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

2017

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

		ndar year 2017 or tax year beginning	, 201	7, and er	nding			, 20	
	Name of fo	oundation		7	A Employe	r identif	ication numb	er	
<u>, T</u>	ruman a	nd Mary Coolley Agricultural Scholarship Trust					37-6609824		
	Number ar	nd street (or P.O. box number if mail is not delivered to street address)	Room	v/surte l	3 Telephon	e numbe	er (see instruct	ions)	
C	entral Tr	ust Company, Trustee P.O. Box 577	}			5	73-874-8502	2	
7	City or tow	n, state or province, country, and ZIP or foreign postal code			C If exempt			ling, check here	▶□
С	olumbia	, MO 65205-0577		i				3,	
_			n of a former public	charity	1. Foreigi	n organiz	zations, check	here	⊾ń
		☐ Final return ☐ Amended		1					٠.
		☐ Address change ☐ Name cha	nge				zations meetin I attach compi	g the 85% test,	►□
H	Chec	k type of organization: Section 501(c)(3) exempt p		-1//	If private	foundati	on status was	terminated under	
· [	_	on 4947(a)(1) nonexempt charitable trust		dation !	section 5	07(Ь)(1)(	A), check here		▶ 📙
· =		narket value of all assets at J Accounting method		oorugi/					
ŧ		f year (from Part II, col. (c), Other (specify)	040,, ,.	00,00.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If the four	ndation i ction 507	s in a 60-mont 7(b)(1)(B), chec	th termination k here	►□
ı		6) ► \$ 752685 (Part I, column (d) must be	e on cash basis.)				(-)(-)(-)		
1	Part I	Analysis of Revenue and Expenses (The total of	1	<del></del>				(d) Disbursem	ents
	بعديد	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		vestment		djusted net	for charitable	le
		the amounts in column (a) (see instructions).)	books	ince	ome	'	ncome	purposes (cash basis of	
_	11	Contributions, gifts, grants, etc., received (attach schedule)	02007	, CO. 10			DEC	EIVED	
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B	82087	-, '.'-	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. #L-1 L3		<u> </u>	10
	3	Interest on savings and temporary cash investments		<del></del>	1010	0	1	Y	
	4	Dividends and interest from securities	1616		1616	- 158	JUL :	0 2018	18
	5a	Gross rents	13874	<del> </del>	13874	14	<u>'</u>	· / · · · · · ·	
	b	Net rental income or (loss)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				OGD	EN. UT	
		Net gain or (loss) from sale of assets not on line 10	20 8 TST 2			<u> </u>	17 1	<u> </u>	
	b	Gross sales price for all assets on line 6a		ļ —, —		,	's &		
3	7	Capital gain net income (from Part IV, line 2)			<del></del>	 :			
	2 8	Net short-term capital gain			1961		<del></del>	3 2 3	<u>~</u>
_	9	In a superior of Contract			1		<del></del>	7 4	<del></del>
	10a	Gross sales less returns and allowances	\$ 20 to 10 t		· · · · · · · · · · · · · · · · · · ·		F = 1	**	» i
	b	Less: Cost of goods sold		-	·	* "	· · · · · · · · · · · · · · · · · · ·	(i )	1,7-1
	C	Gross profit or (loss) (attach schedule)	· · · · · · · · · · · · · · · · · · ·	, ,	<del> </del>		- 13		
	11	Other income (attach schedule)						<u> </u>	
	12	Total. Add lines 1 through 11		ļ					
_	13	Compensation of officers, directors, trustees, etc.	97577		17451				<u>`</u> -
6	14		8639		8639			<del> </del>	
9	14 15	Other employee salaries and wages		ļ <u>-</u>				ļ	
		Logal food (attach cahadula)	<del></del>	<del></del>				<del> </del> -	
Ĺ	11 -		5535	<del> </del>	5535	<del>-</del> -		<del> </del>	4230
9	b	Accounting fees (attach schedule)	<del></del>	ļ				<del> </del>	
Administration	17 C		<u> </u>	<del></del>		<del></del> -		ļ- <u></u> -	
9197	18	Interest		<del></del>			DECE	IVED_	<del>_</del>
3	19		184		184		<b>REVI</b>	IVLD	<del>اننا</del>
1	20	Depreciation (attach schedule) and depletion	<u> </u>			1		- 0040	S
, <	21	Occupancy	<del></del>			1=	MAY A	7 2018	RS-0SQ
2 6	22	Travel, conferences, and meetings	<del></del>			- 12	+		12
		Printing and publications				_	OCA	IN HT	
	24	Other expenses (attach schedule)	<u> </u>	<del>                                     </del>			OGD	F14. 6.	<u> </u>
	ธ์   🚾	Add lines 13 through 23	14358		(4>59			]	
	25			<del></del>		! 		<del> </del>	
ડે દે	)	Contributions, gifts, grants paid	11735	<u> </u>					1735
ひ_	26	Total expenses and disbursements, Add lines 24 and 25	26093		14359			1:	<u>5965</u>
		Subtract line 26 from line 12.				,			į
	a	Excess of revenue over expenses and disbursements	71484					ļ	· · ·
	b	Net investment income (if negative, enter -0-) .		ļ	3093		· · · · · · · · · · · · · · · · · · ·		
	С	Adjusted net income (if negative, enter -0-)						J	

