SCANNED JUN 1 1 2019

Form **990-PF**Department of the Treasury

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.

2018
Open to Public Inspection

Internal Revenue Service Go to www	v.irs.gov/Forme90PF for insu	ructions and the latest init	ormation.	Open to Public Inspection
For calendar year 2018 or tax year beginning		, and ending	·	
Name of foundation			A Employer identification	on number
· · · · · · · · · · · · · · · · · · ·	TTON THO		46 044753	c
HOREJSI CHARITABLE FOUNDAT		Room/suite	46-044753	<u> </u>
2121 E. CRAWFORD PLACE	address)	Hoomisalle	B Telephone number 785-827-09	910
City or town, state or province, country, and ZIP or foreign	nostal code		C If exemption application is	: <u> </u>
SALINA, KS 67401	postal code		o ir exemption application is	pending, check here
G Check all that apply: Initial return	Initial return of a fe	ormer public charity	D 1 Foreign organization	ns, check here
Final return	Amended return	y		,
Address change	Name change		Foreign organizations m check here and attach or	neeting the 85% test, computation
H Check type of organization: X Section 501(c)(3)	exempt private foundation	. 04	E If private foundation st	tatus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1)(A), check here 🕨 🗌
I Fair market value of all assets at end of year J Accour	nting method X Cash	Accrual	F If the foundation is in a	a 60-month termination
	Other (specify)		under section 507(b)(1)(B), check here
\$ 48,911,456. (Part I, col	umn (d) must be on cash basi	S.)		T (4)
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a)	2,939,000.	moonic	N/A	(cash basis only)
1 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B	4,333,000.		N/W	
Interest on savings and temporary	17,345.	17,345.		STATEMENT 1
cash investments Dividends and interest from securities	164,609.	164,609.		STATEMENT 2
5a Gross rents	74,974.	74,974.		STATEMENT 3
h Net rental income or (loss) 30, 462.		. ,		STATEMENT 4
68 Net gain or (loge) from cale of accets not on line 10	1,411,021.			
Group explos price for all 1,698,902.				
Groot color price for all 1,698,902. 7 Capital gain net income (from Part IV line 2)		1,411,021.		•
8 Net short-term capital gain				
9 Income modifications Gross sales less returns				
1Ua and allowances				`
h Less Cost of greats sold				<u> </u>
c Gross profit or (loss)				-
11 Other income	4,606,949.	1,667,949.		
12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	24,000.	24,000.		0.
14 Other employee salaries and wages		,		
15 Pension plans, employee benefits				
16a Legal fees STMT 5	7,852.	0.		0.
b Accounting fees STMT 6	5,281.	4,753.		528.
e other profesental lest ED				
9 17 Interest 18 Lakes 19 Tebrecial Maland depletion 20 Oddinagov		25 222		
18 Jayes 2019 STMT 7	101,434.	25,992.		0.
19 Debrecia MA Aand deptetion	8,176.	8,176.		
20 Oddupancy	1,299.	1,299.		0.
21 Travel, conferences and meetings	-			
22 Printing and publications 23 Other expenses STMT 8	15,167.	11,315.		0.
24 Total operating and administrative	13,10,1			
b Accounting fees STMT 6 c Other professional level D Interest 17 Interest 18 Lakes 19 Deprecial Maland depletion 20 Oddupancy 21 Travel, conferences and meetings 22 Printing and nublications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions gifts grants paid	163,209.	75,535.	i	528.
25 Contributions, gifts, grants paid	3,006,479.			3,006,479.
26 Total expenses and disbursements.	. ,			
Add lines 24 and 25	3,169,688.	75,535.		3,007,007.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	1,437,261.		ļ	
b Net investment income (if negative, enter -0-)		1,592,414.	37/-	<u> </u>
c Adjusted net income (if negative, enter -0-)	1		N/A	1

