

EXTENDED TO NOVEMBER 15, 2018
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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

For ca	lendar year 2017 or tax year beginning		, and ending		
Name	e of foundation	-		A Employer Identification	number
CO	MMERCE BANCSHARES FOUNDA	rion		44-6012453	
Numb	erand street (or P O box number if mail is not delivered to street	address)	Room/sulte	B Telephone number	
92	22 WALNUT STREET			(816) 23 <u>4</u> -	2577
	or town, state or province, country, and ZIP or foreign po			C If exemption application is p	ending, check here
KA	NSAS CITY, MO 64106-180				
G Ch	eck all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2. Foreign graphizations me	eting the 85% test
	Address change	Name change		Foreign organizations me check here and attach co	mputation .
H_Ch	eck type of organization: X Section 501(c)(3) exe		ψ_{0}	E If private foundation sta	
<u> </u>	1777	Other taxable private founda	iuoii • /	under section 507(b)(1)	(A), check here
	market value of all assets at end of year J Accounting	*	Accrual	F If the foundation is in a	
	m Part II, col. (c), line 16)	ner (specify)	- \	under section 507(b)(1)	(B), check here . ▶∟∟
<u>▶\$</u>					(d) pure
Par	The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a).)		meente		(cash basis only)
	1 Contributions, gifts, grants, etc., received	31,983,778.		N/A	· · · · · · · · · · · · · · · · · · ·
	2 Check If the foundation is not required to attach Sch 8	70	72.		STATEMENT 1
	3 Interest on savings and temporary cash investments	72. 73,844.	73,844.		STATEMENT 2
	4 Dividends and interest from securities	/3,044.	/3,044.		SIAIEMENI Z
	5a Gross rents Q \	\			
	Net rental income or (loss)	4,163,614.			
9	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 4,373,129.	4,103,014.		DEC	FIVED
Revenue		•	4,163,614.	, AEC	EIVEU
æ	7 Capital gain net income (from Part IV, line 2)	•	4,103,014.		8
İ	8 Net short-term capital gain			NOV 12	li 9 2018 취
١,	9 Income modifications Gross sales less returns			[4]	
	10a and allowances b Less Cost of goods sold			005	
	c Gross profit or (loss)			OGD	EN, UI
Ι,	11 Other income	<u></u>			
	12 Total. Add lines 1 through 11	36,221,308.	4,237,530.		
-	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages			- -	
	15 Pension plans, employee benefits			17.	
	16a Legal fees			**	
Ë	b Accounting fees STMT 3	3,200.	1,600.		1,600.
Expenses	c Other professional fees	·			
	17 Interest		-		
<u> </u>	18 Taxes STMT 4	77,000.	0.		0.
<u> </u>	19 Depreciation and depletion				
and Administrative	20 Occupancy				
₽ :	21 Travel, conferences, and meetings				
띭	22 Printing and publications				
g z	23 Other expenses STMT 5	17,913.	13,692.		4,221
⊒ 3.	24 Total operating and administrative	-		!	
Operating	expenses. Add lines 13 through 23	98,113.	15,292.		5,821
- 14	25 Contributions, gifts, grants paid	1,532,836.			1,532,836
2	26 Total expenses and disbursements.				
$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	Add lines 24 and 25	1,630,949.	15,292.		1,538,657
	27 Subtract line 26 from line 12;				ľ
	& Excess of revenue over expenses and disbursements	34,590,359.			
	b Net investment income (if negative, enter -0-)		4,222,238.		
	c Adjusted net income (if negative, enter -0-) .			N/A	

