-Form 990-PF

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

| | | al/Revenue Service | | ► Go to w | ww.irs.g | ov/Form | 1990PF for insti | ructions and t | he latest info | ormation. | Open to Public Inspection |
|------------|---------------------------------------------------------------|--------------------------------------------|--------------|----------------------|-------------|----------|---------------------|-------------------|----------------|-----------------------------|-------------------------------------------------------|
| 14 | or, | alendar year 201 | 7 or ta | x year begir | nning | | 0: | 9/19 ,2017 | , and endi | ng | 12/31, 2017 |
| 7 | | e of foundation | | | | | | | | | identification number |
| | COOK FAMILY FOUNDATION | | | | | | | 82-3097433 | | | |
| - | Number and street (or P O box number if mail is not delivered | | | | to street a | address) | | Room/suite | B Telephon | e number (see instructions) | |
| | | | | | | | | | | | |
| | 24 | 35 E COTTAGE | BOUL | LEVARD | | | | | | (417 |) 582-1082 |
| - | City | or town, state or provin | ice, cour | ntry, and ZIP or fo | oreign pos | tal code | | | ı | | |
| | , | , , | | | 0, | | | | | C If exemptio | on application is |
| \ / | 07 | ARK, MO 6572 | 1 | | | | | | | pending, ch | heck here |
| ۲ ; | | heck all that apply | x | Initial retur | n . | 1 | Initial return | of a former r | ublic char | | |
| ` | 3 (| neck all that apply | <u> </u> | Final return | | | Amended re | | Jublic Char | J I Toleigh | organizations, check here P organizations meeting the |
| | | | - | Address ch | | | + | | | 85% test | t, check here and attach |
| - | 1 0 | hook tung of organ | izetien | | | 0)/2) 0) | Name chang | | | computa | atron ▶ |
| , | | heck type of organ | | _ | | | kempt private | | | E If private fo | oundation status was terminated |
| : | ᆜ | Section 4947(a)(1) | | | | | ther taxable p | | | under secti | lion 507(b)(1)(A), check here . |
| 1 | | air market value | | | | _ | method X C | asn Acc | crual | | dation is in a 60-month termination |
| | | nd of year (from P | art II, c | ol (c), line | _ | ther (sp | | | | under secti | ion 507(b)(1)(B), check here . > |
| | | 6) ▶ \$ | | | | column (| (d) must be on ca | ash basis) | | | (d) Dishussassas |
| | Par | t I Analysis of Re total of amounts | | | | | Revenue and | (b) Net inv | estment | (c) Adjusted r | (d) Disbursements net for charitable |
| | | may not necessa | arily equ | ual the amount | | ex | penses per books | incon | | income | purposes |
| | _ | colúmn (a) (see i | nstructi | ons)) | | | | | | | (cash basis only) |
| | 1 | Contributions, gifts, grai | nts, etc., r | received (attach sch | redule) . | | | ļ | | | |
| | 2 | Check ► X if the atta | ich Sch | B | | | | <u> </u> | | | |
| | 3 | Interest on savings a | and temp | oorary cash inves | stments. | | | | | | |
| | 4 | Dividends and inte | erest fr | om securities | | | | | | | |
| | 5 | a Gross rents | | | | | | | | | |
| | | b Net rental income or | (loss) | | | | | | | | |
| : | 6 | a Net gain or (loss) fro | | of assets not on I | line 10 | | | | | | |
| | 6 1 1 1 1 7 | b Gross sales price for assets on line 6a | all | | | | | | | | |
| 1 | 7 1 | Capital gain net in | ncome (| (from Part IV, I | ine 2) . | | | | 0. | | |
| | 8 | Net short-term ca | pital ga | ın | | | | | | | |
| | 9 | | | | | | | | | | |
| | 10 | a Gross sales less retur and allowances | | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| | | b Less Cost of goods | sold . | | | | | | | | |
| | | c Gross profit or (los | ss) (atta | ach schedule) | | | | | | | |
| | 11 | , | | | | | - 15. | | | | |
| | 12 | Total. Add lines 1 | throug | <u>ıh 11</u> | | | <u> </u> | | 0. | | |
| | 13 | Compensation of of | ficers, du | rectors, trustees, | etc | | 0. | · | | | 6018 |
| | <u>ارِّ</u> | | | • | | | | | | | CIEVED |
| | 15 | Pension plans, er | | | | | | | | -lo! | |
| 1 | | a Legal fees (attach | | | | | | | | MA' | Y 1 \$ 2018 S |
| L | ᄞ | b Accounting fees (| attach : | schedule) | | | | ļ | | <u> @ ""'\</u> | 7 |
| • | Ĭ | c Other professions | ıl fees (| attach schedul | e) | | | | | | 8 |
| _] | <u>5</u> 17 | Interest | | | | | | | | <u> </u> | DEN, UT |
| 2 | 2 18 | Taxes (attach sch | edule) (| see instruction | ns) | | | | | | |
| . د | 19 | Depreciation (atta | ich sch | edule) and de | pletion. | | | | ļ. | | |
| , ; | 20 | Occupancy | | | | | | ļ | | | |
| , | 21 | Travel, conference | es, and | meetings | | | | | | | |
| 1 | ē 22 | Printing and publi | cations | | | | | | | | |
| , , | 23 24 25 | Other expenses (a | attach s | schedule) | | | | | | | |
| . ; | 등 24 | Total operating a | ind adn | ninistrative ex | penses. | | | | | | |
| | ž | Add lines 13 thro | ugh 23. | | | | 0. | | | <u></u> | |
| (| 25 | Contributions, gif | ts, gran | its paid | | | | | | | |
| | 26 | | - | - | | | 0. | | 0. | | 0. |
| | 27 | Subtract line 26 f | rom line | e 12 | | | | | | | |
| } | | a Excess of revenue ove | r expense | es and disburseme | ents | | 0. | | | | |
| | | b Net investment in | ncome | (if negative, en | nter -0-) | | | | 0. | | |
| | \perp | c Adjusted net inco | ome (if | negative, enter | r -0-). . | | | | | | |