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

Accounts receivable Less allowance for doubtful accounts Less, allowan	Cach - non-interest-bearing Cach - non-interest-bearing Cach - non-interest-bearing Cach - non-interest-bearing Savings and temporary cash investments S. 480,776. 4,235,304. 4,235,304.	Form 9	90-PF (2018) HOREUSI CHARITABLE FOUNI			044/536 Page 2
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Accounts receivable Less allowance for doubtful accounts Less, allowan	3 Accounts receivable	1	Cash - non-interest-bearing			
Less allowance for doubtful accounts	Less allowance for doubtful accounts Less allowance for doubtful accounts Less allowance for doubtful accounts S Grant's receivable Receivable doubtful accounts Receivable doub	2	Savings and temporary cash investments	5,480,776.	<u>4,235,304.</u>	4,235,304.
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31 Total liabilities and net assets/fund balances 48,021,523. 48,398,454. Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	31 Total liabilities and net assets/fund balances 48,021,523. 48,398,454. Part 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-of-year figure reported on prior year's return) 1 48,021,523. Enter amount from Part I, line 27a 2 1,437,261. Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 49,458,784. Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 5 1,060,330.	띩	·			
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Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 1 48,021,523. 2 1,437,261. 3 0. 4 49,458,784. 5 1,060,330.	-		_		
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	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-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 5 1, 060, 330.	31	Total liabilities and net assets/fund balances	48,021,523.	48,398,454.	ļ
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 1 48, 021, 523. 2 1, 437, 261. 3 0. 4 49, 458, 784. 5 1, 060, 330.					
	(must agree with end-of-year figure reported on prior year's return) 1 48,021,523. Enter amount from Part I, line 27a 2 1,437,261. Other increases not included in line 2 (itemize) 3 0. Add lines 1, 2, and 3 4 49,458,784. Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 5 1,060,330.	Part	Analysis of Changes in Net Assets of Fund Ba	lalices		
(must agree with end-of-year figure reported on prior year's return)	Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 2 1,437,261. 3 0. 4 49,458,784. 5 1,060,330.	1 Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 2 1,437,261. 3 0. 4 49,458,784. 5 1,060,330.	(mu	st agree with end-of-year figure reported on prior year's return)		1	48,021,523.
	Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 3 0. 4 49, 458, 784. 5 1,060,330.				2	
	Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) MARK SECURITIES TO MARKET VALUE 4 49, 458, 784. 5 1,060,330.		•			
	Decreases not included in line 2 (itemize) ► MARK SECURITIES TO MARKET VALUE 5 1,060,330.	g Othe	i increases not included in line 2 (itemize)		 	40 450 504
					141	49,458,784.
	total net assets or fund balances at end of year (line 4 minus line 5) - Part II. column (b), line 30	4 Add	lines 1, 2, and 3	TO MARKET VA		
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	Form 990-PF (2018)	4 Add 5 Decr	lines 1, 2, and 3 eases not included in line 2 (itemize) MARK SECURITIES		LUE 5	

2 Total of line 1, column (d)
3 Average distribution ratio for the 5-year base period – divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years
3 .048698
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5
5 Multiply line 4 by line 3
5 1,541,288.
6 Enter 1% of net investment income (1% of Part I, line 27b)
6 15,924.
7 Add lines 5 and 6
7 1,557,212.
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. See the Part VI instructions.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4	940(b), 4940(e), or 49	148 - see i i	nstruct	tions)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A	A" on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-	-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X	and enter 1%	1	15	5,924.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part	: I, line 12, col. (b). 丿			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, ent	ter -0-)	2		0.
3 Add lines 1 and 2		3	15	5,924.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, en	iter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	15	,924.
6 Credits/Payments				
a 2018 estimated tax payments and 2017 overpayment credited to 2018	57,600.			
b Exempt foreign organizations - tax withheld at source 6b	0.			
c Tax paid with application for extension of time to file (Form 8868)	0.			
d Backup withholding erroneously withheld	0.			
7 Total credits and payments. Add lines 6a through 6d		7	57	7,600.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ [9	4 1	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	5 004	10		.,676.
	5,924. Refunded ▶	11	25	752.
Part VII-A Statements Regarding Activities			T 13	Vool No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or	did it participate or intervene	in		Yes No
any political campaign?			1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See		tion	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any m	aterials published or			
distributed by the foundation in connection with the activities.			-	
c Did the foundation file Form 1120-POL for this year?			1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	^			
(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	imposed on foundation			j l
managers. ▶ \$				$ \frac{1}{x}$
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	- ^
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 instrume	iii, articles of incorporation, or		1	X
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 4a	$\frac{1}{x}$
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4b	
b If "Yes," has it filed a tax return on Form 990-T for this year? 5. West have a liquidation termination dissolution or substrated contraction during the year?		II/ II	5	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes " attach the statement required by Occasion to the statement of the year."				-
If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.] [1 1
By language in the governing instrument, or			1	
By state legislation that effectively amends the governing instrument so that no mandatory directions are supported by the property of th	ons that conflict with the state	law		}
remain in the governing instrument?	mo that commet with the state		6	$\overline{\mathbf{x}}$
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part	t II col (c) and Part XV		7	X
γ big the foundation have at least φο,000 in assets at any time during the year. If γου, complete that	. 11, 001. (0), 010 1 011 11			<u> </u>
8a Enter the states to which the foundation reports or with which it is registered. See instructions.			1 1	1
SD				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney C	General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation	(8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 494	42(i)(3) or 4942(i)(5) for caler	ıdar		
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Pal			9	$ \times$ \times
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			10	X
		Fo	,,,, 9 <mark>90</mark> -	-PF (2010)