Page 2

	art	Balance Sheets Attached schedules and amounts in the description	beginning or year		or year
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	174,571.	6,331.	6,331.
		Savings and temporary cash investments	2.	151,358.	151,358.
		Accounts receivable			
]	Less; allowance for doubtful accounts ▶			
	1	Pledges receivable >			1
	'	Less; allowance for doubtful accounts ▶			
	5	Grants receivable			
	ء ا	Receivables due from officers, directors, trustees, and other		<u>-</u>	<u> </u>
	"				
	١,	disqualified persons			1
	7	Other notes and loans receivable			<u> </u>
	١.	Less: allowance for doubtful accounts			
ets		Inventories for sale or use		 .	
Assets		Prepaid expenses and deferred charges .			
•	10a	Investments - U.S. and state government obligations			
	þ	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			<u> </u>
		Less accumulated depreciation			
	12	Investments - mortgage loans		· · · · · · · · · · · · · · · · · · ·	
	13	Investments - other STMT 7	0.	3,577,357.	34,102,618.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe ► ACCRUED INCOME)	0.	8,531.	8,531.
		Total assets (to be completed by all filers - see the			, , , , , , , , , , , , , , , , , , , ,
	''	instructions. Also, see page 1, item I)	174,573.	3,743,577.	34,268,838.
_	17	Accounts payable and accrued expenses	272/3730	0 / 1 2 0 / 0 1 1 1	1
	l	Grants payable			1
	ı	Deferred revenue		· ·· · · · · · · · · · · · · · · · · ·	1
Liabilities	19	i-			}
≣	20	Loans from officers, directors, trustees, and other disqualified persons			}
喜	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	١			0.	
_	23	Total liabilities (add lines 17 through 22) .	0.	<u> </u>	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26, and lines 30 and 31.			
Balances	24	Unrestricted			
휼		Temporarily restricted			
	26	Permanently restricted			
Net Assets or Fund		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	174,573.	3,743,577.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ğ	30	Total net assets or fund balances	174,573.	3,743,577.	1
_		·	* **		1
	31	Total liabilities and net assets/fund balances	174,573.	3,743,577.	
Ξ					
P	<u>art</u>	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	30	· · · · · · · · · · · · · · · · · · ·	Γ
•		st agree with end-of-year figure reported on prior year's return)		1	174,573.
,	•	r amount from Part I, line 27a	• •	2	34,590,359.
		r increases not included in line 2 (itemize) ROUNDING		. 2	22,000,000
		lines 1, 2, and 3	· 		34,764,934.
		•	SEE STA	—	31,021,357.
		eases not included in line 2 (itemize)			3,743,577.
b	ı otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumm (D), iine 30		<u> </u>

COMMERCE BANCSHARES FOUNDATION

(a) List and describe the	d Losses for Tax on I kind(s) of property sold (for exa	ample, real esta		(b) How	acquired	(c) Date a	cquired	(d) Date sold
	ouse; or common stock, 200 sh	ns. MLC Co.)		D - Do	nation	(mo., da		(mo., day, yr.)
1a CTC				ļ		VARIO	ous	12/31/17
_b				ļ				
d		 ,						
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ın or (loss (f) mınus	
a 4,373,129.			209,51	5.				4,163,614.
b								
С								
d								
e Complete and for accept about an accept and accept and accept and accept and accept	ala ua anticasa (b) and account by	the foundation	00 10/01/00			0 (0-	1 /6\:-	
Complete only for assets showing g		· · · · · · · · · · · · · · · · · · ·				Gains (Co (k), but no		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		•		from col.	
a		<u> </u>						4,163,614.
<u>a</u>				- -				
c								· · · · · ·
d				1				
е								
2 Capital gain net income or (net capital	If gain, also enter (loss), enter -(} 2		_		4,163,614.
3 Net short-term capital gain or (loss) a	as defined in sections 1222(5) a	ınd (6):						
If gain, also enter in Part I, line 8, colu		` '		\parallel			27 / 2	
If (loss), enter -0- in Part I, line 8	ler Section 4940(e) fo	Dadwaa	Tour on Not	3			N/A	<u> </u>
			·			Oille		
(For optional use by domestic private for	indations subject to the section	4940(a) tax on	i net investment in	come.)				
If section 4940(d)(2) applies, leave this p	oart blank.							
Was the foundation liable for the section If "Yes," the foundation doesn't qualify ur				iod?			•	Yes X No
Enter the appropriate amount in each				ntries.				
(a) Base period years Calendar year (or tax year beginning ı	(b)		Net value of no	(c)	e-use assets	(Distril col. (b) di	(d) bution ratio vided by col. (c))
2016		29,880.			20,738			4.769874
2015		74,574.			57,209			4.128043
2014		45,527.			54,472			1.370854
2013		39,566.			30,170			1.601391
2012	1,46	64,097.		8	75,578	<u>•</u>		1.672149
2 Total of line 1, column (d)						2		13.542311
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5.	O, or by the number	er of years	i	3		2.708462
4 Enter the net value of noncharitable-u	use assets for 2017 from Part X	, line 5				4		5,432,928
5 Multiply line 4 by line 3						5	1	4,714,879
6 Enter 1% of net investment income (1% of Part I, line 27b)			•		6		42,222
7 Add lines 5 and 6						7	1	4,757,101
8 Enter qualifying distributions from Pa	art XII, line 4					8		1,538,657
If line 8 is equal to or greater than line See the Part VI instructions.	e 7, check the box in Part VI, lin	e 1b, and comp	plete that part usin	g a 1% ta	c rate.			

