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.

	ndar year 2017 or tax year beginning APR f foundation	. 1, 2017	, and ending	MAR 31, 2018 A Employer identification	
aine u	Touridation			A chiployer identification	I Hambel
	A SCHMIDT SCHOLARSHIP F			23-7430868	3
	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	4400
	BOX 1803				-6100
	town, state or province, country, and ZIP or foreign p OGE CITY, <u>KS</u> 67801	iostai code		C If exemption application is a	ending, check here
	k all that apply: Initial return	Initial return of a fo	rmer public charity	D 1 Foreign organization	s, check here
	Final return	Amended return			
	Address change	Name change		2 Foreign organizations m check here and attach c	eeting the 85% test, omputation
	k type of organization: X Section 501(c)(3) e:	• •	. a Y	E If private foundation sta	
		Other taxable private foundaing method: X Cash	Accrual	under section 507(b)(1	• • • •
	·	ther (specify)	Accidal	F If the foundation is in a under section 507(b)(1	
▶ \$	231,215. (Part I, colur		S.))(D), oncok nore
art		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
1	Contributions, gifts, grants, etc., received			N/A	
2	Check ► X if the foundation is not required to attach Sch. B interest on savings and temporary cash investments				
4	cash investments Dividends and interest from securities	5,670.	5,670.		STATEMENT :
1 '	Gross rents	3,0,0	3/0/01		D 11111111111
1	Net rental income or (loss)				
6a 1	Net gain or (loss) from sale of assets not on line 10	3,456.			
1	Gross sales price for all assets on line 6a 6,596.				SECTIVED_
7			3,456.		AUG 20 2018
8	Net short-term capital gain			0	AUG 20 ZU18
10:	Income modifications Gross sales less returns I and allowances				CCCAL US
1 .	Less Cost of goods sold				JULEN, UI
(Gross profit or (loss)				
11	Other income				
12	Total Add lines 1 through 11	9,126.	9,126.		
13	Compensation of officers, directors, trustees, etc	0.	0.		1
14	Other employee salaries and wages Pension plans, employee benefits				-
. !	Legal fees				
l i	Accounting fees STMT 2	675.	337.		33
(Other professional fees STMT 3	2,827.	2,827.		<u> </u>
17	Interest	450			ļ
18	Taxes STMT 4 Depreciation and depletion	173.	0.		
19 20	Occupancy	· ·		<u> </u>	
21	Travel, conferences, and meetings				
22 23 24 25	Printing and publications				
23	Other expenses STMT 5	171.	136.		3
24	Total operating and administrative	2 245	2 200		25
	expenses. Add lines 13 through 23	3,846.	3,300.		10,60
	Contributions, gifts, grants paid Total expenses and disbursements	10,600.			10,00
20	Add lines 24 and 25	14,446.	3,300.		10,97
27	Cubbrook line OC from line 10s				
4	Excess of revenue over expenses and disbursements	-5,320.			
t	Subtract file 25 from life 12: R Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) 1-03-18 LHA For Paperwork Reduction Act Notic		5,826.		
1 0	Adjusted net income (if negative, enter -0-)]		N/A	