JSA For Paperwork Reduction Act Notice, see instructions. $^{7E1410\ 1\ 000}$ 3581NL 1508

Form **990-PF** (2017)

PAGE 1

| | | L B. L 01 | Attached schedules and amounts in the | Beginning of year | E | nd of y | year | |
|------------------|--------|--------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------|----------------|----------|--------------------|-------------|
| Р | art II | Balance Sheets | description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | Ĭ | (c) Fair Market Va | lue |
| | 1 | Cash - non-interest-bear | ing | | - | | | |
| | 2 | Savings and temporary | cash investments | | | | | |
| | 3 | Accounts receivable ▶ | | | | | | |
| | | Less allowance for dou | btful accounts ▶ | | | | | |
| | 4 | Pledges receivable ▶_ | | | | | | |
| | | Less allowance for dou | btful accounts ▶ | | | | | |
| | 5 | Grants receivable | | | | | | |
| | 6 | Receivables due from | officers, directors, trustees, and other | | | , | | |
| | | disqualified persons (at | tach schedule) (see instructions) | | | | | |
| | 7 | Other notes and loans r | receivable (attach schedule) | | | - | | |
| | | Less allowance for dou | btful accounts ▶ | | | | | |
| įts | 8 | Inventories for sale or us | se | | | | | |
| ssets | 9 | Prepaid expenses and d | eferred charges | | | | | |
| Ÿ | 10a | Investments - U S and stat | e government obligations (attach schedule) | | | | | |
| | b | Investments - corporate | e stock (attach schedule) | | | | | |
| | | | e bonds (attach schedule) | | | | | |
| | 11 | Investments - land, building and equipment basis | s, > | | | | | |
| | | Less accumulated deprecia (attach schedule) | ation ▶ | | | | | |
| | 12 | · · | loans | | | | | |
| | 13 | Investments - other (atta | ach schedule) | | | | | |
| | 14 | Land, buildings, and equipment basis | > | | | | | |
| | | Less accumulated deprecia | ation | | | | | |
| | 15 | Other assets (describe | | | | | | |
| | 16 | Total assets (to be | completed by all filers - see the | | A . | | 1 | |
| | | instructions Also, see p | age 1, item 1) | 0. | \X | 0. | į | <u> X0</u> |
| | 17 | Accounts payable and a | accrued expenses | | | | | |
| _ | 18 | Grants payable | | | | | | |
| es | 19 | Deferred revenue | | | | | | |
| Liabilities | 20 | Loans from officers, directo | ors, trustees, and other disqualified persons | | | | | |
| ap | 21 | Mortgages and other no | otes payable (attach schedule) | | | | | |
| | 22 | Other liabilities (describe | e▶) | | | | | |
| | | | | _ , | | | | |
| _ | 23 | | es 17 through 22) | 0. | | 0. | | |
| ۰, | | | w SFAS 117, check here ▶ 📖 | | | | | |
| ë | | and complete lines 24 | through 26, and lines 30 and 31. | | | | | |
| alances | 24 | Unrestricted | | | | | | |
| 3al | 25 | Temporarily restricted | | | | | | |
| P | 26 | | · · · · · · · · · · · · · · · · · · · | | | | | |
| 5 | | | ot follow SFAS 117, check here ▶ X | | | | | |
| Ē | | and complete lines 27 | through 31. | | | | | |
| Assets or Fund B | 27 | Capital stock, trust prin | cipal, or current funds | | | | | |
| šet | 28 | Paid-in or capital surplus, o | r land, bldg, and equipment fund | | | | | |
| Ş | 29 | - | ulated income, endowment, or other funds | | | | | |
| Net/ | 30 | | d balances (see instructions) | 0. | | <u> </u> | | |
| ž | 31 | | net assets/fund balances (see | _ | | | | |
| _ | | | | 0. | | 0. | | |
| | | | nges in Net Assets or Fund Bala | | | Г | | |
| 1 | | | palances at beginning of year - Part | | | | | |
| | | | ed on prior year's return) | | 1 | 1 | | 0 |
| | | | , line 27a | | | 2 | | 0 |
| | | | ded in line 2 (itemize) ▶ | | | 3 | | |
| | | | | | | 4 | | 0 |
| 5 | Dec | reases not included in | n line 2 (itemize) ▶ | | | 5 | | |
| _6 | Tota | al net assets or fund b | palances at end of year (line 4 minus | line 5) - Part II, column (| b), line 30 | 6 | | 0 |