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Part VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	8 - see instruc	tions)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% ☐ 1	84	,445.
of Part I, line 27b		1
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.
3 Add lines 1 and 2		,445.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		445
5 Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0-	04	,445.
6 Credits/Payments:		
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 83,962. 6b 0.		
b Exempt foreign organizations and withheld at source	1.	
, , ,		
a backup withholding choneously withheld	106	,962.
V		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		,517.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax 22,517. Refunded		0.
Part VII-A Statements Regarding Activities	<u> </u>	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Y	es No
any political campaign?	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	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.	<u></u> _	
c Did the foundation file Form 1120-POL for this year?	10	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		i 1
(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0 .		i i
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on 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	3	— _
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?	· 4a	$-\frac{x}{x}$
	N/A 4b	
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:		
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	X
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		
MO		
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	—	X
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	11-	_ /
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9	$\frac{\mathbf{x}}{\mathbf{x}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X
	Form 990-	PF (2017)

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P	art 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		<u> </u>
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	X	
	Website address ► N/A			
14	The books are in care of ▶ PROGRAM DIRECTOR Telephone no. ▶ (816)	234	<u>-17</u>	<u>68</u>
	Located at ▶ 922 WALNUT, KANSAS CITY, MO ZIP+4 ▶64	<u> 106.</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, . .	·Ш
	and enter the amount of tax-exempt interest received or accrued during the year . Label 15		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	$\overline{}$
	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			
	foreign country >	<u>∟_</u>		- 1
Pá	art 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.	$\vdash \vdash$	Yes	No
16	a During the year, did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
				1
		1 1		- 1
	(4) 1 ay component to, or pay of remounds the expenses of, a disqualities 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)? Yes X No			1
			i	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			- 1
	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]
				- 1
	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1b		$\overline{\mathbf{x}}$
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	""		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			1
•	before the first day of the tax year beginning in 2017?	1c		X
9	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)):			- 1
	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	-		1
٠	before 2017?			
	If "Yes," list the years ▶ , , ,			
	o Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			- 1
	statement - see instructions.) N/A	2b		
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
				ł
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		}	- 1
	during the year?			
ı	o 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.)	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ı	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?	4b		X