For	m 99	0-PF(2017) ELMA SCHMIDT SCHOLARSHI		23-7430868		
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		
<u>-</u>	-	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	883.	1,065.	1,065.	
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
	Ì	Less: allowance for doubtful accounts			<u> </u>	
	4	Pledges receivable ►				
	Ì	Less; allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	İ	disqualified persons				
	7	Other notes and loans receivable		Ĭ		
		Less: allowance for doubtful accounts ▶			<u> </u>	
ţ	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
⋖	10a	Investments - U.S. and state government obligations				
	Ь	Investments - corporate stock				
	C	Investments - corporate bonds		<u> </u>	···	
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT 6	142,166.	136,664.	230,150.	
	14	Land, buildings, and equipment: basis ▶				
		Less accumulated depreciation				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers - see the				
		instructions. Also, see page 1, item I)	143,049.	137,729.	231,215.	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
abi	21	Mortgages and other notes payable				
_	22	Other liabilities (describe >)				
_	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow SFAS 117, check here				
	1	and complete lines 24 through 26, and lines 30 and 31				
or Fund Balances	24	Unrestricted				
<u>a</u>	25	Temporarily restricted				
Ва	26	Permanently restricted				
핕		Foundations that do not follow SFAS 117, check here		İ		
Ę		and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds	170,201.	170,201.		
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
Aŝ	29	Retained earnings, accumulated income, endowment, or other funds	-27,152.	-32,472.		
Šet	30	Total net assets or fund balances	143,049.	137,729.		
J						
	31	Total liabilities and net assets/fund balances	143,049.	137,729.		
P	art	Analysis of Changes in Net Assets or Fund Ba	alances			
_						
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	30	[]		
	•	st agree with end-of-year figure reported on prior year's return)		1	143,049.	
2	Ente	r amount from Part I, line 27a		2	-5,320.	
		r increases not included in line 2 (itemize)	·	3	0.	
		lines 1, 2, and 3		4	137,729.	
		eases not included in line 2 (itemize)		5	<u> </u>	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	137,729.	
					Form 990-PF (2017)	

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11,434.

10,973.

7

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	990-PF (2017) ELMA SCHMIDT SCHOLARSHIP FUND	0(-)	1040(b) 4040(a	\ == 4C	<u> 23 - 743</u>	<u>0868</u>		Page 4	
	rt VI Excise Tax Based on Investment Income (Section 494			e), or 48	948 - see	ınstru	CTIOI	15)	
ੑ1a	Exempt operating foundations described in section 4940(d)(2), check here and e								
_	Date of ruling or determination letter: (attach copy of letter if nec			1 1					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-	and enter 1%	P +	1		1	<u> 17.</u>	
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49		, , , ,)				_	
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, er	iter -0-)	H	2			<u>0.</u>	
3	Add lines 1 and 2			-	3			<u>17.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, of	otners, e	nter -u-)	-	4			0.	
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			}	5		<u>т</u>	<u>17.</u>	
	Credits/Payments;	١.,	ł	0					
	2017 estimated tax payments and 2016 overpayment credited to 2017	6a		0.					
	Exempt foreign organizations - tax withheld at source	6b		0.					
	Tax paid with application for extension of time to file (Form 8868)	6c		0.					
	Backup withholding erroneously withheld	_6d		- 0.	_)			^	
	Total credits and payments. Add lines 6a through 6d			ŀ	7			0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached		. }	8			0.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9		<u>_</u>	<u> 17.</u>	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1		10				
	Enter the amount of line 10 to be: Credited to 2018 estimated tax ► rt VII-A Statements Regarding Activities		Refun	ded 🚩	11				
		.)					Yes	No	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legis	siation o	r did it participate or	intervene i	n	-	163		
	any political campaign?	0.0-		41		1a		X	
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo				lion	1b		<u> </u>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	ot any m	iateriais published or						
	distributed by the foundation in connection with the activities.							37	
	Did the foundation file Form 1120-POL for this year?					1c		<u>X</u>	
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	•		^					
	(1) On the foundation. > \$ 0. (2) On foundation managers			0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax	imposed on foundat	ЮП					
_	managers. > \$ 0.	DC0						v	
2	Has the foundation engaged in any activities that have not previously been reported to the life to the	H5'				2		<u>X</u>	
_	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 in the laws as after a smaller government of the shapes of the shape of the shapes of the shapes of the shape of	insa um	ent, articles of incorp	oralion, or				v	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	0				3		$\frac{x}{x}$	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	11 /			N/A	4a			
_	If "Yes," has it filed a tax return on Form 990-T for this year?	2			M/W	4b		X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•				5			
	If "Yes," attach the statement required by General Instruction T	ıth arı							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	mer.				1 1	:		
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandator 	n, diraati	one that conflict with	the etete	law				
	, , ,	y unecu	ons mai connict will	ine state	IdW	أيأ	x		
_	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	alata Dar	t II and (a) and Dart	VI.		7	X		
′	Did the foundation have at least \$5,000 in assets at any time during the year? If res, comp	piete Pai	t ii, coi. (c), and Part	^V					
0-	Enter the states to which the foundation reports or with which it is registered. Can instructive					1 1			
Вa	Enter the states to which the foundation reports or with which it is registered. See instruction	ons.							
L	KS	\ttorpo:	Conoral (or designed	٠		.			
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	шотпеу	deneral (or designati	=)		مد	v		
•	of each state as required by General Instruction G? If "No," attach explanation	nation 40	140/11/01 or 4040/1/0	() for onla-	dar	8b	_X_),
7	Is the foundation claiming status as a private operating foundation within the meaning of se			ij ioi caleli	iudi		i	v	
40	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," com					9		<u>X</u>	
ιŲ	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listing	their names and address	es		10	DE		