Page 3

| (a) List and | ns and Losses for Tax on Invidescribe the kind(s) of property sold (for brick warehouse, or common stock, 20 | example, real estate, | (b) How acquired P - Purchase D - Donation | | (d) Date sold (mo , day, yr) |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------|----------------------------------|
| 1 a | | | | | _, |
| | | | | | |
| С | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | <u> </u> | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo | |
| <u>a</u> | | | | | |
| <u>b</u> | | | | | |
| | | | | | |
| d | | 2.44 | | | |
| <u>e</u> | | 1 | | | |
| Complete only for assets | s showing gain in column (h) and owne | | _ () | Gains (Col (h) ga | ain minus |
| (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | COI | (k), but not less to Losses (from co | |
| <u>a</u> | | | | | |
| b | | | | | |
| | | | | | |
| d | | | | | |
| <u>e</u> | | | | | |
| 2 Capital gain net incon | ne or (net canital loss) | gain, also enter in Part I, line 7 |) <u> </u> | | |
| . • | · · · · · · · · · · · · · · · · · · · | (loss), enter -0- in Part I, line 7 | ĵ <u>2</u> | | |
| • | I gain or (loss) as defined in section | The state of the s | , l | | |
| • | | nstructions If (loss), enter -0- in | <u>} </u> | | |
| | | | 3 | | |
| | | educed Tax on Net Investment the section 4940(a) tax on net investigation | | | |
| | or the section 4942 tax on the distress't qualify under section 4940(e). | ributable amount of any year in the | base perio | d? | Yes No |
| | | rear, see the instructions before ma | kıng anv e | ntries | |
| (a) | (b) | (c) | | (d) | |
| Base penod years Calendar year (or tax year beginning in | Adjusted qualifying distributions | Net value of nonchantable-use assets | | Distribution ra (col (b) divided by | |
| 2016 | /- | | | (cor (b) divided by | 00. (0)) |
| 2015 | | | 1 | | |
| 2014 | | | | | |
| 2013 | | | | - | |
| 2012 | | | | | - - |
| | | | | | |
| 2 Total of line 1, colum | n (d) | | 2 | | |
| | | ride the total on line 2 by 5 0, or by | | | |
| • | • | e if less than 5 years | 1 - 1 | | |
| the hamber of yours t | | o ii iooo iiiaii o yoalo ii ii ii ii ii ii | | | |
| 4 Enter the net value of | noncharitable-use assets for 2017 | 7 from Part X, line 5 | . 4 | | |
| 5 Multiply line 4 by line | 3 | | . 5 | | |
| 6 Enter 1% of net inves | tment income (1% of Part I, line 27t | b) | . 6 | | . |
| 7 Add lines 5 and 6 | | | . 7 | | |
| | | | | | : - |
| If line 8 is equal to or Part VI instructions | or greater than line 7, check the b | ox in Part VI, line 1b, and complet | te that par | rt using a 1% to | ax rate See |

