ELMA SCHMIDT SCHOLARSHIP FUND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               | <u>3-7430868</u>                                 |               |      | Page 4           |  |  |  |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------|---------------|------|------------------|--|--|--|
|    | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u>4948</u>   | - see ii                                         | nstru         | ctio | ns)              |  |  |  |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here  I and enter *N/A* on line 1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               | }                                                |               |      |                  |  |  |  |
|    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                                                  |               |      |                  |  |  |  |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1_            |                                                  |               | _ 1  | <u>73.</u>       |  |  |  |
|    | of Part I, line 27b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                                                  |               |      |                  |  |  |  |
| C  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |                                                  |               |      |                  |  |  |  |
|    | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                                                  |               |      |                  |  |  |  |
| 4  | 4 Subtitle A (income) tax (dormestic 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-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 5             |                                                  |               | 1    | $\frac{0.}{73.}$ |  |  |  |
| 6  | Credits/Payments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |                                                  | -             |      |                  |  |  |  |
|    | 2016 estimated tax payments and 2015 overpayment credited to 2016 6a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -             | ĺ                                                |               |      |                  |  |  |  |
|    | Exempt foreign organizations - tax withheld at source 6b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 7             |                                                  |               |      |                  |  |  |  |
|    | Tax paid with application for extension of time to file (Form 8868)  6c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7             | 1                                                |               |      |                  |  |  |  |
|    | Backup withholding errone ously withheld  6d  6d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1             |                                                  |               |      |                  |  |  |  |
|    | Total credits and payments. Add lines 6a through 6d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 7             | ]                                                |               |      | 0.               |  |  |  |
|    | Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8             | <del></del>                                      |               |      |                  |  |  |  |
|    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 9             | <del>                                     </del> |               | 1    | 73.              |  |  |  |
|    | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 10            |                                                  |               |      | <u>/J.</u>       |  |  |  |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 11            | <del> </del>                                     |               |      |                  |  |  |  |
|    | Enter the amount of line 10 to be: Credited to 2017 estimated tax  rt VII-A   Statements Regarding Activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               | <del></del>                                      |               |      |                  |  |  |  |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | <del></del> -                                    |               | Vac  | No               |  |  |  |
| ıa | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | .e III        |                                                  | 4.            | 103  |                  |  |  |  |
|    | any political campaign?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | -10           |                                                  | 1a            |      | _ <u>X</u>       |  |  |  |
| D  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |                                                  | 1b_           |      |                  |  |  |  |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials public                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | snea or       |                                                  |               |      |                  |  |  |  |
|    | distributed by the foundation in connection with the activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                                                  |               |      | .,               |  |  |  |
|    | Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                                                  | 1c            |      | X                |  |  |  |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |                                                  |               |      |                  |  |  |  |
|    | (1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers. $\blacktriangleright$ \$ 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | •             |                                                  |               |      |                  |  |  |  |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               | İ                                                |               |      |                  |  |  |  |
|    | managers. ► \$0.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                                                  |               |      |                  |  |  |  |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                                  | 2             |      | X                |  |  |  |
|    | If "Yes," attach a detailed description of the activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |                                                  |               |      |                  |  |  |  |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | or            |                                                  |               |      |                  |  |  |  |
|    | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                                                  | 3_            |      | <u>X</u>         |  |  |  |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |                                                  | 4a_           |      | X                |  |  |  |
| b  | If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | N             | 1/A                                              | 4b            |      | <u> </u>         |  |  |  |
| 5  | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                                                  | 5             |      | X                |  |  |  |
|    | If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |                                                  |               |      |                  |  |  |  |
| 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 of | te law        |                                                  |               |      |                  |  |  |  |
|    | remain in the governing instrument?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | ŀ                                                | 6             | _X_  |                  |  |  |  |
| 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 X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | $\mathcal{N}$ |                                                  | 7             | X    |                  |  |  |  |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                                  |               |      |                  |  |  |  |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |                                                  |               |      |                  |  |  |  |
|    | KS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |                                                  |               |      |                  |  |  |  |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |                                                  |               |      |                  |  |  |  |
|    | of each state as required by General Instruction G? If "No," attach explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Ī                                                | 8b            | X    | L                |  |  |  |
| 9  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | lendar        | ı                                                |               |      |                  |  |  |  |
|    | year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |                                                  | 9             |      | X                |  |  |  |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |                                                  | 10            |      | X                |  |  |  |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | For                                              | m <b>99</b> ( | )-PF | (2016)           |  |  |  |