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X

3b

4a

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2017) ELMA SCHMIDT SCHOLARSHIP Part VII-B Statements Regarding Activities for Which F		Required (contin	23-74308 ued)	68	F	Page 6
5a During the year, did the foundation pay or incur any amount to:					/es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	[es 🗓 No			
(2) Influence the outcome of any specific public election (see section 4955); o	, ,,					
any voter registration drive?	, , , , ,		es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?		es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization)	Ì	
4945(d)(4)(A)? See instructions		☐ Ye	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	· · · · · · · · · · · · · · · · · · ·		l	İ	
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , , , , , , , ,		es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	•				
section 53.4945 or in a current notice regarding disaster assistance? See instri		•	N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check t	nere					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined			- 1	
expenditure responsibility for the grant?	N	/A 🔲 Ye	es 🔲 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		İ			
a personal benefit contract?		Ye	s X No	1	}	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ь	ĺ	\mathbf{X}_{-}
If "Yes" to 6b, file Form 8870.			Ţ			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		ĺ	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		_N/A	7b		
Part VIII Information About Officers, Directors, Trustore Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	у			
List all officers, directors, trustees, and foundation managers and ti	heir compensation.			<u> </u>		
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(е	Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	l acc	count, Ilowan	other
PATTY HUCKABY	PRESIDENT	Citter of	compensation	l ~	110 110	1000
PO BOX 1803				ĺ		
DODGE CITY, KS 67801	1.00	0.	0.			0.
	SECRETARY/TRE					
PO BOX 1803]		
DODGE CITY, KS 67801	1.00	0.	l 0.			0.
	VICE-PRESIDEN					
PO BOX 1803						
DODGE CITY, KS 67801	1.00	0.	0.			0.
	H:					
	1 1 1 1 1 1 1	1110115 11				
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	1.) Expe	nce-
(a) Name and address of each employee paid more than \$50,000	'hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	l acc	count,	other
	devoted to position		compensation	a	llowan	ices
NONE						
				1		
			<u> </u>	ļ		
				1		
Total number of other employees paid over \$50,000		·	>			0
			Form	990-	-PF (2017)

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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ındation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant	statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research paper	s produced, etc.	
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax ye	ear on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	234,320.
	Average of monthly cash balances	1b	1,976.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	236,296.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	236,296.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,544.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	232,752.
6	Minimum investment return Enter 5% of line 5	6	11,638.
Р	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and foreign organizations, check here ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	11,638.
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	117.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,521.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,521.
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	11,521.
P	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	10,973.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	<u> </u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	10,973.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	_5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,973.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	iualifies fo	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