	egis.	Attached schedules and amounts in the description column	Beginning of year	End of	year
- FE	rt II	Balance Sheets should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	94990	11730	11730
	3	Accounts receivable ▶	7	-; -	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►		-	
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
i		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	509074	666420	740954
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			- 4
		Less: accumulated depreciation (attach schedule) ▶			
į	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Investments—other (attach schedule)	المراث المرا المراث المراث المرا	Tylogy rygy a may	
		Less. accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►			
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item i)	604064	678150	752684
	17	Accounts payable and accrued expenses			4
S	18	Grants payable			
Liabilities	19	Deferred revenue			- · · · · · · · · · · · · · · · · · · ·
ΞĮ	20	Loans from officers, directors, trustees, and other disqualified persons			
ia l	21	Mortgages and other notes payable (attach schedule)			, ; ‡
-	22	Other liabilities (describe ►)			
	23_	Total liabilities (add lines 17 through 22)	0	0	, .
G		Foundations that follow SFAS 117, check here ▶ □			-
ances		and complete lines 24 through 26, and lines 30 and 31.		!	i, i
an	24	Unrestricted			
3al	25	Temporarily restricted			
ъ.	26	Permanently restricted			
Fund Ba	ļ	Foundations that do not follow SFAS 117, check here ▶ □	ļ		
Ŀ		and complete lines 27 through 31.			
o o	27	Capital stock, trust principal, or current funds	<u></u>		,
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
155	29	Retained earnings, accumulated income, endowment, or other funds			-
τÀ	30	Total net assets or fund balances (see instructions)	604064	678150	
Š	31	Total liabilities and net assets/fund balances (see			
		ınstructions)	604064	678150	
Ľξ	rt III	Analysis of Changes in Net Assets or Fund Balances	(a) I 00 (	+ agragth	
1		I net assets or fund balances at beginning of year—Part II, colu			
_		of-year figure reported on prior year's return)		<del></del>	604064
_		er amount from Part I, line 27a			71484
3		er increases not included in line 2 (itemize) Non-div distributions	•••••		2602
4		lines 1, 2, and 3			678150
5	Deci	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II column /h\ lis	5 ne 30 6	670150
	LOTA	il net assets or lund balances at end of year (line 4 minus line 5)—	rait II, Column (D), III	16 30   6	6781 <u>50</u>

Part	V Capital Gains an	d Losses for Tax on Investi	nent income			
		und(s) of property sold (for example, real e use; or common stock, 200 shs. MLC Co.		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	Sale of publicly traded sec	urities resulting in short term capi	tal gain - attchd			
<u>b</u> _	Sale of publicly traded sec	urities resulting in long term capit	al gain - attchd			
<u>c</u>		tributions from mutual funds		ļ		
<u>d</u>		tributions from mutual funds				<del></del>
е	Unrecaptured 1250 gain fro	om mutual funds	<del>,</del>	L		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis inse of sale		n or (loss) f) minus (g))
<u>a</u>	92590			94142		(1552) ST
<u>b</u>	150551			<u> 150448</u>		104 LT
<u>c</u>						3253 LT
d_						152 ST
<u>е</u>	Complete and the access of	(1)	In the feet of the	10/01/00		4 LT
	Complete only for assets sno	owing gain in column (h) and owned				(h) gain minus : less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		rom col (h))
a						
b						
с	<del></del>					
<u>d</u>	<del> </del>	L				
е_						
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2	1961
3		in or (loss) as defined in sections I, line 8, column (c). See instru	ictions. If (loss)			
Part		der Section 4940(e) for Redu		let Investment	lnoomo	<del></del>
		ivate foundations subject to the				
Was ti		ve this part blank. section 4942 tax on the distribu qualify under section 4940(e). Do			pase period?	☐ Yes ☐ No
1	Enter the appropriate am	ount in each column for each yea	ar; see the instru	uctions before m	akıng any entries.	
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value or	(c) f noncharitable-use a		(d) nbution ratio divided by col (c))
	2016		<del></del>	<del></del>		
	2015					
	2014					
	2013					
	2012					
2		)	ude the total on			
4	Enter the net value of nor	nchantable-use assets for 2017 f	rom Part X, line	5	. 4	<del></del>
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27b	)		. 6	
7	Add lines 5 and 6				. 7	
8		ons from Part XII, line 4 ater than line 7, check the box in			. 8 that part using a 1	% tax rate. See the