| Pa  | int 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            |               | X             |
| 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            |               | <u> X</u>     |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 13            | <u>X</u> _    | <u> </u>      |
|     | Website address ► N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 005           |               |               |
| 14  | The books are in care of PATTY HUCKABY  Telephone no. (620)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 227           | <u> </u>      | 03            |
| 4-  | Located at ► 11181 QUAKER ROAD, DODGE CITY, KS ZIP+4 ►67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | BOT           |               | $\overline{}$ |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 3.7           | / <b>&gt;</b> | · L           |
| 10  | and enter the amount of tax-exempt interest received or accrued during the year  At any time during colorida; year 2016, did the foundation have an extended a constant of the countered to the c |               | /A<br>Yes     | No            |
| 10  | At any time during Calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | T 40          | 162           | 1             |
|     | securities, or other financial account in a foreign country?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 16            |               | _X_           |
|     | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1             |               |               |
| Pa  | foreign country  Int VII-B   Statements Regarding Activities for Which Form 4720 May Be Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |               |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | T             | Yes           | No            |
| 1.  | 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           | 110           |
| ıa  | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ł             |               |               |
|     | (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?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |               |               |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |               |               |
|     | (5) Transfer any income or assets to a disqualified person (or make any of either available                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |               |               |
|     | for the benefit or use of a disqualified person)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |               |               |
|     | (6) Agree to pay money or property to a government official? (Exception. Check "No"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |               |               |
|     | If the foundation agreed to make a grant to or to employ the official for a period after                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |               |               |
|     | termination of government service, if terminating within 90 days.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |               |               |
| b   | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |               |               |
|     | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1b            |               |               |
|     | Organizations relying on a current notice regarding disaster assistance check here                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |               |               |
| C   | 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            |               | _X            |
| 2   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1             |               |               |
|     | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1             |               |               |
|     | before 2016?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |               |               |
|     | If "Yes," list the years $\blacktriangleright$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |               |               |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |               |               |
|     | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ۱.,           |               |               |
|     | statement - see instructions.)  N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 2b            |               |               |
| С   | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |               |
| 0-  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |               |               |
| 3a  | during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |               |               |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |               |               |
| Ŋ   | 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,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |               |               |
|     | Form 4720, to determine if the foundation had excess business holdings in 2016)  N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 3b            |               |               |
| A o | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4a            |               | X             |
|     | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 10            | -             |               |
| ,   | had not been removed from jeopardy before the first day of the tax year beginning in 2016?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4b            |               | х             |
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rm <b>990</b> | )-PF          |               |