| 1a | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i | | | -, |
|------------------------|-------------------------------------------------------------------------------------------------------------------------|---------|--------|---------------|
| | 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) | | | |
| þ | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | 0. |
| | here L and enter 1% of Part I, line 27b | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | |
| 3 | Add lines 1 and 2 | | | 0. |
| 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 | | | 0. |
| 6 | Credits/Payments | | | |
| а | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a | | | |
| b | Exempt foreign organizations - tax withheld at source | | | |
| С | Tax paid with application for extension of time to file (Form 8868), 6c | | | |
| d | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here 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 | | | |
| Pa | t 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 | | 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 | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | _X_ |
| đ | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation ►\$(2) On foundation managers ►\$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| | on foundation managers \$ | | | |
| 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 | 1 | | |
| 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 |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| | | | | |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | <u> </u> |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b 5 | | Х |
| b | | | | Х |
| b | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | Х |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | X | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | X X | X |
| 6 7 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 | | X |
| 6 7 8a | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 | | X |
| 6 7 8a | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 | | X |
| 5 6 7 8a | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 7 | Х | X |
| 5 6 7 8a b | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 7 | Х | X |
| 5 6 7 8a b | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 7 | Х | x |
| 5 6 7 8a b | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 6 7 | Х | |

| Par | 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 entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | |
| | person had advisory privileges? If "Yes," attach statement See instructions | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ►N/A | | | |
| 14 | The books are in care of ▶ GERALD ALLEN COOK Telephone no ▶ 417-582- | 1082 | 2 | |
| | Located at ▶2435 E COTTAGE BOULEVARD OZARK, MO ZIP+4 ▶ 65721 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | 🕨 | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | Х |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of | | | |
| _ | the foreign country > | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | V | NI. |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | 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? | | | |
| | (3) Putriish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Fay compensation to, or pay or formulated the expenses of a designation 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)? | | | |
| | the benefit of also of a disqualified person, | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | |
| | foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). | | | |
| | | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1b | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 10 | | |
| _ | 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 excepted acts, that were not corrected before the first day of the tax year beginning in 2017? | 1c | 1 | X |
| • | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| 2 | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | ļ | |
| - | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and | | l | |
| a | 6e, Part XIII) for tax year(s) beginning before 2017? | | | |
| | If "Yes," list the years ▶,, | 1 | | |
| h | 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) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| _ | ▶ | | | |
| 3a | 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) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | Х |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | ļ | ļ |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? | 4b | <u> </u> | Х |

Form 990-PF (2017)

