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

2017

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For cale	endar year 2017 or tax year beginning	, 2017,	and ending		
Paul	Family Foundation		[1	A Employer identification num 20-4100160	ıber
201	S Kansas Avenue			B Telephone number (see inst	
Tope	ca, KS 66603		}		
				C If exemption application is	pending, check here
G Che	ck all that apply Initial return	Initial return of a form Amended return	ner public charity	D 1 Foreign organizations, chec	k here
	Address change	Name change		2 Foreign organizations meet here and attach computation	
H Che	ck type of organization. X Section 501	(c)(3) exempt private for	oundation O	•	L
I Fair	Section 4947(a)(1) nonexempt charitable translated tran	ounting method: X C		E If private foundation status under section 507(b)(1)(A)	
(fron	n Part II, column (c), line 16)	Other (specify)	L-1 ; }	F If the foundation is in a 60	-month termination
► \$		column (d) must be on	cash basis.)	under section 507(b)(1)(B)	, check here .
Part I	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)	,			purposes (cash basis only)
	(See instructions).) 1 Contributions, gifts, grants, etc., received (attach schedule)	10,000.			(000), 2000 000,
	2 Check I if the foundation is not required to attach Sch B	10,000.	<u></u>		
	3 Interest on savings and temporary cash investments	21.	2:	1. 21.	
	4 Dividends and interest from securities .	21.	2.	21.	113-11 - 11-1-11-11-11-11-11-11-11-11-11-11
	5 a Gross rents				
R	or (loss) 6 a Net gain or (loss) from sale of assets not on line 10				
E V	b Gross sales price for all assets on line 6a				***************************************
N N	7 Capital gain net income (from Part IV, line 2) 8 Net short term capital gain				
Ü	9 Income modifications				
L-	10 a Gross sales less returns and allowances				
	b Less Cost of goods sold .				
	c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule)				
	11 Other income (attach schedule)				
	12 Total Add lines 1 through 11	10,021.	2	1. 21.	
	13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages	0.		_	
	15 Pension-plans,-employee-benefits				
A D	16 a Legal fees kaitach ach adulb V C D b Accounting Jees Latlach sch				
M	c Object professional fees (attach sch)				
O I P S	17 中級 MAR 2 1 2018 19				
O PERAT	10 Takes (allacit schools)(acc mond)				
i i	schedule) and depteron N				
N V G E	21 Travel, conferences, and meetings		 		
A E N X D P	22 Printing and publications				
D P E	23 Other expenses (attach schedule)		ļ		
AND ENSES	24 Total operating and administrative				
š	expenses Add lines 13 through 23 25 Contributions, gifts, grants paid Stmt 1	12,200.	<u> </u>		12,200.
	26 Total expenses and disbursements Add lines 24 and 25			0. 0.	12,200.
	27 Subtract line 26 from line 12:	12,200.		<u> </u>	12,200.
	a Excess of revenue over expenses	-2,179.			
	b Net investment income (if negative, enter -0)	-, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	2	1.	
	C Adjusted net income (if negative, enter 0)			21.	

5

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

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

9,592

9,592.