Part	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstru	ICTIO	നട)
1 <sub>a</sub>	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)			_
ь	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check	<u></u>		ا ا
•	here Dand enter 1% of Part I, line 27b	-	62	<b></b> -
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 foundations only; others, enter -0-)		0	Ĺ
3	Add lines 1 and 2		62	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		62	
6	Credits/Payments;			
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			
b	Exempt foreign organizations—tax withheld at source 6b  Tax paid with application for extension of time to file (Form 8868) . 6c			
c d	Tax paid with application for extension of time to file (Form 8868) . 6c			
7	Total credits and payments. Add lines 6a through 6d			<sup>]</sup>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached		0	<del> </del> -
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		62	_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		- 02	
_11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	3',	1 ^	- 1
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$	1	*# # # # # # # # # # # # # # # # # # #	- 1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$		7	,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		<b>√</b>
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			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		<del>-</del>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Ť
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
	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 law remain in the governing instrument?	6	<b>/</b>	<b> </b>
7 8a	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 Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	7	<b>√</b>	<del></del>
56	ther the states to which the foundation reports of with which it is registered. See instructions.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	1		
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	
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		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		1
		, ,,,		

	- '		
Form	990 PF	<b>1201</b>	71

Part	t VII-A Statements Regarding Activities (continued)				
				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	•	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation person had advisory privileges? If "Yes," attach statement. See instructions		12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemp	tion application?	13	1	
	Website address ▶				
14	The books are in care of ▶ Central Trust Company Telephone	e no. ► 57	3-874-	8502	
		P+4 ▶	6520	1	<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—cherand enter the amount of tax-exempt interest received or accrued during the year	. ▶ 15			<b>▶</b> □
16	At any time during calendar year 2017, did the foundation have an interest in or a signature of			Yes	No
	over a bank, securities, or other financial account in a foreign country?		16	L	<b>✓</b>
	the foreign country	enter the hame of	-		
Part	t VII-B Statements Regarding Activities for Which Form 4720 May Be Require	-d	L		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<del></del>	Τ	Yes	No
1a				-	-
	<ul><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li><li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li></ul>		-	-	-
	disqualified person?		ļ	,~-=	!
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		-	-	İ
	<ul><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?</li><li>(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)?</li></ul>	_			
	(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 describ section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	_	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶□			-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than exc were not corrected before the first day of the tax year beginning in 2017?	-	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	on was a private			,
а	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?	☑Yes ☐ No			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of s (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 1)				
	all years listed, answer "No" and attach statement—see instructions.)		2b	1	
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the  ▶ 20 , 20 , 20 , 20				
3a	▶ 20, 20, 20, 20	Yes 🗸 No			
ь	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to foundation had excess business holdings in 2017.)	approved by the r (3) the lapse of determine if the	3b	-	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its char	itable purposes?	4a		<b>V</b>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that co charitable purpose that had not been removed from jeopardy before the first day of the tax year b		4b		1