| (1 (2 (3 | uring the year, did the foundation pay or incur any amo) Carry on propaganda, or otherwise attempt to influe 2) Influence the outcome of any specific public ele- | unt to | | | | Yes | N. | | | |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|---------------------------------------|------------------------------------------------|------------|---------|----------|--|--|--|
| (1 (2 (3 (4 | Carry on propaganda, or otherwise attempt to influe (influence) Influence the outcome of any specific public elements. | | | | | Yes | N- | | | |
| (2 (3 (4 |) Influence the outcome of any specific public elec- | nce legislation (section | | | | | No | | | |
| (3 (4 | • | | n 4945(e))? | . Yes X No | | | | | | |
| (4 | _ | ction (see section 4 | 955), or to carry on | , | | | | | | |
| (4 | directly or indirectly, any voter registration drive? | | | . Yes X No | | | | | | |
| (4 | B) Provide a grant to an individual for travel, study, or ot | her sımılar purposes? | | . Yes X No | | | | | | |
| , | I) Provide a grant to an organization other than a | | | | | | | | | |
| | section 4945(d)(4)(A)? See instructions | _ | | | | | ĺ | | | |
| (! | b) Provide for any purpose other than religious, ch | | | | | | | | | |
| ,, | purposes, or for the prevention of cruelty to children | | | 1 1 12/ | | | | | | |
| b If | any answer is "Yes" to 5a(1)-(5), did any of the | | | | | | | | | |
| | Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions | | | | | | | | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | | | | | | | |
| | • | • | | | | | | | | |
| | the answer is "Yes" to question 5a(4), does the | | | | | | | | | |
| | because it maintained expenditure responsibility for the grant? | | | | | | | | | |
| | "Yes," attach the statement required by Regulations se | | | | | } | | | | |
| | id the foundation, during the year, receive any fun- | • | | | | | | | | |
| | n a personal benefit contract? | | | . — — | | | x | | | |
| | id the foundation, during the year, pay premiums, dire | ctly or indirectly, on a | personal benefit contra | ict? | 6b | | <u> </u> | | | |
| | "Yes" to 6b, file Form 8870 | | | | ŀ | | | | | |
| | t any time during the tax year, was the foundation a pa | | | | | | | | | |
| b If | "Yes," did the foundation receive any proceeds or hav | | | | 7b | | L | | | |
| Part \ | Information About Officers, Director and Contractors | s, Trustees, Fou | ndation Managers | s, Highly Pald Emp | ioyees, | | | | | |
| 1 Lis | st all officers, directors, trustees, foundation m | nanagers and their | compensation. See | instructions. | | | | | | |
| | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans | (e) Expen | se acco | unt, | | | |
| | (a) Name and address | devoted to position | enter -0-) | and deferred compensation | other al | lowance | 25 | | | |
| | | | | | | | | | | |
| ATCH | 1 | | 0. | 0. | | | 0. | | | |
| | | - | | | | | | | | |
| | | . — | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | ,, | | | | | |
| | | | | İ | | | | | | |
| 2 C | ompensation of five highest-paid employees | (other than thos | e included on line | e 1 - see instruction | ons). If n | one, | ente | | | |
| N | IONE." | | | I (DO 1) (1) | | | | | | |
| (a) Nr | ame and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit | (e) Expen | se acco | unt, | | | |
| (a) Na | and address of each employee paid more than \$30,000 | devoted to position | (c) Compensation | plans and deferred compensation | other al | lowance | es | | | |
| | | | | | | | | | | |
| NO. | ONE | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | <u> </u> | | | | | | |
| Total n | umber of other employees paid over \$50,000 | <u> </u> | | <u> ▶ </u> | Form 99 | | 0. | | | |

| 97433 | |
|------------------|---|
| Page 7 | |
| ees, | |
| | |
| 7 | |
| (c) Compensation | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 0. | |
| | |
| | |
| Expenses | |
| | |
| | |
| | |
| | |
| | |
| | |
| · · · | |
| | |
| | _ |
| _ | |
| | |
| | |
| | |
| Amount | |
| | |
| | |
| | |

| Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued) | rees, |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 3 Five h | ighest-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 | | |
| | | |
| | | |
| | | - |
| | | |
| Total number | er of others receiving over \$50,000 for professional services | 0 |
| Part IX-A | Summary of Direct Charitable Activities | |
| | idation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| Part IX-B | Summary of Program-Related Investments (see instructions) | . <u></u> |
| Describe th | e two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 NONE | | |
| | | |
| ² | | |
| All other pro | ogram-related investments. See instructions | - |
| 3 NONE | | |
| | | |
| Total. Add I | nes 1 through 3 | |

Form **990-PF** (2017)

COOK FAMILY FOUNDATION

| Form | 990-PF (2017) | | Page 8 |
|------|-----------------------------------------------------------------------------------------------------------|---------|----------------------------|
| Par | Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions) | ign fo | undations, |
| 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 | |
| | Average of monthly cash balances | 1b | |
| | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 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. |
| | t XI Distributable Amount (see Instructions) (Section 4942(I)(3) and (I)(5) private operating four | ndation | ne |
| | and certain foreign organizations, check here ▶ and do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | |
| 2 a | Tax on investment income for 2017 from Part VI, line 5 2a | | |
| b | Income tax for 2017 (This does not include the tax from Part VI) 2b | | |
| | Add lines 2a and 2b | 2c_ | |
| 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 . |
| Par | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | |
| | 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 | | |
| 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 | |
| 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 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 0. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca | | ing whether the foundation |
| | qualifies for the section 4940(e) reduction of tax in those years | | |