Destrobubble amount for 2017 wom Part X, Inn?		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2. Unaderbused rooms, day, we after seed of 2017 a. Final and the 2018 only b Total for prior years: 3. Excess distributions carryover, if any, to 2017; a. From 2013 c. From 2016 d. From 2016 d. From 2016 d. Grand the Sa throughe 4. Qualifying distributions for 2017 from Part XII, line 4; b ≤ 10,973. A Applied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A Applied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A papied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A papied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A papied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A papied to undistributed mome of prior Part XII, line 4; b ≤ 10,973. A papied to undistributed on to corpus G. Treated as distributions or of corpus G. Treated as distributions or of corpus G. Treated as distributions or of corpus S. Excess distributions carryows appears to 207. C. Applied to 2017 distributishs amount G. Applied to 2017 distributishs amount G. Applied to 2017 distributishs amount G. Applied to 2017 distributishs amount G. Applied to 2017 distributishs amount G. Applied to 2017 distributishs amount G. Carrier Administributed mome services G. Carrier Administributed mome. C					
Enter amount for 2016 only 5 Total for prior years: 2					11,541.
3 Excess distributions carryover, rlany, to 2017; a From 2013 c From 2013 c From 2016 from 2015 e From 2016 1 Total of lines 3a through e 4 Qualifying distributions for 2017 from Part XII, Int. 4 ¹ × S 10, 973 4 Appled to 2016, but not more than hine 2a 4 Appled to 2016 third interior or 2017 from years (Election required - sea instructions) 6 Treated as distributions or of corpus 6 Remaning amount distributed control or prior years (Election required - sea instructions) 6 Appled to 2017 distributible amount 6 Remaning amount distributed out of corpus 5 Excess cabinumes carryover appled to 2017 5 Excess cabinumes carryover appled to 2017 0 . 6 Enter the net total of a fact Subsection of the server windows marks te shore in century (a) 7 Excess faction the 6th of think in notice of deficiency has been previously assessed 9 Subtract line 6 from line 6b. Tracible amount - sea instructions 9 Undestributed income for 2017, Subtract line 4 from line 2a. Transbeamount see miss. 1 Undestributed moreine for 2017, Subtract line 4 from line 2a. Transbeamount see miss. 1 Undestributed income for 2017, Subtract line 4 from line 2a. Transbeamount see miss. 1 Undestributed moreine for 2017, Subtract line 4 from line 2a. Transbeamount see miss. 1 Undestributed income for 2017, Subtract line 4 from line 2a. Transbeamount see miss. 1 Undestributed moreine for 2017, Subtract line 4 from line 2a. Transbeamount must be distributed in 2018 7 Amounts treated as distributions carryover for 2018 8 Excess from line 1. This amount must be distributed in 2018 9 P. 857. 2 Roses sideributions carryover for 2018 8 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016 9 Excess from 2016	*			0.200	
3 Excess distributions carryover, if any, to 2017; a From 2013 b From 2013 c From 2014 d From 2016 e				9,309.	
3 Excess distributions carryover, if any, to 2017: a From 2018 a From 2016 a From 2016 from 2015 a From 2016 from	p rotal for prior years.		0		
a From 2012 b From 2013 c From 2014 d From 2015 e From 2016 e From 2016 d From 2016 e From 2016 e From 2016 d From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2017 e From 2018 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2016 e From 2017 e From 2016 e Fro	Fxcess distributions carryover if any to 2017				
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Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
.1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		<u>-</u>	▶		
b Check box to indicate whether the found		g foundation described		4942(j)(3) or 494	12(1)(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) 2014	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
 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		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c			/		
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:			./		
(1) Value of all assets		/			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter		/			
2/3 of minimum investment return shown in Part X, line 6 for each year			:		
listed		/			
c "Support" alternative test - enter:					
 Total support other than gross investment income (interest, 					
dividends, rents, payments on		/			
securities loans (section	/				
512(a)(5)), or royalties)	/-			+	
(2) Support from general public and 5 or more exempt					
organizations as provided in	/				
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization	(· · · · · · · · · · · · · · · · · · ·	<u> </u>	
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or mo	re in assets
at any time during t	_	uctions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh year (but only if they have contributed π			ributions received by th	e foundation before the closi	e of any tax
	1016 (11a11 \$5,000). (566 S	6611011 307 (d)(2).)			
NONE					
 List any managers of the foundation wh other entity) of which the foundation has 			(or an equally large port	ion of the ownership of a pai	rtnership or
NONE	ou 1070 or grouter interes	,			
	on Crant Citt Loon	Sabalarahin ata Di			
2 Information Regarding Contribution			-		ata far frada 16
Check here \(\sum_{\text{loc}} \) if the foundation of the foundation makes gifts, grants, etc.,	•	•	•	•	Sts for funds. If
					