Form 990-PF (2018) HOREUSI CHARITABLE FOUND			46-0447	236	F	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No		I	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir	ectly,				
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	ł	ł	. 1
(4) Provide a grant to an organization other than a charitable, etc., organizatio						
4945(d)(4)(A)? See instructions		□ v	es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or t					. 1
the prevention of cruelty to children or animals?	or concentional perposes, or i		es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	dor the eventions described		CS [21] NO	- 1	1	ľ
		iii neguialions	N/A		—- ·	—
section 53.4945 or in a current notice regarding disaster assistance? See instru				5b	\rightarrow	 i
Organizations relying on a current notice regarding disaster assistance, check l				- 1]
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		- /	<u> </u>	- 1		l
expenditure responsibility for the grant?	1	1/A y	es L No	- 1	ł	- 1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			1]
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					- 1
a personal benefit contract?		Y	es 🗶 No 📙			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		_X_
If "Yes" to 6b, file Form 8870.			Г	$\neg \neg$		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es X No	ŀ		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$			- " - F		1	
excess parachute payment(s) during the year?	11,000,000 111 10111011011011011 01		es X No	1		
Part VIII Information About Officers, Directors, Truste	es Foundation Mar		23 [22] 100			
Paid Employees, and Contractors	,co, i odinadilon mai	lagoro, riigiliy				
1 List all officers, directors, trustees, and foundation managers and th	neir compensation.					—
-	(b) Title, and average	(c) Compensation	(d) Contributions to	(e	•) Expe	ense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc	Expe	other
	to position	enter -0-)	compensation	a	llowan	ces
<u> </u>						_
SEE STATEMENT 13		24,000.	0.	↓		<u>0.</u>
_				1		
				1		
				1		
				1		
Compensation of five highest-paid employees (other than those incl	uded on line 1). If none.	enter "NONE."				
	(b) Title, and average		(d) Contributions to	(e	Expe	nse
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acc	ount, o	other
NONE	devoted to position		compensation	a	nowani	ces
NONE						
				ļ—		
	<u> </u>	<u> </u>				
				İ		
				<u> </u>		
-				l		
otal number of other employees paid over \$50,000		I				0
σει ποιπονί οι σαιοι επιμιογόσο μαιά άνει φού,000			Corm	990-	PF /	
			rurm	330-	· · (a	4010)

rm 990-PF (2018) HOREJSI CHARITABLE FOUNDATION, IN		-0447536 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	ion Managers, Highly	
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		
		ĺ
	_	
A Laurenter of Albert Area (CO 000 for any foreign leaves)		▶ 0
otal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	cal information such as the	
umber of organizations and other beneficiaries served, conferences convened, research papers produc	ced, etc.	Expenses
N/A		
		_
		_
		4
		-
		=
art IX-B Summary of Program-Related Investments		
escribe the two largest program-related investments made by the foundation during the tax year on lii	nes 1 and 2.	Amount
N/A		
<u> </u>		_
other program-related investments. See instructions.		
		4
		4
		┪
		7
	<u> </u>	1
· · · · · · · · · · · · · · · · · · ·	>	0.
tal. Add lines 1 through 3		