Form **990-P F** (2017)

| $D \sim $ | ^ | • |
|-----------|---|---|
| гач | c | |

| Рa | rt XIII Undistributed Income (see instri | uctions) | | ···· | |
|----|------------------------------------------------------------------------------------------|----------|---------------------|---------|------|
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2017 from Part XI, | Corpus | Years prior to 2016 | 2016 | 2017 |
| | line 7 | | | | 0. |
| 2 | Undistributed income, if any, as of the end of 2017 | | | | |
| а | Enter amount for 2016 only. | | | | |
| | Total for prior years 20 15 ,20 14 ,20 13 | | | | |
| | Excess distributions carryover, if any, to 2017 | | | | |
| | From 2012 | | | | |
| | From 2013 | | | | |
| | From 2014 | | | | |
| | From 2015 | | | | |
| | From 2016 | | | | |
| _ | Total of lines 3a through e | | | | |
| | Qualifying distributions for 2017 from Part XII, | | | | |
| | line 4 ▶ \$ | | | | |
| а | Applied to 2016, but not more than line 2a | | | | |
| b | Applied to undistributed income of prior years (Election required - see instructions), | | | | |
| , | Treated as distributions out of corpus (Election | | | | |
| · | required - see instructions) | | | | |
| d | Applied to 2017 distributable amount | | | | |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2017 | | | | |
| | (If an amount appears in column (d), the same | | | | |
| 6 | amount must be shown in column (a)) Enter the net total of each column as | | | | |
| | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| ь | Prior years' undistributed income Subtract | | | | |
| _ | line 4b from line 2b, , , , , | | | | |
| c | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount - see instructions | | | | |
| е | Undistributed income for 2016 Subtract line | | | | |
| | 4a from line 2a Taxable amount - see instructions | | | | |
| | Hadadahada aanaa faa 2017 Cubbaad linaa | | | | |
| T | Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be | | | | |
| | distributed in 2018 | | | | |
| 7 | Amounts treated as distributions out of corpus | | | | |
| • | to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| | required - see instructions) | | | | |
| 8 | Excess distributions carryover from 2012 not | | | | |
| | applied on line 5 or line 7 (see instructions) | | | | |
| 9 | Excess distributions carryover to 2018. | | | | |
| | Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 | Analysis of line 9 | | | | |
| a | Excess from 2013 | | | | |
| t | Excess from 2014 | | | | |
| c | Excess from 2015 | | | | |
| c | 1 Excess from 2016 | | | , | |
| | Excess from 2017 | | <u> </u> | <u></u> | |

COOK FAMILY FOUNDATION 82-3097433 Page 10 Form 990-PF (2017) NOT APPLICABLE Private Operating Foundations (see instructions and Part VII-A, question 9) Part XIV 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Tax year Prior 3 years (e) Total 2a Enter the lesser of the ad-(a) 2017 (b) 2016 (c) 2015 (d) 2014 justed net income from Part I or the minimum 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 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. Subtract line 2d from line 2c . . Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter (1) Value of all assets. . . (2) Value of assets qualifying under section 4942(j)(3)(B)(i)... b "Endowment" alternative testenter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . C "Support" alternative test - enter (1) 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 exempt organizations as provided in section 4942 (J)(3)(B)(III) (3) Largest amount of support from an exempt organization.... (4) Gross investment income. Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at Part XV any time during the year - see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: complete items 2a, b, c, and d. See instructions a The name, address, and telephone number or email address of the person to whom applications should be addressed.

Check here ▶ | X | If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions,

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

c Any submission deadlines.