4

5

6

4 5 4 4 4	Losses for Tax on Investmen		145	17.55	(1)
(a) List and descri 2-story brick ward	be the kınd(s) of property sold (for exal ehouse, or common stock, 200 shares I	mple, real estate, MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A			D Donation		
b					
c					
<u>d</u>					
e (a) Cross sales areas	(f) Depreciation allowed	(g) Cost or other ba	sis	(h) Gain or	(lose)
(e) Gross sales price	(or allowable)	plus expense of sa		((e) plus (f) m	
a					
b					
c					
d					
Complete out for cools at		15 - formatalan an 10/21/6			
	owing gain in column (h) and owned by (i) Adjusted basis	(k) Excess of col (i)		(I) Gams (Col. gain minus col. (k), bi	
(i) FMV as of 12/31/69	as of 12/31/69	over col. (j), if any		ian -0-) or Losses (fro	
a					
b					
С					
d					
e					
2 Capital gain net income or (i	let capital loss).	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5) a	and (6).		j	
	ine 8, column (c). See instructions, If (l	oss), enter -0-	- _	Ì	
Part V Qualification Unc	der Section 4940(e) for Reduce	d Tay on Not Invest	3	<u> </u>	
······································	ate foundations subject to the section 4			N/A	
	·	is rotal tax on not invocan	on moonion	MA	
If section 4940(d)(2) applies, leave	this part blank.				
Was the foundation liable for the s	ection 4942 tax on the distributable am	ount of any year in the ba	se period?	Yes	
If 'Yes,' the foundation doesn't qu	alify under section 4940(e). Do not com	plete this part.			No
 Enter the appropriate amount 	t in each column for each year see th				∐ No
(a) Base period years	it in each column for each year, see th	e instructions before maki	ng any entries.		No No
	(b)	(c)	ng any entries.	(d)	
Calendar year (or tax year				(d) Distribution (coi. (b) divided	ratio
Calendar year (or tax year beginning in)	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013	(b)	(c) Net value of		Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for	(b) Adjusted qualifying distributions the 5-year base period — divide the to	(c) Net value of noncharitable-use as	sets 2	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for	Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets 2	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the foundar	(b) Adjusted qualifying distributions the 5-year base period — divide the to	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	sets 2	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the foundar	(b) Adjusted qualifying distributions the 5-year base period — divide the tollon has been in existence if less than 5	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	sets 2 the 3	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the founda 4 Enter the net value of nonch 5 Multiply line 4 by line 3	(b) Adjusted qualifying distributions the 5-year base period — divide the tollon has been in existence if less than 5	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	sets 2 the 3	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the founda 4 Enter the net value of nonch 5 Multiply line 4 by line 3 6 Enter 1% of net investment	Adjusted qualifying distributions the 5-year base period — divide the totion has been in existence if less than staritable-use assets for 2017 from Part	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	the 2 4 5 6	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the founda 4 Enter the net value of nonch 5 Multiply line 4 by line 3 6 Enter 1% of net investment 7 Add lines 5 and 6	(b) Adjusted qualifying distributions the 5-year base period — divide the tolion has been in existence if less than 5 haritable-use assets for 2017 from Part income (1% of Part I, line 27b)	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	sets 2 the 3 4 5 6 7	Distribution	ratio
Calendar year (of tax year beginning in) 2016 2015 2014 2013 2012 2 Total of line 1, column (d) 3 Average distribution ratio for number of years the founda 4 Enter the net value of nonch 5 Multiply line 4 by line 3 6 Enter 1% of net investment	(b) Adjusted qualifying distributions the 5-year base period — divide the tolion has been in existence if less than 5 haritable-use assets for 2017 from Part income (1% of Part I, line 27b)	(c) Net value of noncharitable-use as stal on line 2 by 5.0, or by years	the 2 4 5 6	Distribution	ratio

