DLN: 93491259002289

OMB No 1545-0052

2017

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

or	caler	ndar year 2017, or tax year beginning 11-01-20	017, a	nd ending 10-31	-2018	
		ndation D S & DEBBI C ELKOURI FOUND		A Employer 10	dentification numbe	r
Num	her and	street (or P O box number if mail is not delivered to street address) Room/suite			
	00 LONG		, Room, saice	B Telephone no	umber (see instructior	ns)
		, state or province, country, and ZIP or foreign postal code S 672061819		C If exemption	ı application is pendinç	g, check here
i Ch	neck al	l that apply $igsqcup$ Initial return $igsqcup$ Initial return of a	former public charity	D 1. Foreign of	rganızatıons, check he	ere 🕨 🗀
		Final return Amended return			rganizations meeting ck here and attach cor	
		Address change Name change			oundation status was t	· _
_	,	pe of organization $lacksquare$ Section 501(c)(3) exempt private 4947(a)(1) nonexempt charitable trust $lacksquare$ Other taxab	foundation le private foundation		on 507(b)(1)(A), chec	
		et value of all assets at end J Accounting method	☑ Cash ☐ Accru		ation is in a 60-month	
		rom Part II, col (c), \$ 91,079	t be on cash basis)	under section	on 507(b)(1)(B), checl	k here
Pa	rt I	Analysis of Revenue and Expenses (The total				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	142,955	5		
	2	Check ▶ ☐ If the foundation is not required to attach				
	3	Interest on savings and temporary cash investments	135	135	135	
	4	Dividends and interest from securities				
	5a	Gross rents				
a.	b	Net rental income or (loss)	-			
Ĭ	6a	Net gain or (loss) from sale of assets not on line 10	-1,645	5		
Revenue	Ь_	Gross sales price for all assets on line 6a 141,310	2	20.005	-	
Ž	7	Capital gain net income (from Part IV, line 2)		30,385	,	
	8	Net short-term capital gain				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	141,445	30,520	135	
	13	Compensation of officers, directors, trustees, etc				
	14	Other employee salaries and wages				
Š	15	Pension plans, employee benefits				
2	16a	Legal fees (attach schedule)				
×	b	Accounting fees (attach schedule)	1,000	1,000	,	1,000
9	С	Other professional fees (attach schedule)				
	17	Interest	96-1 (51			
<u> </u>	18	Taxes (attach schedule) (see instructions)	651			
Ē	19	Depreciation (attach schedule) and depletion				
¥	20 21	Occupancy				
<u> </u>	22	Printing and publications				
 <u>D</u> i	23	Other expenses (attach schedule)	150	150		150
Operating and Administrative Expenses	24	Total operating and administrative expenses.		1	1	
<u>=</u>		Add lines 13 through 23	1,801	1,150)	1,150
)	25	Contributions, gifts, grants paid	86,585	5		86,585
	26	Total expenses and disbursements. Add lines 24 and 25	88,386	1,150)	87,735
	27	Subtract line 26 from line 12				·
	а	Excess of revenue over expenses and disbursements	53,059)		
	ь	Net investment income (If negative, enter -0-)		29,370		
	С	Adjusted net income(If negative, enter -0-)		<u> </u>	135	
or	Paper	work Reduction Act Notice, see instructions.		Cat No 11289	X For	m 990-PF (2017

	l				
	2	Savings and temporary cash investments	38,020	91,079	91,079
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
s	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	l c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	38,020	91,079	91,079
	17	Accounts payable and accrued expenses	30,020	32,673	
		• • •			
es	18	Grants payable			
υ	19	Deferred revenue	1		

	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	38,020	91,079	
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>e</u> s	19 20 21	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
a	21	Mortgages and other notes payable (attach schedule)			

Liabiliti 22 Other liabilities (describe >_ Total liabilities(add lines 17 through 22) 23 Foundations that follow SFAS 117, check here ▶ Net Assets or Fund Balances and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted . Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds

28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 38,020 91,079

38,020 91,079 30 Total net assets or fund balances (see instructions) .

38,020 91,079 31 Total liabilities and net assets/fund balances (see instructions) .

Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

38,020

53,059

91,079

91,079 Form **990-PF** (2017)

2

3 4

5

6

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

2

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a 500 SHARES CONCHO RE	SOURCES		D	2015-06-30	2017-12-07
b 10000 SHARES HALCON		D	2010-06-30	2017-12-12	
c					
d					
	(f)		(g)		h)
(e)	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)		ense of sale) minus (g)
a 6	9,463		48,525		20,93
b 7	1,847		62,400		9,44
С					
d					
e					
	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	1)
complete only for assets	(j)		(k)		l) h) gain minus
(i)	Adjusted basis		of col (ı)		less than -0-) or
F M V as of 12/31/69	as of 12/31/69		(j), if any	Losses (fro	om col (h))
a					20,93
b					9,44
С					
d					
e					
-	or (net capital loss) gain or (loss) as defined in sections in the section in the s		Part I, line 7	3	30,385
_	Under Section 4940(e) for Re				
	e section 4942 tax on the distributal		n the base period?) Ye	es 🗌 No
	t qualify under section 4940(e) Do				
	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2016	142,373		92,090		1 54602
2015	141,827		60,672		2 337602
2014	140,117		107,030		1 309138
2013	171,083		126,081		1 356929
2012	101,350		93,879		1 079581
2 Total of line 1, column (d	d)		2		7 62927
3 Average distribution ratio	for the 5-year base period—divide t	the total on line 2 by 5			
	dation has been in existence if less		3		1 525854
	ncharitable-use assets for 2017 from	•	4		93,617
5 Multiply line 4 by line 3			5		142,846
	ent income (1% of Part I, line 27b)		6		294
			7		143,140
. , ,	ons from Part XII, line 4 ,		8		87,735
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	g a 1% tax rate Se	e the Part VI

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

,	,		
D- 1 VIII	Information About Officers, Di	irectors, Trustees, Foundation Manage	ers, Highly Paid Employees,
Part VIII	and Contractors		

1 List all officers, directors, trust	ees, f	oundation managers an	d their compensation	(see instructions).	
(a) Name and address		Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID S ELKOURI	DRE	SIDENT	0		
1127B BANKS HOUSTON, TX 77006	1 00		0		
DEBBI C ELKOURI	SEC	RETARY TREASURER	0	C	C
800 LONGFORD	1 00		Ĭ		
WICHITA, KS 67206					
2 Compensation of five highest-p	aid e	mployees (other than th	nose included on line 1		ne, enter "NONE."
(a) Name and address of each employee more than \$50,000	paid	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE					
		4			
Total number of other employees paid o		<u>'</u>			
3 Five highest-paid independent		•	· · · · · · · · · · · · · · · · · · ·		E".
(a) Name and address of each pers	on pa	id more than \$50,000	(b) ⊤yp	e of service	(c) Compensation
NONE					
			1		
			-		
T-1-1	-0.00	2 6			
Total number of others receiving over \$ Part IX-A Summary of Direct				· · · · · ·	
-			. 4	- the second second second	
List the foundation's four largest direct charitate organizations and other beneficiaries served, or				nation such as the number of	Expenses
1			, , , , , , , , , , , , , , , , , , ,		
3					
2					
3					
4				<u> </u>	_
Part IX-B Summary of Progra	m-R	elated Investments	(see instructions)		
Describe the two largest program-related in			·	and 2	Amount
1	• 0501110	sites induce by the roundation a	aring the tax year on lines 1	and 2	Amount
*					
2					
All other program-related investment	See	instructions			
3					
Total. Add lines 1 through 3					
				<u> </u>	Form QQ0-DF (2017

2b

2c

3

4

5

6

1a

1b

2

3a 3b

4

5

587

4.094

4.094

4.094

87,735

87.735

87,735

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Income tax for 2017 (This does not include the tax from Part VI). . .

Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4 5

6

1

2

3

4

5

b

Part XII

Page 9

4,094

4,094

Form 990-PF (2017)

Form 990-PF (2	017)
Part XIII	Undis

Form 990-PF (2017)							
Part XIII	Undistributed Income (see instructions)						

Form 990-PF (2	017)
Part XIII	Undist

- 1 Distributable amount for 2017 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only.
- Excess distributions carryover, if any, to 2017 From 2012.
- **b** Total for prior years **b** From 2013. . . .
- c From 2014. . .

c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

6 Enter the net total of each column as

b 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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f 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

indicated below:

d Applied to 2017 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

- 65.880 d From 2015. . . . e From 2016.
- 166,858 134 790 139,403 138,240 f Total of lines 3a through e.
- 4 Qualifying distributions for 2017 from Part
- XII, line 4 🕨 \$ a Applied to 2016, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions).

(a)

Corpus

645.171

83.641

728,812

65.880

662,932

166.858 134,790

139,403

138.240

83.641

(b)

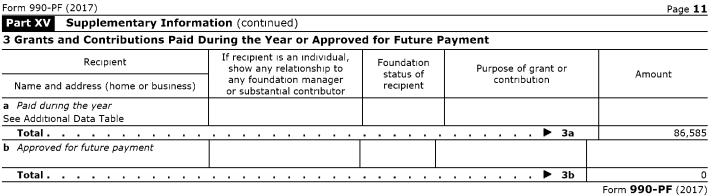
Years prior to 2016

(c)