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

JSA 7E1490 1 000

Page **11**

| | 990-PF (2017) | | | | Page 1 1 |
|-----|----------------------------------------------------------------------------------|-------------------------------------------------|------------|----------------------------------|---------------------------------------|
| Pa | rt XV Supplementary Information (| continued) | | | |
| _3_ | Grants and Contributions Paid Duri | ng the Year or Appr | oved for F | uture Payment | 1 |
| | Grants and Contributions Paid Duri Recipient Name and address (home or business) | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| | Paid during the year | or substantial contributor | recipient | | |
| a | Talu during the year | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | • | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Total | | | | |
| b | Approved for future payment | | | | |
| | | } | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | } | |
| | Total | | | <u></u> | |
| _ | | | | | · · · · · · · · · · · · · · · · · · · |

Form 990-PF (2017)

| Part XVI- | A Analysis of Income-Produ | ucing Act | ivities | | | |
|--------------|----------------------------------------------------------------------------|----------------------|---------------------------|-----------------------|----------------------------|------------------------------------------------------------|
| | amounts unless otherwise indicated | Unrela | ated business income | Excluded by | y section 512, 513, or 514 | (e) |
| - | service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| _ | Service revenue | | | | | (000 1110110111011101110111011110111101 |
| | | | | | | ~ |
| | | | | | | |
| | | | | | | |
| е | | | | | | |
| f | | | | | | |
| g Fees | and contracts from government agencies | | | | | |
| 2 Members | ship dues and assessments | | | 1 | | |
| 3 Interest o | n savings and temporary cash investments - | | | | | |
| 4 Dividend | s and interest from securities | | | | | |
| 5 Net renta | al income or (loss) from real estate | | | | | |
| | financed property | | | | | |
| | lebt-financed property | | | _ | | |
| | I income or (loss) from personal property | | | | - | |
| | vestment income | | | | | |
| , | oss) from sales of assets other than inventory | | | | | |
| | me or (loss) from special events · · · · or (loss) from sales of inventory | | | | | |
| | venue a | | | | | |
| | | | | | | |
| | | | | | | |
| _ | | | | | | |
| e | | | | | | |
| | Add columns (b), (d), and (e) | | | | | |
| 13 Total. Ad | dd line 12, columns (b), (d), and (e) | | | | 13 | |
| | Relationship of Activitie | | accomplishment of E | rompt Bur | nococ | |
| Part XVI- | | | | | | |
| Line No. | Explain below how each activit | | | | | |
| ▼ | accomplishment of the foundation | on's exemp | ot purposes (other than I | by providing | tunas for such purpose | es). (See instructions) |
| | 3. | | | | _ | |
| | | | | | <u> </u> | |
| | | | | | · | |
| | | | | | | |
| | | | | | | · |
| - | | | | - | | |
| | | | _ | | | <u> </u> |
| | | | | • | | |
| | | | | | | |
| | | - | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | · | |
| - | | | | | | |
| | I . | | | | | |

JSA 7E1492 1 000 Form 990-PF (2017)