a The name, address, and telephone num	per or email address of tr	e person to wnom appili	cations should be addre	SSeo:	
SEE STATEMENT 7					
b The form in which applications should b	e submitted and informat	ion and materials they s	nould include:		
c Any submission deadlines:					
					
d Any restrictions or limitations on awards	s, such as by geographica	u areas, charitable fields,	kinds of institutions, or	other factors:	

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year NONE ALEXANDREA PHELPS N/A EDUCATIONAL 3007 WESTVIEW AVENUE DODGE CITY KS 67801 2,850, EMMALY SLATTERY NONE N/A EDUCATIONAL 10844 106 ROAD DODGE CITY, KS 67801 1,824. NONE LISA QUINONES N/A EDUCATIONAL 1402 AVENUE A DODGE CITY KS 67801 1,140. NONE SHEENA GINGERICH N/A EDUCATIONAL 2113 HART STREET DODGE CITY, KS 67801 1,000. LEZAH FOX NONE N/A EDUCATIONAL 401 LEE, PO BOX 312 2.736. ASHLAND KS 67831 CONTINUATION SHEET(S) SEE Total ➤ 3a 10,600. b Approved for future payment NONE

≥ 3b

Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	e indicated. Unrelated business income Excluded by section 512, 513, or 514		(e)		
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
a	<u> </u>		ļ		
b			 -		
c					
d	<u> </u>				
e					
1	<u> </u>				
g Fees and contracts from government agencies		ļ			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	5,67	0.
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			1 1	2 20	1 076
than inventory			14	4,38	1,076.
9 Net income or (loss) from special events	ļ		<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			<u> </u>	ļ	
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		8,05	1,076. 3 9,126.
13 Total. Add line 12, columns (b), (d), and (e)		<u> </u>			9,126.
(See worksheet in line 13 instructions to verify calculations.)					
	. 41 4			+ D	
Part XVI-B Relationship of Activities to	tne Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incom	ne is renorted	in column (e) of Part XVI-A	contri	huted importantly to the a	accomplishment of
the foundation's exempt purposes (other than b			001161	batos importantly to the t	2000 in pilotinione of
8 THE GAINS WERE USED TO			DΔT	בס שאים סיים מי	NIDIDATES
O THE GAINS WERE USED TO	FOND 5	CHOHARDITES	LVI	D IO IIII CA	MOIDAIES.
				 	
					
					
					
					

		Exempt Organ	izations							
1	Did the or	ganization directly or indir	rectly engage in any	y of the following	ng with any other organization	on described in sec	tion 501(c)		Yes	No
	(other tha	n section 501(c)(3) organ	iizations) or in sect	ion 527, relatin	g to political organizations?			} i		
а	Transfers	from the reporting founda	ation to a noncharit	able exempt or	ganization of					
	(1) Cash	·			•			1a(1)		_X_
	(2) Other							1a(2)		X
h	Other tran							1-7-1		
٠		of assets to a noncharital	hle exempt organiz	ation				16(1)		X
	1.7	hases of assets from a noi						16(2)		X
		al of facilities, equipment,		organization				1b(3)		X
	` '	bursement arrangements	Of Other assets					1b(4)		X
		s or loan guarantees								X
			mharahin ar fundri	noina policitatio	nno.			1b(5)		X
		ormance of services or me	•	-				1b(6)		X
	_	if facilities, equipment, ma	-			waya ahaw tha fair	market value of the goods	1c_		
u					edule. Column (b) should alved less than fair market valu				e15,	
		i) the value of the goods,				Je ili aliy ilalisacilo	ii vi silariliy arranyement,	SHOW III		
(2)(on eni.	(b) Amount involved			e exempt organization	/d) Description	on of transfers, transactions, and	Lohovina on		
(4)((D) Amount involved	(c) Harrie		c cacinpt organization	(d) Description	of transiers, transactions, and	Sharing an	angeme	
			 	N/A		+				
_										
			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
										