| Part VII-B   Statements Regarding Activities for Which                                     |                                                                 | Required (contin            | <u> 23-74300</u><br>ued)                                                       | 000                                              | Page 6        |
|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------|--------------------------------------------------|---------------|
| 5a During the year did the foundation pay or incur any amount to:                          |                                                                 |                             | 100,                                                                           |                                                  | Г             |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section            | n 4945(e))?                                                     | ☐ Ye                        | es X No                                                                        |                                                  |               |
| (2) Influence the outcome of any specific public election (see section 4955); of           | ` ''                                                            |                             |                                                                                | 1                                                |               |
| any voter registration drive?                                                              |                                                                 |                             | es X No                                                                        |                                                  | İ             |
| (3) Provide a grant to an individual for travel, study, or other similar purposes          | ?                                                               |                             | es X No                                                                        |                                                  |               |
| (4) Provide a grant to an organization other than a charitable, etc., organization         | n described in section                                          |                             |                                                                                |                                                  |               |
| 4945(d)(4)(A)? (see instructions)                                                          |                                                                 |                             | es X No                                                                        |                                                  |               |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,        | or educational purposes, or f                                   | or                          |                                                                                | - 1                                              | 1             |
| the prevention of cruelty to children or animals?                                          |                                                                 | Y6                          | es X No                                                                        |                                                  |               |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni     | der the exceptions described i                                  | n Regulations               | }                                                                              |                                                  |               |
| section 53.4945 or in a current notice regarding disaster assistance (see instru           | ictions)?                                                       |                             | N/A                                                                            | 5b                                               |               |
| Organizations relying on a current notice regarding disaster assistance check h            | nere                                                            |                             |                                                                                | _                                                |               |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for        | rom the tax because it maintai                                  | ined                        |                                                                                |                                                  | Ì             |
| expenditure responsibility for the grant?                                                  | N                                                               | I/A 🔲 Ye                    | es 🔲 No                                                                        |                                                  |               |
| If "Yes," attach the statement required by Regulations section 53 494                      | 5-5(d)                                                          |                             |                                                                                | 1                                                |               |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to      | pay premiums on                                                 |                             |                                                                                |                                                  | 1             |
| a personal benefit contract?                                                               |                                                                 | Y <sub>6</sub>              | es X No                                                                        |                                                  | ļ             |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract?                                       |                             | _                                                                              | 6b                                               | X             |
| If "Yes" to 6b, file Form 8870                                                             |                                                                 |                             |                                                                                |                                                  |               |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s       | helter transaction?                                             | Ye                          | es 🗓 No                                                                        |                                                  | ļ             |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu         |                                                                 |                             |                                                                                | 7b                                               | L             |
| Part VIII Information About Officers, Directors, Trust                                     | ees, Foundation Ma                                              | nagers, Highly              | <b>y</b>                                                                       |                                                  |               |
| Paid Employees, and Contractors                                                            |                                                                 | <del></del>                 |                                                                                |                                                  |               |
| List all officers, directors, trustees, foundation managers and their                      | ,                                                               | (c) Compensation            | (d) Contributions to                                                           | (a) Evr                                          | 20000         |
| (a) Name and address                                                                       | (b) Title, and average<br>hours per week devoted<br>to position | (If not paid,<br>enter -0-) | (d) Contributions to<br>employee benefit plans<br>and deferred<br>compensation | (e) Exp<br>account<br>allowa                     | other<br>nces |
| PATTY HUCKABY                                                                              | PRESIDENT                                                       |                             |                                                                                |                                                  |               |
| PO BOX 1803                                                                                |                                                                 |                             |                                                                                |                                                  |               |
| DODGE CITY, KS 67801                                                                       | 1.00                                                            | 0.                          | 0.                                                                             |                                                  | 0.            |
| <del></del>                                                                                | SECRETARY/TRE                                                   | ASURER                      |                                                                                |                                                  |               |
| PO BOX 1803                                                                                |                                                                 |                             |                                                                                |                                                  |               |
| DODGE CITY, KS 67801                                                                       | 1.00                                                            | 0.                          | 0.                                                                             |                                                  | 0.            |
|                                                                                            | VICE-PRESIDEN                                                   | T                           |                                                                                |                                                  |               |
| PO BOX 1803                                                                                |                                                                 |                             |                                                                                | l                                                |               |
| DODGE CITY, KS 67801                                                                       | 1.00                                                            | 0.                          | 0.                                                                             | <u> </u>                                         | 0.            |
|                                                                                            |                                                                 | ]                           |                                                                                | ļ                                                |               |
|                                                                                            |                                                                 |                             |                                                                                |                                                  |               |
|                                                                                            |                                                                 |                             | L                                                                              | <u> </u>                                         |               |
| 2 Compensation of five highest-paid employees (other than those inc                        | (b) Title, and average                                          | enter "NONE."               | (d) Contributions to                                                           | (e) Exp                                          | 20000         |