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)	
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.		
Date of ruling or determination letter. (attach copy of letter if necessary — see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V,		0.
check here. ► and enter 1% 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)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		0
foundations only; others, enter -0-) 2 3 Add lines 1 and 2		0.
3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 4		0.
,		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments.		
a 2017 estimated tax pints and 2016 overpayment credited to 2017 . 6 a		
b Exempt foreign organizations — tax withheld at source 6b		
c Tax paid with application for extension of time to file (Form 8868)		
d Backup withholding erroneously withheld 6d		
7 Total credits and payments. Add lines 6a through 6d		0.
8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8		
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed .		0.
10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded 11		
Part VII-A Statements Regarding Activities		
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	res No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1 b	X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?	1 c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
(1) On the foundation \$\ 0. (2) On foundation managers . \$\ 0 \ C \ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	<u>' </u>	
foundation 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	X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N/A
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.		1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		ì
By language in the governing instrument, or		
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	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 XV	7	Х
8 a Enter the states to which the foundation reports or with which it is registered. See instructions KS		4
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 <i>General Instruction G?</i> If 'No,' attach explanation	86	Х
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If 'Yes,' complete Part XIV	9	x_2
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		,,
and addresses	10	X X
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Pai	1 VII-A Statements Regarding Activities (continued)		,	
,11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions	11	Yes	No 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
1.4	Website address N/A The books are in care of Nancy Paul Telephone no. (785)	233	-07	7
14	Localed at > 201 S Kansas Avenue Topeka KS ZIP + 4 > 66603	_232	_0_/_	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	_N/?	<i>-</i>	
	and enter the amount of tax-exempt interest received or accrued during the year . Line 15		Yes	N/A No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 :	During the year, did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? [Yes X] No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(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.) Yes X No			
	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	1 t	N	/A
	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 2017?	10		X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	21	, ,	I/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	-	1	111
	► 20 , 20 , 20 , 20 _ , 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	b If 'Yes,' did it have excess business holdings in 2017 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 2017)	31	1 0	I/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4;	a	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	41		X
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Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Rec	uired (continued)			
5 a During the year, did the foundation pay or incu	r any amount to.				Yes	No
(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e))?	Yes X	No		
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registrat	ion drive?			No		
(3) Provide a grant to an individual for travel,	No					
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? See instructions	No					
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, i of cruelly to children o	literary, or r anımals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in See instructions	the transactions fail to q a current notice regardi	ualify under the except ng disaster assistance?	ions	5 b	N	A
Organizations relying on a current notice regard	ding disaster assistance	, check here	▶ 🗍			
c if the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	ne foundation claim exer ibility for the grant?	mption from the	N/A Yes	No		
If 'Yes,' attach the statement required by Regu	lations section 53.4945-	-5(d).		'		ļ
6 a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indir	ectly, to pay premiums	Yes X	No		
b Did the foundation, during the year, pay premit	ums, directly or indirectly	y, on a personal benefi	t contract?	6 b		Х
If 'Yes' to 6b, file Form 8870.	alian a noviki ta a nvakih	tad law shallar bransaa	tion? Type V	1		
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				No 7 b		
Part VIII Information About Officers, Dire				**/ **	<u> </u>	Ь
and Contractors	000013, 1143003, 10	arraacion managoro	, mgmy raid Empi	oy 000,		
1 List all officers, directors, trustees, and founda	ation managers and thei	r compensation. See in	structions.	· · · · · · · · · · · · · · · · · · ·		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens	se acc Illowar	ount, nces
Howard T Paul 100 Lakeshore Dr PH55 North Palm Beach, FL 33408	President 0	0.	0.			0
Nancy A Paul	Secretary	0.	0.	 		0
100 Lakeshore Dr PH55 North Palm Beach, FL 33408	0	•		1		
Jeff Berkley	Director	0.	0.			0
3001 SW Wanamaker	0					
Topeka, KS 66614						
Steven J Knoll	Director	0.	0.			0
12512 Horse Creek Dr	0			1		
Perry, KS 66073	L					
2 Compensation of five highest-paid employees		ded on line 1 – see ins		er NONE.		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other a		
None						
			1			
Total number of other employees paid over \$50,000	.l	,	<u> </u>			0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	l Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
	,
	1
	İ
	ļ
Total number of others receiving over \$50,000 for professional services	
	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	
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.	Expenses
1 <u>N/A</u>	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	2
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	2 Amount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.
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Form 990-PF (2017) Paul Family Foundation	20-4100160	
Part X Minimum Investment Return (All domestic foundations must complete this p see instructions.)	art. Foreign fou	indations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. a Average monthly fair market value of securities	1 a	
b Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations, check here ► and do not complete this part XI.		dations
1 Minimum investment return from Part X, line 6	1	
2 a Tax on investment income for 2017 from Part VI, line 5		
b Income tax for 2017. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	12,200.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,200.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	. 6	12,200.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	helher the foundation	on