2016

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

factors N/A



er gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
_	and contracts from government agencies rship dues and assessments.					
Intere	st on savings and temporary cash					
	ments			14	135	
	tal income or (loss) from real estate					
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	r (loss) from sales of assets other than	-		+		
	ory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
b	evenue a					
e						
e Subtota	al Add columns (b), (d), and (e).			13	135	135
e Subtota Total. / (See wo	Il Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Inksheet in line 13 instructions to verify calcul	lations)				135
e Subtota Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. (See wo Irt XVII	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculated and the color of the co	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. (See wo Irt XVII	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
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Subtota Total. / See wo rt XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. / See wo rt XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. A See wo It XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. A See wo It XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
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Subtota Total. / (See wo rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. (See wo Int XVII	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
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Subtota Total. (See wo Int XVII	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135
Subtota Total. (See wo Int XVII	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 13 instructions to verify calculus. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) e Accomplish income is report	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	135

orm 9	90-PF (2	<u> </u>								Pa	ge 13
Part	XVII	Information Re Exempt Organi		fers To a	and Transac	tions and I	Relationships W	ith Nonchari	table		
		anization directly or in ode (other than sectio								Yes	No
a Tra	nsfers fr	om the reporting foun	dation to a noncha	ırıtable exe	empt organizat	on of					
(1)) Cash.								1a(1)		No
(2)) Other	assets							1a(2)		No
	ner trans										l
٠,	•	of assets to a nonchari							1b(1)		No
		ases of assets from a n of facilities, equipmer							1b(2) 1b(3)		No No
	•	ursement arrangemen	•						1b(3)		No
		or loan guarantees.							1b(5)		No
		nance of services or m							1b(6)		No
٠.		facilities, equipment, n		•					1c		No
of t	the good any trans	er to any of the above s, other assets, or ser- saction or sharing arra	vices given by the	reporting t	foundation If t	he foundatioi	n received less than	fair market valu			
(a) Line	e No	(b) Amount involved	(c) Name of noncha	arıtable exer	mpt organization	(d) Desc	cription of transfers, tra	insactions, and sha	iring arra	ngemen	its
des	scribed in	dation directly or indire in section 501(c) of the implete the following so (a) Name of organizatio	Code (other than	section 50		ection 527?		escription of relati	☐ Yes	✓	No
Sign	of my which	r penalties of perjury, knowledge and belief preparer has any kno	, it is true, correct,		olete Declarati	on of prepare	er (other than taxpa	yer) is based on		matio	n of
J	*:	****			12019-09-13	*	****	,			-

-									
descril	oed in section s," complete th	501(c) of the	Code (other chedule	than section 5	ed to, one or mo i01(c)(3)) or in s (b) Type of organiz	ection 52			☐ Yes ☑ No
	(=,	ga <u>.</u>			(2) Type or organiz			(2) 2 3 3 3 1 5	and the state of t
		lge and belief,	, it is true, co						d statements, and to the best s based on all information of
Sign Here	*****				2019-09-13		*****		May the IRS discuss this return with the preparer shown
	Signature	of officer or tr	rustee		Date		Title		below (see instr)? ✓ Yes ☐ No
	ı							1	

Date

2019-09-16

Preparer's Signature

Print/Type preparer's name

DANIEL W LINDBERG

Firm's name ▶ Daniel W Lindberg CPA

Kechı, KS 67067

Firm's address ► 5609 N Oliver St

Paid **Preparer**

Use Only

Form **990-PF** (2017)

Phone no (316) 765-1096

P01060295

PTIN

Fırm's EIN ▶

Check if self-

employed \blacktriangleright

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

27,300

100

250

86,585

a Paid during the year				
ST GEORGE CATHEDRAL7515 E 13TH ST WICHITA, KS 67206	NONE	PC	UNRESTRICTED	

or substantial contributor

Total . 3a

FUNDAMENTAL LEARNING CENTER 2220 E 21ST ST N WICHITA, KS 67214	NONE	PC	UNRESTRICTED	
		,		

WICHITA, KS 67214				
ORTHODOX CHRISTIAN MINISTRIES 2601 E CENTRAL STE 2	NONE	PC	UNRESTRICTED	

ORTHODOX CHRISTIAN MINISTRIES	NONE	PC	UNRESTRICTED	
2601 E CENTRAL STE 2				
WICHITA, KS 67214				

WICHITA, KS 67214				
ORTHODOX CHRISTIAN MINISTRIES 2601 E CENTRAL STE 2	NONE	PC	UNRESTRICTED	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHRIST THE SAVIOR ACADEMY NONE PC UNRESTRICTED 435 7515 E 13TH ST WICHITA, KS 67206

SAINT ELIJAH CHURCH 15000 N MAY AVE OKLAHOMA CITY, OK 73134	NONE	PC	UNRESTRICTED	200
KANSAS UNIVERSITY ENDOWMENT PO BOX 923	NONE	PC	UNRESTRICTED	25,000