| (a) Name and address of each employee paid more than \$50,000                              | hours per week                                                  | (c) Compensation            | (d) Contributions to<br>employee benefit plans<br>and deferred                 | l account                                        | i, other      |
|                                                                                            | devoted to position                                             | -                           | compensation                                                                   | allowa                                           | inces         |
| NONE                                                                                       |                                                                 |                             |                                                                                |                                                  |               |
|                                                                                            |                                                                 |                             |                                                                                |                                                  |               |
|                                                                                            |                                                                 | 1                           |                                                                                |                                                  |               |
|                                                                                            |                                                                 | <del> </del>                |                                                                                | <del>                                     </del> |               |
|                                                                                            |                                                                 |                             |                                                                                | ]                                                |               |
|                                                                                            |                                                                 | <del> </del>                |                                                                                | <del> </del> -                                   |               |
|                                                                                            | 1                                                               |                             |                                                                                | 1                                                |               |
| <del></del>                                                                                |                                                                 |                             |                                                                                | <del> </del>                                     |               |
|                                                                                            |                                                                 |                             |                                                                                | }                                                |               |
| Total number of other employees paid over \$50,000                                         | <u></u>                                                         | L                           |                                                                                | 1                                                |               |
| Ctal manipor of other employees paid over \$50,000                                         |                                                                 |                             | Form                                                                           | 990-PF                                           |               |
|                                                                                            |                                                                 |                             | 1 01111                                                                        |                                                  | \=U (U)       |

| Form 990-PF (2016) ELMA SCHMIDT SCHOLARSHIP FUND 23-                                                                                                                                                                                                   | <u>74308</u> | 68Page 7         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)                                                                                                                     |              |                  |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."                                                                                                                                                          |              |                  |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service                                                                                                                                                                        |              | (c) Compensation |
| NONE                                                                                                                                                                                                                                                   |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
|                                                                                                                                                                                                                                                        | ļ            |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| <del></del>                                                                                                                                                                                                                                            |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| <del></del>                                                                                                                                                                                                                                            |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| Total number of others receiving over \$50,000 for professional services                                                                                                                                                                               | <b>•</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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | E            | xpenses          |
|                                                                                                                                                                                                                                                        |              |                  |
| 1 N/A                                                                                                                                                                                                                                                  |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| 2                                                                                                                                                                                                                                                      |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| 3                                                                                                                                                                                                                                                      |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| 4                                                                                                                                                                                                                                                      | <u>-</u>     |                  |
| <b>*</b>                                                                                                                                                                                                                                               |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| Part IX-B Summary of Program-Related Investments                                                                                                                                                                                                       |              |                  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.                                                                                                                                      | , , , , ,    | Amount           |
| 1 <u>N/A</u>                                                                                                                                                                                                                                           |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| 2                                                                                                                                                                                                                                                      |              |                  |
| <u> </u>                                                                                                                                                                                                                                               |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
| All other program-related investments. See instructions.                                                                                                                                                                                               |              |                  |
| 3                                                                                                                                                                                                                                                      |              |                  |
|                                                                                                                                                                                                                                                        |              |                  |
|                                                                                                                                                                                                                                                        |              | -                |
|                                                                                                                                                                                                                                                        |              | -                |
|                                                                                                                                                                                                                                                        |              |                  |
| Total. Add lines 1 through 3                                                                                                                                                                                                                           |              | 0.               |
|                                                                                                                                                                                                                                                        | Form         | 990-PF (2016)    |

| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four                                                                                          | ndations, s     | ee 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              | 217,689.          |
| b  | Average of monthly cash balances                                                                                                                                                         | 1b              | 2,025.            |
| C  | Fair market value of all other assets                                                                                                                                                    | 1c _            |                   |
| d  | Total (add lines 1a, b, and c)                                                                                                                                                           | 1d              | 219,714.          |
| е  | Reduction claimed for blockage or other factors reported on lines 1a and                                                                                                                 |                 |                   |
|    | 1c (attach detailed explanation) 1e 0 •                                                                                                                                                  |                 |                   |
| 2  | Acquisition indebtedness applicable to line 1 assets                                                                                                                                     | 2               | 0.                |
| 3  | Subtract line 2 from line 1d                                                                                                                                                             | 3               | 219,714.          |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)                                                                                | 4               | 3,296.            |
| 5  | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4                                                                                      | 5               | 216,418.          |
| 6_ | Minimum investment return Enter 5% of line 5                                                                                                                                             | 6               | 10,821.           |
| P  | <b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here   and do not complete this part.) | id certain      |                   |
| 1  | Minimum investment return from Part X, line 6                                                                                                                                            | 1               | 10,821.           |
| 2a | Tax on investment income for 2016 from Part VI, line 5                                                                                                                                   |                 |                   |
| b  | Income tax for 2016. (This does not include the tax from Part VI.)                                                                                                                       |                 |                   |
| c  | Add lines 2a and 2b                                                                                                                                                                      | 2c              | 173.              |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                                                                                                                    | 3               | 10,648.           |
| 4  | Recoveries of amounts treated as qualifying distributions                                                                                                                                | 4               | 0.                |
| 5  | Add lines 3 and 4                                                                                                                                                                        | 5               | 10,648.           |
| 6  | Deduction from distributable amount (see instructions)                                                                                                                                   | 6               | 0.                |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1                                                                                       | 7               | 10,648.           |
| P  | art 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              | 10,766.           |
| 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:                                                                                                                     |                 |                   |
| a  | 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               | 10,766.           |
| 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               | 0.                |
| 6  | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                                                           | 6               | 10,766.           |
|    | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.                   | qualifies for t | the section       |

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Part XIII Undistributed Income (see instructions)

|                                                                                     | (a)<br>Corpus                             | (b)<br>Years prior to 2015 | (c)<br>2015                           | ( <b>d)</b><br>2016 |
|-------------------------------------------------------------------------------------|-------------------------------------------|----------------------------|---------------------------------------|---------------------|
| 1 Distributable amount for 2016 from Part XI,                                       | <del></del>                               |                            |                                       |                     |
| line 7                                                                              |                                           |                            |                                       | 10,648.             |
| 2 Undistributed income, if any, as of the end of 2016                               |                                           |                            |                                       |                     |
| a Enter amount for 2015 only                                                        | ·_ ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- |                            | 9,427.                                | <u></u>             |
| <b>b</b> Total for prior years:                                                     |                                           | 0                          |                                       |                     |
| 3 Excess distributions carryover, if any, to 2016:                                  |                                           | 0.                         | <u> </u>                              |                     |
| a From 2011                                                                         |                                           |                            |                                       |                     |
| b From 2012                                                                         |                                           |                            | 1                                     |                     |
| c From 2013                                                                         |                                           |                            |                                       |                     |
| d From 2014                                                                         |                                           |                            |                                       |                     |
| e From 2015                                                                         |                                           |                            |                                       |                     |
| f Total of lines 3a through e                                                       | 0.                                        |                            |                                       |                     |
| 4 Qualifying distributions for 2016 from                                            |                                           | <u> </u>                   | <del></del>                           | <del></del>         |
| Part XII, line 4: ▶ \$10,766.                                                       |                                           |                            |                                       |                     |
| a Applied to 2015, but not more than line 2a                                        |                                           |                            | 9,427.                                |                     |
| <b>b</b> Applied to undistributed income of prior                                   |                                           |                            |                                       |                     |
| years (Election required - see instructions)                                        |                                           | 0.                         |                                       |                     |
| c Treated as distributions out of corpus                                            |                                           |                            |                                       |                     |
| (Election required - see instructions)                                              | 0.                                        |                            |                                       |                     |
| d Applied to 2016 distributable amount                                              |                                           |                            |                                       | 1,339.              |
| e Remaining amount distributed out of corpus                                        | 0.                                        |                            |                                       |                     |
| 5 Excess distributions carryover applied to 2016                                    | 0.                                        |                            |                                       | 0.                  |
| (If an amount appears in column (d), the same amount must be shown in column (a) )  |                                           |                            |                                       |                     |
| 6 Enter the net total of each column as indicated below:                            |                                           |                            |                                       |                     |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5                                   | 0.                                        |                            |                                       |                     |
| b Prior years' undistributed income. Subtract                                       |                                           |                            |                                       |                     |
| line 4b from line 2b                                                                |                                           | 0.                         |                                       |                     |
| c Enter the amount of prior years'<br>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                                                           |                                           | <u> </u>                   |                                       |                     |
| e Undistributed income for 2015. Subtract line                                      |                                           |                            | •                                     |                     |
| 4a from line 2a. Taxable amount - see instr.                                        | <del></del>                               |                            | 0.                                    |                     |
| f Undistributed income for 2016. Subtract                                           |                                           |                            |                                       |                     |
| lines 4d and 5 from line 1. This amount must                                        |                                           |                            |                                       | 9,309.              |
| be distributed in 2017  7 Amounts treated as distributions out of                   |                                           |                            |                                       | 3,303.              |
| corpus to satisfy requirements imposed by                                           |                                           |                            |                                       |                     |
| section 170(b)(1)(F) or 4942(g)(3) (Election                                        |                                           |                            |                                       |                     |
| may be required - see instructions)                                                 | 0.                                        |                            |                                       |                     |
| 8 Excess distributions carryover from 2011                                          |                                           |                            |                                       | <u></u>             |
| not applied on line 5 or line 7                                                     | 0.                                        |                            |                                       |                     |
| 9 Excess distributions carryover to 2017.                                           |                                           |                            |                                       |                     |
| Subtract lines 7 and 8 from line 6a                                                 | 0.                                        |                            |                                       |                     |
| 0 Analysis of line 9:                                                               |                                           |                            |                                       |                     |
| a Excess from 2012                                                                  |                                           |                            |                                       |                     |
| b Excess from 2013                                                                  |                                           | !                          |                                       |                     |
| c Excess from 2014                                                                  |                                           |                            |                                       |                     |
| d Excess from 2015                                                                  |                                           |                            |                                       |                     |
| e Excess from 2016                                                                  |                                           |                            |                                       |                     |
|                                                                                     | <del></del>                               |                            | · · · · · · · · · · · · · · · · · · · | Form 000 DE (2016)  |