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI, line 7				2017
2 Undistributed income, if any, as of the end of 2017.				0.
a Enter amount for 2016 only				
b Total for prior years 20 , 20 , 20			0.	
3 Excess distributions carryover, if any, to 2017.		0.		
a From 2012 12, 475.				
b From 2013 12, 000.				
c From 2014 27,000.				
d From 2015 71, 200.				
e From 2016 18, 200.				
f Total of lines 3a through e	140,875.			
4 Qualifying distributions for 2017 from Part	140,675.			~~~~
XII, line 4. ► \$12,200.				
a Applied to 2016, but not more than line 2a				
b Applied to undistributed income of prior years			0.	
(Election required — see instructions)				
c Treated as distributions out of corpus		0.		
(Election required — see instructions)	0.			
d Applied to 2017 distributable amount	0.			
e Remaining amount distributed out of corpus	12,200.			0.
5 Excess distributions carryover applied to 2017	12,200.			
(If an amount appears in column (d), the same amount must be shown in column (a).)	<u> </u>			0.
same amount must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	153,075.			
b Prior years' undistributed income. Subtract	2007073.			
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed			***************************************	
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed .		0.		
d Subtract line 6c from line 6b. Taxable		·		
amount - see instructions		0.		
e Undistributed income for 2016 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2017. Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2018				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				<u></u>
section 170(b)(1)(F) or 4942(a)(3) (Flection				
may be required — see instructions)	0.		1	
8 Excess distributions carryover from 2012 not			······	***************************************
applied on line 5 or line 7 (see instructions)	12,475.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	140,600.			
10 Analysis of line 9.			•	***************************************
a Excess from 2013 12,000.				
b Excess from 2014 27,000.				
c Excess from 2015 71, 200.				
d Excess from 2016 18,200.	-			
e Excess from 2017 12,200.				

Form 990-PF (2017) Paul Family Foun Part XIV Private Operating Founda		ustions and Da	ert VIII A guartia	20-4100160	
1 a If the foundation has received a ruling or consistency is effective for 2017, enter the date of the	etermination letter				N/A
b Check box to indicate whether the foundat	•	rating foundation d	escribed in section	4942()(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	T	Prior 3 years	13 1207(8) 51 1	
income from Part I or the minimum investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
b 85% of line 2a					/
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter				1	
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter.					
 Total support other than gross investment income (interest, dividends, rents, payments 					
on securities loans (section 512(a)(5)), or royalties)			_		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	1				
Part XV Supplementary Information assets at any time during the	ı (Complete this ne year – see ir	s part only if th istructions.)	e foundation ha	nd \$5,000 or more	e in
Information Regarding Foundation Manag a List any managers of the foundation who holes of any tax year (but only if they have	nave contributed mo	ore than 2% of the han \$5,000). (See	total contributions re section 507(d)(2))	ceived by the foundal	ion before the
None					
b List any managers of the foundation who of a partnership or other entity) of which the None	own 10% or more of foundation has a 10	the stock of a cor)% or greater intere	poration (or an equa est	lly large portion of the	ownership of
2 Information Regarding Contribution, Gran	t. Gift. Loan, Schol	arship, etc. Progra	oms:		
Check here X if the foundation only requests for funds. If the foundation make 2a, b, c, and d. See instructions	nakes contributions	to preselected cha	aritable organizations		
a The name, address, and telephone number	er or email address	of the person to w	hom applications sho	ould be addressed	
b The form in which applications should be	submitted and infor	mation and materia	als they should include	le:	
			•		
c Any submission deadlines.					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of ii	nstitutions, or other fa	ctors.
			· · · · · · · · · · · · · · · · · · ·		000 DE (003E)
BAA	Τŧ	EEA0310L 09/14/17		F	orm 990-PF (2017)