, '					
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?		es 🗶 No		T 1
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir	ectly,]
any voter registration drive?			es 🗶 No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Y	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section] 1
4945(d)(4)(A)? See instructions		Y	es 🗶 No		1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t		[
the prevention of cruelty to children or animals?		Y	es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described	in Regulations	. -		_
section 53.4945 or in a current notice regarding disaster assistance? See inst	ructions		N/A	5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance, check	here .				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —			
expenditure responsibility for the grant?),	I/A ∟ Y	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on] [
a personal benefit contract?		. L Y	es 🗶 No 📙		.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?	-	<u> </u>	6b	X
If "Yes" to 6b, file Form 8870.			(Table 1		
7a At any time during the tax year, was the foundation a party to a prohibited tax		<u> </u>	es 🗶 No 📙	_	igspace
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	丄
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	nagers, Highl	y 		<u>.</u>
1 List all officers, directors, trustees, and foundation managers and					
(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	accoun allowa	
		_	_		_
SEE STATEMENT 8		0.	0.		<u>0.</u>
· · · · · · · · · · · · · · · · · · ·					
	.ļ				
2 Compensation of five highest-paid employees (other than those in	aluded on line 4) If none	onton PNONE P			
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	l lone	(d) Contributions to	(e) Ex	nense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Ex accoun allowa	t, other ances
NONE					
				ļ	
	1			Į.	

Form **990-PF** (2017)

Total number of other employees paid over \$50,000

Form **990-PF** (2017)

Total. Add lines 1 through 3

For	n 990-PF (2017) COMMERCE BANCSHARES FOUNDATION	44-60	L2453	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see ir	structions.)	
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	5,158,	111.
b	Average of monthly cash balances	1b	357,	552.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	5,515,	663.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0.	<u></u>		
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	5,515,	663.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	82,	735.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,432,	<u>928.</u>
6	Minimum Investment return. Enter 5% of line 5	6	271,	646.
Pi	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	ıd certain		
	foreign organizations, check here 🕨 🔛 and do not complete this part.)	_		
1	Mınimum investment return from Part X, line 6	1	271,	646.
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.)			
C	Add lines 2a and 2b	2c	84,	445.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	187,	201.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	187,	201.
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	187,	201.
Pá	art 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	1a	1,538,	657.
	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:			
	Suitability test (prior IRS approval required)	3a		
	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	1,538,	657.
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	1,538,	657.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for the s		
	4940(e) reduction of tax in those years.			

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				187,201.
2 Undistributed Income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	İ
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2017:				
aFrom 2012 1,440,024.				
bFrom 2013 1,469,039.				
c From 2014 1,423,253.				
dFrom 2015 1,456,714.			İ	
eFrom 2016 1,513,543.				
f Total of lines 3a through e	7,302,573.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ▶\$ 1,538,657.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior	.,			1
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				Ī
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				187,201.
e Remaining amount distributed out of corpus	1,351,456.			l
5 Excess distributions carryover applied to 2017	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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,654,029.			
b Prior years' undistributed income. Subtract				
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 instr.			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				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				:
not applied on line 5 or line 7	1,440,024.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	7,214,005.			
10 Analysis of line 9:				
a Excess from 2013 1,469,039.				
b Excess from 2014 1,423,253.				
c Excess from 2015 1,456,714.				
dExcess from 2016 1,513,543.				
e Excess from 2017 1,351,456.				