| Part XIV Private Operating Form 990-PF (2016) ELMA SCI                              | HMIDT SCHOL                |                            |                                                  |                             | 130868 Page 10  |
|-------------------------------------------------------------------------------------|----------------------------|----------------------------|--------------------------------------------------|-----------------------------|-----------------|
|                                                                                     |                            |                            | <del></del>                                      | N/A                         | <del> </del>    |
| 1 a If the foundation has received a ruling or                                      |                            |                            |                                                  |                             |                 |
| foundation, and the ruling is effective for                                         | ·                          | -                          | ▶ └                                              | 14040440                    |                 |
| <b>b</b> Check box to indicate whether the found                                    |                            | g toundation described     |                                                  | 4942(j)(3) or 4             | 942(j)(5)       |
| 2 a Enter the lesser of the adjusted net                                            | Tax year                   | (h) 001E                   | Prior 3 years                                    | (4) 0040                    |                 |
| income from Part I or the minimum                                                   | (a) 2016                   | <b>(b)</b> 2015            | (c) 2014                                         | (d) 2013                    | (e) Total       |
| investment return from Part X for                                                   |                            |                            |                                                  |                             |                 |
| each year listed                                                                    |                            |                            |                                                  | <u> </u>                    |                 |
| <b>b</b> 85% of line 2a                                                             |                            |                            | <u> </u>                                         | <u> </u>                    |                 |
| c Qualifying distributions from Part XII,                                           | i                          |                            |                                                  | }                           |                 |
| line 4 for each year listed                                                         |                            |                            |                                                  |                             |                 |
| d Amounts included in line 2c not                                                   |                            |                            |                                                  |                             |                 |
| used directly for active conduct of                                                 |                            |                            |                                                  | 1                           |                 |
| exempt activities                                                                   |                            |                            |                                                  |                             |                 |
| e Qualifying distributions made directly                                            |                            |                            |                                                  |                             |                 |
| for active conduct of exempt activities.                                            |                            |                            |                                                  |                             |                 |
| Subtract line 2d from line 2c                                                       |                            |                            |                                                  |                             | ĺ               |
| 3 Complete 3a, b, or c for the                                                      |                            |                            |                                                  |                             |                 |
| alternative test relied upon:                                                       |                            |                            |                                                  |                             |                 |
| a "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              |                            |                            | <del>                                     </del> |                             |                 |
| 2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed |                            |                            | ;                                                | İ                           |                 |
| c "Support" alternative test - enter:                                               |                            |                            |                                                  |                             |                 |
| (1) Total support other than gross                                                  | ľ                          |                            | 1                                                |                             |                 |
| investment income (interest,                                                        |                            |                            |                                                  |                             |                 |
| dividends, rents, payments on                                                       |                            |                            |                                                  |                             |                 |
| securities loans (section<br>512(a)(5)), or royalties)                              |                            |                            |                                                  |                             |                 |
| (2) Support from general public                                                     |                            |                            | <del>                                     </del> | <del> </del>                |                 |
| and 5 or more exempt                                                                |                            |                            |                                                  |                             |                 |
| organizations as provided in section 4942(j)(3)(B)(iii)                             | ļ                          |                            |                                                  |                             |                 |
| (3) Largest amount of support from                                                  |                            |                            |                                                  |                             |                 |
| an exempt organization                                                              |                            |                            |                                                  |                             |                 |
| (4) Gross investment income                                                         |                            |                            |                                                  |                             |                 |
| Part XV Supplementary Infor                                                         | mation (Comple             | te this part only          | if the foundation                                | n had \$5,000 or m          | ore in assets   |
| at any time during the                                                              | ne year-see instr          | uctions.)                  |                                                  |                             |                 |
| 1 Information Regarding Foundation                                                  | Managers:                  |                            |                                                  |                             |                 |
| a List any managers of the foundation who                                           | have contributed more t    | han 2% of the total cor    | ntributions received by the                      | e foundation before the cl  | ose of any tax  |
| year (but only if they have contributed m                                           | ore than \$5,000). (See se | ection 507(d)(2).)         |                                                  |                             |                 |
| NONE                                                                                |                            |                            |                                                  |                             |                 |
| b List any managers of the foundation who                                           | own 10% or more of the     | stock of a corporation     | (or an equally large port                        | ion of the ownership of a j | partnership or— |
| other entity) of which the foundation has                                           | a 10% or greater interes   | t.                         |                                                  |                             |                 |
| NONE                                                                                |                            |                            |                                                  |                             |                 |
| 2 Information Regarding Contribution                                                | on, Grant, Gift, Loan,     | Scholarship, etc., F       | Programs:                                        |                             |                 |
|                                                                                     | ly makes contributions t   | o preselected charitable   | e organizations and does                         | not accept unsolicited req  |                 |
| a The name, address, and telephone numb                                             | <del></del>                |                            |                                                  |                             | <del></del>     |
|                                                                                     |                            |                            |                                                  |                             |                 |
| SEE STATEMENT 7                                                                     |                            |                            |                                                  |                             |                 |
| <b>b</b> The form in which applications should be                                   | submitted and informat     | ion and materials they     | should include:                                  |                             |                 |
| c Any submission deadlines:                                                         | <del></del>                |                            |                                                  |                             |                 |
| d Any restrictions or limitations on awards,                                        | such as by geographica     | l areas, charitable fields | s, kınds of ınstitutions, or                     | other factors:              |                 |
|                                                                                     |                            |                            |                                                  |                             |                 |