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
Name and address (home or business) a Paid during the year	or substantial contributor	recipient						
T-1-1		L	► 3a					
Total			► 3a					
b Approved for future payment								
Total			► 3 b					
BAA	TEEA0501L	08/24/17		Form 990-PF (2017)				

ter gröss	amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemption function income
l Progr	am service revenue:	code		code		(See instructions
а						
b			·	1		
c						
d						
e						
f				ļ		
g Fees	and contracts from government agencies					
Meml	pership dues and assessments			 		
Interes	t on savings and temporary cash investments		21.			
Divide	ends and interest from securities					
Net re	ental income or (loss) from real estate:					
	financed property		······	 		
	ebt-financed property					
	ital income or (loss) from personal property					
	investment income					
	(loss) from sales of assets other than inventory			 		
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
	revenue:			ļ		
	revenue,			<u> </u>		
a						
b						
ć		 		ļ		
i		<u> </u>				
е						
						
	tal Add columns (b), (d), and (e)		21.			
Total	. Add line 12, columns (b), (d), and (e)		21.		13	2
Total e works	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation				•	2
Total	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation			t Purpe	•	2
Total e works	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	n the
Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the	e Accomplis	shment of Exemp	t XVI-A	OSES	n the
Total works rt XVI ne No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	n the
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Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
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Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No. ▼	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No. ▼	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No. ▼	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works t XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works rt XVI e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the
Total works rt XVI ne No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation B Relationship of Activities to the Explain below how each activity for which in	e Accomplis	shment of Exemp	t XVI-A	OSES	o the

Form 990-PF (2017) Paul Family Foundation 20-4100160 [Part XVII | Information Regarding Transfers to and Transactions and Relationships With Noncharitable

		xempt Organiz	ations						STATE CONTRACTOR		
de	scribed	rganization directly of I in section 501 (c) of	f the Code (other tl	e in any of th han section 5	e following will 601(c)(3) organ	n any other izations) or	organization in section 52	7,		Yes	No
	_	political organization political organization from the reporting to		ncharitable ex	xempt organiza	ation of.					
	Cash		iodiladion to a not	ionamapie o	Actinpt of garage				1 a (1)	,	X
٠,		assets		•				•	1 a (2)	+	X
		nsactions.									
(1)	Sales	s of assets to a nonc	charitable exempt of	organization					1 b (1)	,	Х
		nases of assets from		_	ızatıon				1 b (2)		X
(3)	Rent	al of facilities, equipi	ment, or other ass	ets					1 b (3)		X
(4)	Reim	bursement arranger	nents						1 b (4))	X
(5)	Loan	s or Ioan guarantees	S						1 b (5)		X
(6)	Perfo	rmance of services	or membership or	fundraising s	solicitations				1 b (6		X
c Sh	arıng (of facilities, equipme	nt, mailing lists, ot	her assets, c	or paid employe	ees			1 c	J	Х
d If the an	he ans good y trans	swer to any of the at s, other assets, or s action or sharing ar	oove is 'Yes,' comp ervices given by th rangement, show i	olete the follo ne reporting fo n column (d)	wing schedule oundation. If th the value of th	Column (I le foundation le goods, o	b) should alwa on received les liher assels, o	lys show the fair ss than fair mark or services receiv	market valu ket value in red.	e of	
(a) Line i	10.	(b) Amount involved	(c) Name of none	charitable exemp	t organization	(d) D	escription of trans	sfers, transactions, a	nd sharing arra	ingement	.s
N/A											
		· · · · · · · · · · · · · · · · · · ·				ļ					
						ļ					
						<u> </u>					
						<u> </u>					
						ļ					
											