723581 01-03-18

Form 990-PF (2017) COMMERC	E BANCSHARE	S FOUNDATI	ON	44-60	12453 / Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2017, enter the date of	the ruling	▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described	in section	4942(j)(3) or 4942(j)	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 20,14	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	ļ		/	/	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		-			
for active conduct of exempt activities.				ļ	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		· ,	1	-	
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		 	 		
2/3 of minimum investment return		/			
shown in Part X, line 6 for each year		/	,		
listed c "Support" alternative test - enter:		/			
• •		ď			
(1) Total support other than gross investment income (interest,	/			[
dividends, rents, payments on				1	
securities loans (section	/			İ	
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)					
			-		<u> </u>
(3) Largest amount of support from	/				
an exempt organization				<u> </u>	
(4) Gross investment income Part XV Supplementary Info	mastica (Comple	to this part only	if the foundation	n had \$5 000 or m	oro in occote
Part XV Supplementary Info	rmation (Comple he vear-see inst	ete triis part only mictions 1	ii the loundado	iii iiau 45,000 or iii	ore in assets
		14011011011			
 Information Regarding Foundation a List any managers of the foundation wh 		than 20/ of the total per	stributions reasived by th	no foundation hafare the ale	ca of any tay
year (but only if they have contributed in			iti ibutions received by ti	ie ioundation before the cit	SE OF ANY LEAN
NONE	, , , ,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha			(2. 2 2422.)82 p		
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here 🕨 🔲 if the foundation of	inly makes contributions	to preselected charitable	e organizations and does		uests for funds. if
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other cond	itions, complete items 2	a, b, c, and d.	
a The name, address, and telephone num	ber or email address of t	he person to whom appl	ications should be addre	essed:	
PROGRAM DIRECTOR, (8	16) 234-176	8			
922 WALNUT, KANSAS C	ITY, MO 641	.06			
b The form in which applications should to PROVIDE DOCUMENTATION				501 (C)(3)	
c Any submission deadlines:	,	 "		· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on award	s. such as by geographic	al areas, charitable fields	s, kinds of institutions, o	r other factors:	
NONE	_,		,		

3 Grants and Contributions Paid During the Y	ear or Approved for Future	1	1	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year .				
SEE STATEMENT A	NONE	STMT A	STMT A	
		<u> </u>		1,532,836.
•				
				
	•			
	<u> </u>		<u> </u>	1 520 026
Total	<u></u>	 	▶ 3a_	1,532,836.
b Approved for future payment				
SEE STATEMENT B	NONE	PC	STMT B	
				530,834.
Total		<u> </u>	▶ 3b	530,834.
TVGI		· · · ·	F 00	orm 990-PF (2017)

Part XVI-A	Analysis of	Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated	l business income		ed by section 512, 513, or 514	(e)	
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a						
b						
c						
d						
e						
1						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments	. [14	72.		
4 Dividends and interest from securities .			14	73,844.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property .						
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			+ +			
than inventory			18	4,163,614.		
9 Net income or (loss) from special events		····				
10 Gross profit or (loss) from sales of inventory						
I1 Other revenue:						
a						
b						
C		-		<u></u>		
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		C		4,237,530.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	4,237,530.	
See worksheet in line 13 instructions to verify calculations.)						

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No. ▼	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).				

Sign Here	and be	penames of perjun, I declare that I have examined the life, it is true, correct, and complete Declaration of a starte of officer or trustee				has any knowledge	May the IRS discuss this return with the preparer shown below? See instr
Paid		PrinyType preparer's name DOUGLAS L NELSON	Preparer's sign	ature at. Relson	Date 10/31/18	self- employed	PTIN P00013354
Prepa Use (Firm's name ► COMMERCE TR	UST COMP	ANY		Firm's EIN ► 4	8-0962626
		Firm's address PO BOX 419 KANSAS CIT		141-6248		Phone no. (8	16) 234-2000

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

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

Employer identification number Name of the organization COMMERCE BANCSHARES FOUNDATION 44-6012453 Organization type (check one) Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 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 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 totaling \$5,000 or more during the year 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),

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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).

Employer identification number

COMMEDCE	BANCSHARES	ECHIND A DT ON
COMMERCE	DWMCDUWED	LOONDATION

COMME	RCE BANCSHARES FOUNDATION	44	1-6012453
Part I	Contributors (see instructions). Use duplicate copies of Part I i	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COMMERCE BANCSHARES, INC 1000 WALNUT KANSAS CITY, MO 64106	\$ 31,983,778.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part It for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
703450 11 0		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

COMMERCE BANCSHARES FOUNDATION

44-6012453

OMME	RCE BANCSHARES FOUNDATION	44-	-6012453	
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	nt 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	
1	7000 SHS ASH GROVE CEMENT			
		\$ <u>2,222,500.</u>	03/01/17	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	8946 SHS ASH GROVE CEMENT			
			06/02/17	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	8967 SHS ASH GROVE CEMENT		· ·	
			08/09/17	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
1	48742 SHS ASH GROVE CEMENT			
		<u> </u>	12/20/17	
(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	
	-17	\$Sabadula B /Faam 0	90, 990-EZ, or 990-PF) (2	