Part	VII-B Statements Regarding Activit	es for V	Vhich Form	4720	May Be F	equire	d (conti	nued)			
5a	During the year, did the foundation pay or inci-	ır any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attemp						Yes	<b>⊘</b> No		_	-
	(2) Influence the outcome of any specific pul directly or indirectly, any voter registration		•	on 495	•	arry on,	∏Yes	✓No			
	(3) Provide a grant to an individual for travel,		other similar	ourpose	es?		Yes	☑ No			1
	(4) Provide a grant to an organization other th	nan a cha	ritable, etc.,	organiz	ation desc						***************************************
							☐ Yes	✓ No			
	(5) Provide for any purpose other than religio purposes, or for the prevention of cruelty t						Пv				Ì
b	If any answer is "Yes" to 5a(1)–(5), did any of						∐Yes ons descr	oM ∑ nbed in			
_	Regulations section 53.4945 or in a current notice								5b		1
	Organizations relying on a current notice regal	-	-					▶□	1		
С	If the answer is "Yes" to question 5a(4), doe										
	because it maintained expenditure responsibil	•	-				Yes	□ No			1
<b>C</b> -	If "Yes," attach the statement required by Reg										ļ
6a	Did the foundation, during the year, receive at on a personal benefit contract?	-	airectly or in	_		emiums	☐Yes	✓ No			ļ
b	Did the foundation, during the year, pay premi					benefit	_		6b		<b>-</b>
	If "Yes" to 6b, file Form 8870.	,	,	<b>,</b> ,							,
	At any time during the tax year, was the foundation						☐ Yes		,		
	If "Yes," did the foundation receive any proceit VIII Information About Officers, Dire								7b		
Fall	t VIII Information About Officers, Directors	ectors,	musices, r	ounda	uon man	agers,	riigiliy r	alu E	mpioy	ees,	
1	List all officers, directors, trustees, and fou	ndation	managers ar	d their	compens	ation. S	ee instr	ıctions			
	(a) Name and address		e, and average		mpensation not paid,		Contribution yee benefit		(e) Expe		
			ted to position		ter -0-)		erred compe		other a	allowan	ces
	Il Trust Company, Trustee										
P. O. B	Box 577, Columbia, MO 65205-0577				8639						
	***************************************										
										_	
						1		ì			
2	Compensation of five highest-paid employ	ees (oth	er than tho	se incl	uded on li	ne 1—9	see instr	uctions	s) If n	one.	enter
-	"NONE."	000 (011)		, IIIOI	daca on n		300 111011	uotioni	.,	J.10, \	J.11C.
			(b) Title, and a	verage			(d) Contribu	itions to	4-> 5		
(	(a) Name and address of each employee paid more than \$50	,000	hours per v	veek	(c) Compe	nsation	employee plans and o	deferred	(e) Expe	nse acc allowan	
							compens				
					<del></del>						
			<u> </u>				<u> </u>				
			ļ		ļ		<del></del>				
					ł						
			· · · · · ·								
			L		<u> </u>						
Total	number of other employees paid over \$50,000	· · ·	· · · ·	<u>.</u> .	• • •	• • •	<u></u>			<u> </u>	
									Form <b>99</b>	ひーピト	(2017)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
<del></del>		
	y=====================================	
	<del></del>	
<del></del>		<del> </del>
		1
		<del> </del>
Total numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
T GIT IX X	- Commany of Direct Charles Activities	
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of its and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Payme	nt of academic scholarships. Distributions for 2017 were to a single recipient attending Truman State	
Univer	sity, Kirksville, MO	
		11735
2		
		1
3		
4		
		<u> </u>
Part IX-B	<del></del>	<del></del>
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		Į.
2	<del></del>	<del> </del>
All other pro	ogram-related investments. See instructions	
3		
Total. Add I	ines 1 through 3	1
		Form <b>990-PF</b> (2017

, i

4.

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	7-2	
	purposes:		
а	Average monthly fair market value of securities	1a	691312
b	Average of monthly cash balances	1b	38551
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	729863
е	Reduction claimed for blockage or other factors reported on lines 1a and	··	
	1c (attach detailed explanation)	- "a"	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	729863
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	10948
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	718915
6	Minimum investment return. Enter 5% of line 5	6	35946
Part		oundation	
1	Mınımum investment return from Part X, line 6	1	35946
2a	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.) 2b 0		
C	Add lines 2a and 2b	2c	62
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35884
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	35884
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,		
	<u>line 1 </u>	7	35884
	XII Qualifying Distributions (see instructions)	Is it is	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4 84.00. " "	
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	15965
_	Program-related investments—total from Part IX-B	1b	
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:	55	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	15965
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1	
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	15965
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	er the foundation