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year GABRIELA QUEZADA NONE N/A EDUCATIONAL 300 E MULBERRY ST 3,100. DODGE CITY, KS 67801 NONE N/A ANNIE BUECKERT GOERTZEN EDUCATIONAL 31506 2 RD 3,400. COPELAND, KS 67837 VICTORIA TOOTHAKER NONE N/A EDUCATIONAL 10730 HWY 50 2,000. DODGE CITY, KS 67801 NONE N/A EDUCATIONAL NAILA TRENZADO 2803 TOALSON AVE 1,900. DODGE CITY KS 67801 Total **▶** 3a 10 400. **b** Approved for future payment NONE <u>Total</u>

| Fait XVI-A   Alialysis of illcolle-Floudchig Activity | Part XVI-A | Analysis of Income-Producing Activ | rities |
|-------------------------------------------------------|------------|------------------------------------|--------|
|-------------------------------------------------------|------------|------------------------------------|--------|

| Enter gross amounts unless otherwise indicated.                 | Unrelate        | d business income     | Exclud                                           | ed by section 512, 513, or 514 | (e)                                   |
|-----------------------------------------------------------------|-----------------|-----------------------|--------------------------------------------------|--------------------------------|---------------------------------------|
| •                                                               | (a)<br>Business | ( <b>b)</b><br>Amount | (C)<br>Exclu-<br>sion<br>code                    | (d)<br>Amount                  | Related or exempt function income     |
| 1 Program service revenue:                                      | code            |                       | Code                                             |                                |                                       |
| å                                                               | <del> </del>    |                       | 1                                                |                                |                                       |
| b                                                               | <del></del>     | <del></del>           | <del>                                     </del> |                                |                                       |
| c                                                               |                 |                       | <del>}                                    </del> |                                |                                       |
| d                                                               | <del>   </del>  | <del> </del>          | +                                                |                                |                                       |
| ·                                                               | <del>   </del>  | <del></del>           | <del>                                     </del> | <del></del>                    |                                       |
|                                                                 | <del></del>     | <del> </del>          | <del>  -  </del>                                 | <del> </del>                   | <del></del>                           |
| g Fees and contracts from government agencies                   |                 |                       | +                                                |                                | <del></del>                           |
| 2 Membership dues and assessments                               |                 | <del>-</del>          | +-+                                              |                                | <del></del>                           |
| 3 Interest on savings and temporary cash                        |                 |                       | 1                                                |                                |                                       |
| investments                                                     | <b>}</b>        |                       | 1 4                                              | F 470                          | · · · · · · · · · · · · · · · · · · · |
| 4 Dividends and interest from securities                        | <del> </del>    |                       | 14                                               | 5,478.                         |                                       |
| 5 Net rental income or (loss) from real estate:                 | <b> </b>        |                       | +-+                                              |                                |                                       |
| a Debt-financed property                                        | <del> </del>    |                       |                                                  |                                |                                       |
| b Not debt-financed property                                    |                 |                       | +-+                                              |                                |                                       |
| 6 Net rental income or (loss) from personal property            |                 |                       |                                                  |                                |                                       |
| 7 Other investment income                                       |                 |                       |                                                  |                                |                                       |
| 8 Gain or (loss) from sales of assets other                     | 1               |                       | 1 1                                              |                                |                                       |
| than inventory                                                  | <u> </u>        | ·                     | 14                                               | 1,731.                         | 3,882.                                |
| 9 Net income or (loss) from special events                      |                 |                       |                                                  |                                |                                       |
| 10 Gross profit or (loss) from sales of inventory               |                 |                       |                                                  |                                | <del></del>                           |
| 11 Other revenue:                                               | ļ               |                       | 1 (                                              |                                |                                       |
| a                                                               |                 | ·                     |                                                  |                                |                                       |
| b                                                               |                 | <u> </u>              |                                                  |                                |                                       |
| C                                                               | [               |                       |                                                  |                                | <u>.</u>                              |
| d                                                               |                 |                       |                                                  |                                |                                       |
| e                                                               | ļ               |                       | 1_1                                              |                                |                                       |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                 | 0.                    |                                                  | 7,209.                         |                                       |
| 13 Total. Add line 12, columns (b), (d), and (e)                |                 |                       |                                                  | 13                             | 11,091.                               |
| (See worksheet in line 13 instructions to verify calculations.) |                 |                       |                                                  |                                |                                       |
| Part XVI-B Relationship of Activities t                         | to the Acco     | mplishment of Ex      | kempt                                            | Purposes                       |                                       |
| Line No. Explain below how each activity for which inco         |                 |                       | Contribu                                         | uted importantly to the accomp | lishment of                           |
| 8 THE GAINS WERE USED TO                                        |                 |                       | PAII                                             | TO THE CANDI                   | DATES.                                |
|                                                                 | <u> </u>        |                       |                                                  | <del></del>                    |                                       |

| Line No.<br>▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |                |      |      |    |      |              |          |    |     |             |  |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------|------|----|------|--------------|----------|----|-----|-------------|--|
| 8             | THE                                                                                                                                                                                                                           | GAINS          | WERE | USED | TO | FUND | SCHOLARSHIPS | PAID     | TO | THE | CANDIDATES. |  |
|               | l                                                                                                                                                                                                                             |                |      | _    |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      | _  |      |              | <u></u>  |    |     |             |  |
|               |                                                                                                                                                                                                                               | ·              |      |      |    |      |              |          |    |     |             |  |
|               | <u> </u>                                                                                                                                                                                                                      | . <del>-</del> |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              | <u> </u> |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               | ļ                                                                                                                                                                                                                             |                |      |      |    |      |              |          |    |     |             |  |
|               | <u></u>                                                                                                                                                                                                                       |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |
|               |                                                                                                                                                                                                                               |                |      |      |    |      |              |          |    |     |             |  |

ELMA SCHMIDT SCHOLARSHIP FUND 23-7430868 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr )? correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here X Yes PRESIDENT Signature of officer of trustee Title Print/Type preparer's name Preparer's signature Check [ Date self- employed PAMELA S. NILHAS, Paid P00595521 Preparer Firm's EIN  $\triangleright$  48-1210879 Firm's name ► SMOLL & BANNING, CPA'S, LLC **Use Only** Firm's address ▶ 2410 CENTRAL AVE

Form 990-PF (2016)