Name of org	anization		Employer identification number				
COME	RCE BANCSHARES FOUNDATI	ON	44-6012453				
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete	tributions to organizations described columns (a) through (e) and the follo	In section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations				
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition	us, charitable, etc , contributions of \$1,000 or	less for the year (Enter this info once)				
(a) No.			400				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		:					
-							
		(e) Transfer of gif					
<u> </u>	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee				
(a) No.		<u> </u>					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
L							
ſ	(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						
F	Transferee's name, address, a	ind ZIP + 4	Relationship of transferor to transferee				
							
(a) No. from Part I	(b) D	(2)1122 25 255	(d) Description of hour rife in held				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift						
	(a) transfer of the						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
723454 11-01		L	Schedule B (Form 990, 990-EZ, or 990-PF) (201				

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY (CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVEI PER BO	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
COMMERCE CHECKING A	CCOUNT	- 	72.		72.	
TOTAL TO PART I, LI	NE 3		72.		72.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	1 SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	REV	(A) JENUE BOOKS	(B) NET INVEST MENT INCOM	
DIVIDENDS AND INTEREST	73,844		0.	73,844. 73,8		•
TO PART I, LINE 4	73,844		0.	73,844.	73,844	-
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET IN MENT IN	ÆST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	_	3,200.		1,600.		1,600.
TO FORM 990-PF, PG	1, LN 16B	3,200.	1	L,600.		1,600.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT II	VEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ESTIMATED EXCISE TA	-X	77,000.		0.	· · · · · · · · · · · · · · · · · · ·	0.
TO FORM 990-PF, PG	1, LN 18	77,000.		0.		0.
	_					

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
CUSTODY FEES CHARITABLE ADM SERVICES SUPPLIES	13,692. 3,994. 227.	13,69	02. 0. 0.	0. 3,994. 227.
TO FORM 990-PF, PG 1, LN 23	17,913.	13,69	02.	4,221.
FORM 990-PF OTHER DECREASE DESCRIPTION	S IN NET AS	SETS OR FU	ID BALANCES	STATEMENT 6
TAX TO BOOK ADJUSTMENT - CONT	RIBUTIONS			31,021,357.
TOTAL TO FORM 990-PF, PART II				31,021,357.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 7
		LUATION ETHOD	BOOK VALUE	22.75 W.SV.DW
DESCRIPTION	M.	11110 <i>D</i>		FAIR MARKET VALUE
DESCRIPTION ASH GROVE CEMEMT COMPANY COMMERCE BOND FUND #333 VANGUARD INTM TERM INV G-ADM		COST COST	752,906. 1,883,670. 940,781.	

	IST OF OFFICERS, DI		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JONATHAN M KEMPER 1000 WALNUT, STE 900 KANSAS CITY, MO 64106	PRESIDENT/DIR 0.40	0.	0.	0.
EDWARD J REARDON II 1000 WALNUT, STE 900 KANSAS CITY, MO 64106	VP/TREAS/DIR 0.40	0.	0.	0.
ELIZABETH RADTKE 1000 WALNUT, STE 900 KANSAS CITY, MO 64106	VP/ASST SEC/DIR 0.20	0.	0.	0.
DAVID W KEMPER 1000 WALNUT, STE 900 KANSAS CITY, MO 64106	DIRECTOR 0.20	0.	0.	0.
KEVIN G BARTH 1000 WALNUT, STE 900 KANSAS CITY, KS 64106	DIRECTOR 0.40	0.	0.	0.
THOMAS J NOACK 1000 WALNUT, STE 900 KANSAS CITY, KS 64106	SECRETARY 0.20	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	: 6, PART VIII =	0.	0.	0.