Part	Undistributed Income (see instruction	ons)	<u> </u>		
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	(d) 2017
	line 7				35884
2	Undistributed income, if any, as of the end of 2017:	~			
а	Enter amount for 2016 only	, - Ja		22817	
ь	Total for prior years: 20 ,20 ,20		0		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				{
c	From 2014		•		
d	From 2015	,	1		
-	From 2016				
e			ı		i
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$11735				
а	Applied to 2016, but not more than line 2a .			15965	
b	Applied to undistributed income of prior years	-			
	(Election required—see instructions)	- <u>-</u>	0		· _
C	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
đ	Applied to 2017 distributable amount	7	4 15 %		0
е	Remaining amount distributed out of corpus	0	and the second	A STATE OF A	7.5
5	Excess distributions carryover applied to 2017	0	* · * · * · * · *	٠ -	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	<u>,</u>			ا ب آن ا د ا
	indicated below:	,	· ·		, ,
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0	, ,		ر ا
b	Prior years' undistributed income. Subtract			7.	** **
-	line 4b from line 2b	\$ j	0		, ,
С	Enter the amount of prior years' undistributed	<del></del>		<del>,                                    </del>	
C	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	<del> </del>	<u>-</u>	<del> </del>	
•	amount—see instructions				
_	Undistributed income for 2016. Subtract line		0		
е	4a from line 2a. Taxable amount—see				
			,		_
_	instructions	<u></u>	·	6852	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be			}	
	distributed in 2018	<u> </u>			35884
7	Amounts treated as distributions out of corpus		Ì		
	to satisfy requirements imposed by section		Į.	ļ	
	170(b)(1)(F) or 4942(g)(3) (Election may be		ļ		'
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions).	0		ļ-	
9	Excess distributions carryover to 2018.		]		
	Subtract lines 7 and 8 from line 6a		)		
10	Analysis of line 9:	<del> </del>			
а	Excess from 2013				
b	Excess from 2014	}		1	<u> </u>
c	Excess from 2015	}		1	<u> </u>
d	Excess from 2016	1	1	1	
е	Excess from 2017	]			

Centralia high School Guidance Office, 849 S. Jefferson, Centralia, MO 65240 (573) 682-2217

The form in which applications should be submitted and information and materials they should include:

Contact guidance office for application and guidelines

Any submission deadlines

March 15 (for scholarships awarded to be applied to following school year)

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

Recipients must be residents of Boone or Audrain Counties in Missouri and graduates of Centralia High School in Centralia, Missouri

Form 9	90-PF (2017)				Page 11
Par			· · · · · · · · · · · · · · · · · · ·		
3	Grants and Contributions Paid During t			ture Payment	<del></del>
	Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year			1	
Trum: Nadle	an State University FBO Daniel William August r, 100 E. Normal, Kirksville, MO 63501	None	Individual	Academic Scholarship	11735
	•				
		}			
				1	
	Total	<u> </u>		<del> ▶</del>	3a 11735
b	Approved for future payment		}		
			1		ĺ
				<u> </u>	
					-
			,	]	
				1	
				<u> </u>	
				1	
		<u> </u>	<u> </u>		
	Total				3b

Рa		<del></del>					
Ențe	r gro	ess amounts unless otherwise indicated.	I	siness income		on 512, 513, or 514	(e) Related or exempt
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
1	Pro	gram service revenue:	Business code	Amount	LACIUSION CODE	Amount	(See instructions.)
	а						
	b						
	C						
	d						
	e						
	f						
	g	Fees and contracts from government agencies					
2	Me	mbership dues and assessments					
3	Inte	rest on savings and temporary cash investments			L	<del></del>	
4		idends and interest from securities		·			L
5		rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property	<u> </u>		ļl		ļ <u> </u>
7		er investment income	<u> </u>		<b> </b>		ļ.—
8		n or (loss) from sales of assets other than inventory			<u> </u>		
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory	<b> </b>		ļ		ļ
11	_	er revenue: a			<b></b>		<u> </u>
	b						
	C				<del> </del>	<del> </del>	
	đ				<del>   </del>		
40	e	ototal. Add columns (b), (d), and (e)			4 L* 12	<del></del>	<del> </del>
12	Sur	ototai. Add columns (b), (d), and (e)	**		1 % 4% > 1		
40	T-4	al Add has 40 solvens (b) (d) sad (s)	<u> </u>		1	40	L
13	Tot	al. Add line 12, columns (b), (d), and (e)	. <b></b> .			13	
<b>13</b> See	<b>Tot</b> wor	<b>al.</b> Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	s.)			13	
13 See Pa	Tot wor	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		The state of the s
13 See Pal Lin	<b>Tot</b> wor	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the
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13 See Pal Lin	Tot wor LX e No	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions.)