OKLAHOMA CITY, OK 73134				
KANSAS UNIVERSITY ENDOWMENT PO BOX 923	NONE	PC	UNRESTRICTED	25,0

OKLAHOMA CITY, OK 73134				
KANSAS UNIVERSITY ENDOWMENT PO BOX 923	NONE	PC	UNRESTRICTED	25,

3a

OKLAHOMA CITY, OK 73134				
KANSAS UNIVERSITY ENDOWMENT PO BOX 923	NONE	PC	UNRESTRICTED	25,00
LAWRENCE, KS 66044				

KANSAS UNIVERSITY ENDOWMENT	NONE	PC	UNRESTRICTED	25,000
PO BOX 923				
LAWRENCE, KS 66044				

Total	<u> </u>	<u> </u>	86.585
PO BOX 923 LAWRENCE, KS 66044			,

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KETCH1006 E WATERMAN ST NONE PC UNRESTRICTED 1,200 WICHITA, KS 67211

THE ORDER OF ST IGNATIUS 358 MOUNTAIN ROAD ENGLEWOOD, NJ 076315238	NONE	PC	UNRESTRICTED	1,000
WILLIAMS EDUCATIONAL FUND210 ACE	NONE	PC	UNRESTRICTED	20,000

86,585

ENGLEWOOD, NJ 076315238				
WILLIAMS EDUCATIONAL FUND210 ACE LAWRENCE, KS 66045	NONE	PC	UNRESTRICTED	20,000

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **HUMANE SOCIETY OF TULSA** NONE PC UNRESTRICTED 100 6232 E 60TH ST TULSA, OK 74135 00

WICHITA CANCER FOUNDATION PO BOX 49020 WICHITA, KS 67201	NONE	PC	UNRESTRICTED	10,000
HIDDEN HEARTS FOUNDATION 4404 MIRADOR DRIVE	NONE	POF	UNRESTRICTED	1,000

AUSTIN, TX 78735

Total . 3a

86,585

file GRAPHIC print - DO NOT PROCESS		As Filed Data -			DLN: 93491259002289		
TY 2017 Accounting Fees Schedule							
Name: THE DAVID S & DEBBI C ELKOURI FOUND							
EIN: 48-1140915							
Accounting Fees Schedule							
Category	Amou	nt Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

1,000

1,000

1,000

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491259002289			
TY 2017 Other Expenses Schedule							
Name: THE DAVID S & DEBBI C ELKOURI FOUND							
EIN: 48-1140915							
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

ANNUAL SERVICE FEE

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491259002289			
TY 2017 Taxes Schedule							
	e: THE DAVID	S & DEBBI C ELKO	OURI FOUND				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

651

TAXES

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -				DLN: 93491259002289		
Schedule B		Schedu	ule of Contributo	ors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF fthe Treasury Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at							
Name of the organizati THE DAVID S & DEBBI C					Employer id	lentification number		
Organization type (che					48-1140915			
	,							
Filers of:	Section:							
Form 990 or 990-EZ	☐ 501(c)() (enter number) c	organization					
	☐ 4947(a)(1	I) nonexempt chai	ritable trust not treated a	s a private founda	tion			
	☐ 527 politi	cal organization						
Form 990-PF	✓ 501(c)(3)	exempt private fo	undation					
	4947(a)(1	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3)	☐ 501(c)(3) taxable private foundation						
			PF that received, during omplete Parts I and II S					
Special Rules								
under sections 5 received from ar	09(a)(1) and 170(b)	(1)(A)(vı), that che uring the year, tota	g Form 990 or 990-EZ th cked Schedule A (Form al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that		
during the year,	total contributions of	more than \$1,000	or (10) filing Form 990 of the control of the contr	s, charitable, scien				
during the year, If this box is che purpose Don't c	contributions <i>exclus</i> cked, enter here the omplete any of the p	<i>ively</i> for religious, total contributions parts unless the G	or (10) filing Form 990 of charitable, etc., purpose that were received duri eneral Rule applies to the or more during the year	s, but no such con ng the year for an nis organization be	ntributions tota exclusively re ecause it recei	led more than \$1,000 ligious, charitable, etc , ved <i>nonexclusively</i>		
990-EZ, or 990-PF), but	ıt must answer "No	on Part IV, line 2	lle and/or the Special Ru , of its Form 990, or che it it doesn't meet the filing	ck the box on line	H of its			
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	ıle B (Form 990,	, 990-EZ, or 990-PF) (2017)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization Employer identification number THE DAVID S & DEBBI C ELKOURI FOUND 48-1140915 Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person DAVID S ELKOURI **Payroll** 800 LONGFORD \$ 142,955 Noncash WICHITA, KS672061819 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (C) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

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