										
										
										
										
					 					
										
			 							
				 -						
					 		 _			
						<u></u>	·			
2a		-	•	-	e or more tax-exempt organi	izations described	Г		[٦
		501(c) (other than sectio	, , , , , , , , , , , , , , , , , , , ,	section 5277			L	Yes	LX] No
b	If "Yes," co	omplete the following scho		·	1 (1) T (4.3 Dagamakan akadakan			
		(a) Name of org	janization		(b) Type of organization		(c) Description of relations	smp		
		N/A				 				
					 	 				
					ļ	 	 			
						 				
	1,5.		Abot I bours and a 15	hun entire	a company a color della color	I statements and to the	o hact of my knowled =-			
٥:	l and b				ng accompanying schedules and an taxpayer) is başed on alj inforn		or han any kaomindan	ay the IRS of		
	gn allow	Pott 11	<i>(</i>	,	18/15/18		sh	own below	? See in:	str
116		1 all offer	chalon			PRESI	DENT L	X Yes		J No
	Sigr	nature of officer or trustee		15	Date	Title	Chook L 3 t Drive			
		Print/Type preparer's na	ime C	Preparer's s	signature	Date	Check if PTIN			
-	.:.1			X	States con	8/15/18	self- employed			
	aid	DEBBY SLAT			y Outly I'm	3.731.3		0107		
	eparer	Firm's name ► SMO	LL & BAN	NING, C	PA'S //LLC		Firm's EIN ► 48 - 1	2108	79	
Us	se Only						 			
		Firm's address ► 24								
		DO	DGE CITY	<u>, KS 67</u>	801		Phone no. 620 – 2			
								·) DE	100471

FORM 990-PF DIVIDENT	DS AND INTER	EST FROM SECUR	TTIES ST	CATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
LPL FINANCIAL 8,050	0. 2,38	0. 5,670.	5,670.	
TO PART I, LINE 4 8,050	2,38	0. 5,670.	5,670.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEE	675.	337.		338.
TO FORM 990-PF, PG 1, LN 16B	675.	337.		338.
FORM 990-PF (OTHER PROFES	SIONAL FEES	Si	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY FEES ANNUAL CUSTODIAL FEE	2,797. 30.	2,797.		0.
TO FORM 990-PF, PG 1, LN 16C	2,827.	2,827.		0.
FORM 990-PF	TAX	ES	Si	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	173.	0.		0.
TO FORM 990-PF, PG 1, LN 18	173.	0.		0.

FORM 990-PF	OTHER E		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
BOX RENT BONDING INSURANCE MISCELLANEOUS	70. 100. 1.	100		35. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	171.	136	•	35.	
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6	
DESCRIPTION		LUATION ETHOD B	OOK VALUE	FAIR MARKET VALUE	
LPL FINANCIAL		COST	136,664.	230,150.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13		136,664.	230,150.	

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PATTY HUCKABY PO BOX 1803 DODGE CITY, KS 67801

TELEPHONE NUMBER

(620) 227-8803

FORM AND CONTENT OF APPLICATIONS

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

ANY SUBMISSION DEADLINES

APRIL 1 FOR FALL SEMESTER; NOVEMBER 1 FOR SPRING SEMESTER

RESTRICTIONS AND LIMITATIONS ON AWARDS

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

3 Grants and Contributions Paid During the Ye	ear (Continuation)	,	·	
Recipient	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
Name and address (home or business)	or substantial contributor	recipient		
				ļ
		.,,		}
JESIKA JAMES	NONE	N/A	EDUCATIONAL	
1117 WEST KING TERRACE ULYSSES KS 67880				1,050.
OLISSES AS 67000		 		1,050,
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Total from continuation sheets				1,050