_, _		Organizati	ons												
1	ın se		directly or indirectle other than section											Yes	No
а	Trans	fers from the re	porting foundation	toar	noncharita	able exer	not ora	anızation	of:				1 1		[
													1a(1)		
							•		• • •	•			1a(2)		
L	. ,						• •				• •		10(2)		
b		r transactions:											]]		<del>-</del>
			a noncharitable e		_								1b(1)		
			ets from a noncha										1b(2)		
	(3) R	ental of facilities	, equipment, or ot	her as	sets .								16(3)		ĺ
	(4) R	eimbursement a	rrangements										1b(4)		
			arantees										1b(5)		
			ervices or member										1b(6)		
С			quipment, mailing										1c	-	
			of the above is "Y										للتنا	fair m	arket
•			ther assets, or sei												
			on or sharing arrai												
<del></del>		b) Amount involved							<u>-</u>						
(a) Line	no. (	b) Amount involved	(c) Name of no	ncnarita	ible exempt	organizatio	n	(a) Descri	ption of transfe	rs, trar	saction	s, and sna	ring arra	ingeme	ents 
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	_														
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			<u> </u>												
			L												
			<u> </u>												
	1														
2a	Is the	foundation dire	ectly or indirectly	affiliat	ed with, o	or related	d to, or	ne or mor	e tax-exem	pt or	anıza	tions			
			501(c) (other than :										ا Yes		No
b			e following schedu									_			
(a) Name of organization (b) Type of organization					(c) Description of relationship										
		<del></del>	<del></del>	1				<del></del>							
			· · · · · · · · · · · · · · · · · · ·	+-	<del></del>										
				+											
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	Unde	r penalties of penury.	I declare that I have exam	ined this	s return, ınclu	iding accom	panyina se	chedules and	statements, and	to the	best of r	ny knowler	ge and I	belief. it	is true.
Sign	corre	ct, and complete Dec	auftion of please Outles	thanja	(payer) is bas	sed on all inf	ormation o	of which prep	arer has any kno	wledge	ſ		<u> </u>		
-		110000		29	7 151	8/18						May the II with the p			
Here		ature of officer or tru	LAW)	- ( )	Date	0110	Vice Title	Presiden	t & Relations	nib M	<u>gr</u>	See instru			
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Paid	j		$\mathcal{O}$	17	Parer's sig		اللب		Date 5/1/18		Check	(   11			
Prepa	arer	Karen E. Hajicek			suu,	<u></u>			1 110		self-er	mployed		00471	56
Use (	Only	<del></del>	Brown Willbrand, F		<u> </u>					Firm's	s EIN 🕨		<u>43-118</u>		
		Firm's address ▶	P. O. Box 1304, Co	lumbia	, MO 652	05-1304		<i>,</i>		Phon	e no		13) 442		
												F	om <b>99</b>	U-PF	(2017)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

**Employer identification number** 

Truman and Mary Coolley Agricultural Scholarship Trust 37-6609824 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete 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 331/3% 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 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its 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).

	organization	mployer identification number			
	nd Mary Coolley Agricultural Scholarship Trust		37-6609824		
Part I	Contributors (see instructions). Use duplicate copi				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Truman J. Coolley Trust dated 11/19/09  100 N. Jefferson  Mexico, MO 65265		Person  Payroll  Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
·		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)		

Name of organization

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
		\$					
(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 ınstructions.)	(d) Date received				
		\$					

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part i (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# Truman and Mary Coolley Agricultural Scholarship Trust (EIN: 37-6609824) 2017 Form 990-PF Part I (page 1) Analysis of Revenue and Expenses

## Line 16 - Legal Fees

I	Brown Willbrand, PC, Columbia, MO Application for 501(c)(3) status Preparation of 2016 Form 990-PF	\$4,230 <u>\$1,305</u> \$5,535
Line 18	- Taxes	
	Foreign Taxes withheld from dividends received Excise Tax based on investment income	\$100 <u>\$ 84</u> \$184

## Truman and Mary Coolley Agricultural Scholarship Trust (EIN: 37-6609824) 2017 Form 990-PF Part II (page 2) Balance Sheet

Line 10b - Investments

See attached a list of securities held by the Truman and Mary Coolley Agricultural Scholarship Trust as of 12/31/17

## Truman and Mary Coolley Agricultural Scholarship Trust (EIN: 37-6609824) 2017 Form 990-PF Part IV (page 3) Capital Gains and Losses for Tax on Investment Income

Line 1a - See attached list of publicly traded securities sold resulting in short term capital gains

Line 1b - See attached list of publicly traded securities sold resulting in long term capital gains