KANSAS CITY, MO

| Form 990 | 0-PF (20 | 17) | COOK FAM | ILLY FOUN | DATION | | | 82-3097 | 433 | Pag | ge 13 |
|----------|----------|-------------------------------------------|--------------------------------------------------|--------------------|--------------------------|--------------------------------------------------|---------------------------------------------|----------------------|----------------------|------------|-----------------|
| Part > | (VII | Information R Exempt Organ | | ansfers to | and Transac | tions and | l Relationships | With Nonc | harit | able | ! |
| 1 D | id the | | | engage in a | ny of the follow | ring with an | y other organization | 1 described | | Yes | No |
| ın | | on 501(c) (other | | | | | on 527, relating | | | | |
| | _ | s from the reportin | na foundation to | a noncharit | able exempt or | anization of | | | | | |
| | | • | - | | | | | | 1a(1) | | Х |
| | | | | | | | | | 1a(2) | | Х |
| • | • | ansactions | | | | | | | 1 | | |
| (1 | I) Sale | s of assets to a no | ncharitable exe | mpt organiza | tion | | | | 1b(1) | | Х |
| | | | | | | | | | 1b(2) | | Х |
| | | | | | | | | | 1b(3) | | Х |
| (4 |) Rein | nbursement arrang | ements | | | | | | 1b(4) | | X |
| (5 | 6) Loar | s or loan guarantee | es | | | | | | 1b(5) | | X |
| (€ | 6) Perf | ormance of service | es or membersh | nip or fundra | ising solicitations | | | | 1b(6) | | X |
| | | | | | | | | | | | X |
| d If | the a | nswer to any of th | ne above is "Ye | es," complete | e the following | schedule. | Column (b) should | always show | the f | air m | narke |
| Va | alue of | the goods, other | assets, or serv | ices given b | y the reporting | toungation. | If the foundation re of the goods, other | eceived less | ınan ı ervices | iaii ii | awed |
| | | | | | kempt organization | | cription of transfers, trans | | | | |
| (a) Line | no | (b) Amount involved N/A | (c) Name of | nonchantable ex | kempt organization | N/A | cription of transiers, trans | actions, and snar | ing and | ngeme | -110 |
| | | N/A | | | | - 11,71 | | | | | |
| | | . | | | | | | | | | |
| | _ | | | | | | | | | | |
| | + | | | | | | | | | | |
| | | | | | | - | V-3E- | | | | |
| | | | | _, | | | | | | | |
| | | | | | | | A.A. | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | · | | | | | | | |
| | | | | | | | | , | | | |
| | | | | | <u> </u> | | | | | | |
| | | | | | | | | | | | |
| d | escribe | ed in section 501(c complete the follo |) (other than se wing schedule | ection 501(c) | (3)) or in section | 527? | re tax-exempt organ | ! | | es X | No. |
| | | (a) Name of organization | on | (b) | Type of organization | ` | (c) Descr | ription of relations | snip | | |
| - | | | | | ·· | | | | | | |
| | | | _ _ | | | | | | | | |
| | | | | | · | | | | | | |
| | | | | | | | | | | | |
| | Under | penalties of perjury, I decl | lare that I have exam | nined this return, | including accompanyir | g schedules and | statements, and to the be | st of my knowledg | ge and b | oelief, it | t is true |
| 0: | correct, | and complete Declaration of | of preparer (other than | taxpayer) is based | on all information of wi | nich preparer has | any knowledge | | _ | | |
| Sign | | Derale | o Co | 9KJ 5 | :.14.18 | | | | S discus eparer s | | retum below? |
| Here | Signa | ature of officer or trustee | | Date | | Title | | See instruction | · | Yes [| No |
| | <u> </u> | | | | | | | | | | |
| Paid | Į | Print/Type preparer's na | | Preparer's | § Justin Kell | ler | | " | PTIN | | |
| | | JUSTIN T KELL | | | | | | 12 - | P014 | | 31 |
| Prepa | | | PMG LLP | Om 07:- | mp 1000 | <u> </u> | Firm's I | EIN ▶13-5 | 5652 | 07 | |
| Use (| Only | Firm's address ► 10 | 000 WALNUT | ST., SUI | TE 1000 | | | | | | |

Form 990-PF (2017)

816-802-5200

Phone no

64106

| S, |
|-----|
| m |
| 4 |
| ř |
| σ |
| 0 |
| 3 |
| 1 |
| (2) |
| ω |
| |
| |
| |
| |
| |

2017 FORM 990-PF

COOK FAMILY FOUNDATION

| MENT 1 | EXPENSE ACCT AND OTHER ALLOWANCES | ó | · | Ö | Ö | | Ö | |
|--------------------------------------|---------------------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------|--|
| ATTACHMENT | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | Ċ | Ö | | Ö | o | .0 | |
| | COMPENSATION | Ö | Ö | Ö | .0 | . 0 | .0 | |
| OF OFFICERS, DIRECTORS, AND TRUSTEES | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | PRESIDENT/DIRECTOR 1.00 | VICE PRESIDENT/DIRECTOR 1.00 | SECRETARY/DIRECTOR 1.00 | TREASURER/DIRECTOR 1.00 | DIRECTOR 1.00 | DIRECTOR 1.00 | |
| FORM 990PF, PART VIII - LIST OF | NAME AND ADDRESS | GERALD ALLEN COOK 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | KAY LYNN COOK 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | PAULA COOK DAUGHERTY 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | LOREN COOK, II 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | GERALD A. "CHIP" COOK, JR. 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | ELAINE COOK 2435 E COTTAGE BOULEVARD OZARK, MO 65721 | |

3581NL 1508

2017 FORM 990-PF

82-3097433

| ATTACHMENT 1 (CONT'D) | CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER N BENEFIT PLANS ALLOWANCES | · o · · o |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------|
| | COMPENSATION | Ü |
| FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | DIRECTOR 1.00 |
| FORM 990PF, PART VIII - LIST | NAME AND ADDRESS | JERRY DAUGHERTY 2435 E COTTAGE BOULEVARD OZARK, MO 65721 |

| 0. |
|----|
| 0. |
| 0. |

GRAND TOTALS