Phone no. 620-225-6100

DODGE CITY, KS 67801

| DS AND INTER                 | EST FROM SECUR                                                                                                         | ITIES ST                                                                                                                                                                                                                                                                     | ATEMENT 1                                                                                                                                                                                                                                                                                                    |
|------------------------------|------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| GAINS                        | REVENUE                                                                                                                | (B)<br>NET INVEST-<br>MENT INCOME                                                                                                                                                                                                                                            | (C)<br>ADJUSTED<br>NET INCOME                                                                                                                                                                                                                                                                                |
| 1,73                         | 1. 5,478.                                                                                                              | 5,478.                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                              |
| 1,73                         | 5,478.                                                                                                                 | 5,478.                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                              |
| ACCOUNTI                     | NG FEES                                                                                                                | rs                                                                                                                                                                                                                                                                           | PATEMENT 2                                                                                                                                                                                                                                                                                                   |
| (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME                                                                                      | (C)<br>ADJUSTED<br>NET INCOME                                                                                                                                                                                                                                                | (D)<br>CHARITABLE<br>PURPOSES                                                                                                                                                                                                                                                                                |
| 666.                         | 333.                                                                                                                   |                                                                                                                                                                                                                                                                              | 333.                                                                                                                                                                                                                                                                                                         |
| 666.                         | 333.                                                                                                                   |                                                                                                                                                                                                                                                                              | 333.                                                                                                                                                                                                                                                                                                         |
| OTHER PROFES                 | SIONAL FEES                                                                                                            | ST                                                                                                                                                                                                                                                                           | чатемент 3                                                                                                                                                                                                                                                                                                   |
| (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME                                                                                      | (C)<br>ADJUSTED<br>NET INCOME                                                                                                                                                                                                                                                | (D)<br>CHARITABLE<br>PURPOSES                                                                                                                                                                                                                                                                                |
| 1,991.                       | 1,991.                                                                                                                 | <del></del>                                                                                                                                                                                                                                                                  | 0.                                                                                                                                                                                                                                                                                                           |
| 1,991.                       | 1,991.                                                                                                                 |                                                                                                                                                                                                                                                                              | 0.                                                                                                                                                                                                                                                                                                           |
| 1 990-PF TAXES               |                                                                                                                        | ST                                                                                                                                                                                                                                                                           | 'ATEMENT 4                                                                                                                                                                                                                                                                                                   |
|                              |                                                                                                                        |                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                              |
| (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME                                                                                      | (C)<br>ADJUSTED<br>NET INCOME                                                                                                                                                                                                                                                | (D)<br>CHARITABLE<br>PURPOSES                                                                                                                                                                                                                                                                                |
| <b>EXPENSES</b>              | NET INVEST-                                                                                                            | ADJUSTED                                                                                                                                                                                                                                                                     | CHARITABLE                                                                                                                                                                                                                                                                                                   |
|                              | CAPITAL GAINS DIVIDEND 1,73 9. 1,73 ACCOUNTI  (A) EXPENSES PER BOOKS 666.  OTHER PROFES  (A) EXPENSES PER BOOKS 1,991. | CAPITAL (A) GAINS REVENUE DIVIDENDS PER BOOKS  9. 1,731. 5,478.  9. 1,731. 5,478.  ACCOUNTING FEES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  666. 333.  OTHER PROFESSIONAL FEES  (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME  1,991. 1,991.  1,991. 1,991. | CAPITAL (A) (B) GAINS REVENUE NET INVEST- DIVIDENDS PER BOOKS MENT INCOME  09. 1,731. 5,478. 5,478.  ACCOUNTING FEES ST  (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME  666. 333.  OTHER PROFESSIONAL FEES ST  (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME  1,991. 1,991.  1,991. 1,991. |

| FORM 990-PF                              | OTHER EXPENSES               |                                |                  | STATEMENT 5          |  |
|------------------------------------------|------------------------------|--------------------------------|------------------|----------------------|--|
| DESCRIPTION                              | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST<br>MENT INCO |                  |                      |  |
| BOX RENT<br>BONDING INSURANCE<br>POSTAGE | 8.<br>100.<br>58.            | 10                             | 4.<br>00.<br>29. | 4.<br>0.<br>29.      |  |
| TO FORM 990-PF, PG 1, LN 23              | 166.                         | 1:                             | 33.              | 33.                  |  |
| FORM 990-PF                              | OTHER INV                    | ESTMENTS                       |                  | STATEMENT 6          |  |
| DESCRIPTION                              |                              | LUATION<br>ETHOD               | BOOK VALUE       | FAIR MARKET<br>VALUE |  |
| LPL FINANCIAL                            |                              | COST                           | 142,166.         | 231,514.             |  |
| TOTAL TO FORM 990-PF, PART I             | I, LINE 13                   |                                | 142,166.         | 231,514.             |  |

FORM 990-PF

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

STATEMENT

•

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PATTY HUCKABY PO BOX 1803 DODGE CITY, KS 67801

TELEPHONE NUMBER

(620) 227-8803

#### FORM AND CONTENT OF APPLICATIONS

APPLICATION FORMS REQUIRE BIOGRAPHICAL DATA INCLUDING NAME, ADDRESS, TELEPHONE NUMBER, SOCIAL SECURITY NUMBER, DATE OF BIRTH, CURRENT EMPLOYER NAME AND ADDRESS, YEARS OF EMPLOYMENT, MARITAL STATUS, NUMBER OF YEARS MARRIED, AND SPOUSE'S NAME AND OCCUPATION. EDUCATIONAL DATA IS ALSO REQUIRED. THIS INCLUDES THE NAME AND ADDRESS OF THE INSTITUTION TO BE ATTENDED AND THE DATE CLASSES BEGIN.

#### ANY SUBMISSION DEADLINES

APRIL 1 FOR FALL SEMESTER; NOVEMBER 1 FOR SPRING SEMESTER

### RESTRICTIONS AND LIMITATIONS ON AWARDS

QUALIFIED STUDENT MUST: A) BE A CITIZEN OF THE UNITED STATES, B) BE A WOMAN FROM SOUTHWESTERN KANSAS, C) HAVE GRADUATED FROM AN ACCREDITED HIGH SCHOOL OR HAVE GED EQUIVALENT, D) BE ENROLLED IN AT LEAST SIX CREDIT HOURS PER SEMESTER OR IN A QUALIFIED VOCATIONAL-TECHNICAL PROGRAM, E) DOCUMENT FINANCIAL NEED.