	-										
	-										
								·			
											
de	scribe	undation directly or i d in section 501(c) o complete the followi	of the Code (other t	with, or relate than section t	ed to, one or n 501(c)(3)) or in	nore tax-ex section 52	empt organiza 7?	ations		es X	No
		Name of organization		(b) Type	of organization	1	(c) Description of	relationship		
N/A				3.5				<u> </u>	<u> </u>		
								·			
	•										
	Under p	enalties of perjury, I declare and complete Declaration	that I have examined this	eturn, including ad	ccompanying schedu	les and statem	ents, and to the best	t of my knowledge and	belief, it is true,		
Sign	COITECT,	and complete Declaration	To preparer (officer than	taxpayer) is base			paret rias arry know	,,,,cage	May th	e IRS disc	cuss
Here				7	3/14/18	• • D	rocidont		this ref	urn with t Ir shown b	the pelow?
l	Signa	ture of officer or trustee			Date	Titl	resident		See in	structions	'n
	Oigita	Print/Type preparer's na	ame	Preparer's s			Date	Check	ıf PTİN	Yes	No
				'	•			self employed	"		
Paid				126TI-1	Prepared		L	Firm's EIN			
Prepa		Firm's name						LIMIS CIN .	· · · · ·		
Use O	nıy	Firm's address						Phone no			
RΔΔ								1 None no	Form (90-PF	(2017)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545 0047

2017

Name of the organization		Employer identification number			
Paul Family Foundation		20-4100160			
Organization type (check one).					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treat	ted as a private foundation			
	527 political organization	·			
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated a	as a private foundation			
		as a private realisation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Ge	eneral Rule or a Special Rule.				
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule	and a Special Rule See instructions.			
General Rule					
X For an organization filing Form 990, 990-EZ	, or 990-PF that received, during the year, contributi	ions totaling \$5,000 or more (in money or			
property) from any one contributor. Comple	te Parts I and II. See instructions for determining a	contributor's total contributions			
Special Rules					
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations					
under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i)					
Form 990, Part VIII, line 1h, or (ii) Form 99	Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
For an organization described in section 501(c)(7) (8), or (10) filing Form 900 or 990 F7 that received from any one contributor					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational					
purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 50	r1(c)(7), (8), or (10) filing Form 990 or 990-EZ that re or religious, charitable, etc., purposes, but no such c	ceived from any one contributor,			
\$1,000 If this box is checked, enter here the	ne total contributions that were received during the y	ear for an <i>exclusively</i> religious.			
charitable, etc., purpose Don't complete as	ny of the parts unless the General Rule applies to th	is organization because			
it received nonexclusively religious, charital	ole, etc., contributions totaling \$5,000 or more during	g the year			
		0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules doesn't fil ne 2, of its Form 990, or check the box on line H of it	s Form 990-EZ or on its Form 990-PF.			
Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
BAA For Paperwork Reduction Act Notice, see the instr	uctions for Form 990, 990-EZ, or 990-PF.	chedule B (Form 990, 990-EZ, or 990-PF) (2017)			

	B (Form 990, 990-EZ, or 990-PF) (2017)	Page	1 of 1 of Part I
Name of org	anization Family Foundation	1	er identification number 100160
	Contributors (see instructions). Use duplicate copies of Part I if additional sp		100100
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jesse James & Crown Hill	-	Person X Payroll
	201 S Kansas Avenue	\$10,000.	
	Topeka, KS 66603	- -	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for
		_	noncash contributions)
BAA	TEEA0702L 08/09/17	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)

Page

1 to

of Part II

Name of organization	Employer identification number
Paul Family Foundation	20-4100160

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
,		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - -	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
DAA	C	hedule B /Form 990 990-F	7 or 000 DE) (201

BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

Page 1 2017 **Federal Statements** 20-4100160 **Client PFF Paul Family Foundation** 3/15/18 12 12PM Statement 1 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants Cash Grants and Allocations McCarthy's Wildlife Sanctuary 12943 61st Street North Donee's Name: Donee's Address: West Palm Beach FL 33412 Organizational Status of Donee: 501 (c) 3 10,000. Amount Given: Donee's Name: Donee's Address: Kansas Historical Foundation 6425 SW 6th Avenue Topeka KS 66615 501 (c) 3 Organizational Status of Donee: 200. Amount Given: Washburn University Foundation Donee's Name: Donee's Address: 1729 SW MacVicar Topeka KS 66604 501 (c) 3 Organizational Status of Donee: Amount Given: 2,000. Total \$ 12,200.