For	m 990-PF (2018) HOREJSI CHARITABLE FOUNDATION, INC	46	-0447536 Page 8
ĮP.	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	27,445,934.
Ь	Average of monthly cash balances	1b	3,851,892.
¢	Fair market value of all other assets	1c	834,072.
d	Total (add lines 1a, b, and c)	1d_	32,131,898.
е	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	0.
3	Subtract line 2 from line 1d	3	32,131,898.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	481,978.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	31,649,920.
6	Minimum investment return. Enter 5% of line 5	6	1,582,496.
IP.	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	nd certain	
	foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	1,582,496.
2a	Tax on investment income for 2018 from Part VI, line 5 2a 25, 924.		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	15,924.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,566,572.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,566,572.
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	1,566,572.
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	3,007,007.
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		
a	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,007,007.
5	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

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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income. Enter 1% of Part I, line 27b

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	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI,	Corpus	Tears prior to 2017	2017	2010
line 7				1,566,572.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			623,953.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2018.				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 3,007,007.				
a Applied to 2017, but not more than line 2a			623,953.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				1,566,572.
e Remaining amount distributed out of corpus	816,482.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (J), the same amount	0.			0.
musi be snown in column (a))				
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	816,482.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'	·			
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.	:	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		, 0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			j	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013	,			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.	016 402			
Subtract lines 7 and 8 from line 6a	816,482.			
O Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				

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	CHARITABLE				47536 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	*	-	▶ ∟		
b Check box to indicate whether the found	d <u>ation is a private operatii</u>	ng foundation described in		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					<u>.</u>
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					,
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	1				
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)) of 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					
(4) Gross investment income		la this next enly if	the foundation	had \$5 000 or mor	o in acceta
Part XV Supplementary Info			the foundation	nau 45,000 or mor	e in assets
1 Information Regarding Foundatio	-				
a List any managers of the foundation where year (but only if they have contributed in the contributed in			ibutions received by the	toundation before the close	e of any tax
, , , , ,	nore man \$5,000). (See S	sction 307 (u)(2).)			
SEE STATEMENT 14	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	s a 10% of greater interes	il.			
NONE			-		
2 Information Regarding Contributi					
Check here 🕨 🗶 if the foundation of					ests for funds. If
the foundation makes gifts, grants, etc ,					
a The name, address, and telephone num	ber or email address of th	e person to whom applica	itions should be addres	sed;	
b The form in which applications should be	e submitted and informat	ion and materials they sh	onlq iuclnde.		
					
c Any submission deadlines:					
			1		
d Any restrictions or limitations on award	s, such as by geographica	i areas, charitable fields, l	kinds of institutions, or	other factors;	

3 Grants and Contributions Paid During the Y		 .		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	
BROPHY COLLEGE PREPARATORY	NONE	501(C)(3)	FINANCIAL AID	
4701 N. CENTRAL AVE	HONE	J 1 (C) (S)		
PHOENIX, AZ 85012				100,00
CAF AMERICA	NONE	501(C)(3)	SANDY LANE CHARITY	
1800 DIAGNOL ROAD, SUITE 150				
ALEXANDRIA, VA 22314				266,14
CARDIAC SURGERY RESEARCH & EDUCATION	NONE	501(C)(3)	DONATION	
FDN.				
4400 W. 95TH STREET				
OAK LAWN, IL 60453				8,00
CHARITIES AID FOUNDATION AMERICA	NONE	501(C)(3)	BB CHILDREN'S TRUST	
1800 DIAGNOL ROAD, SUITE 150				
ALEXANDRIA, VA 22314		-		108,33
COLORADO COLLEGE	NONE	501(C)(3)	ATHLETIC DEPT - SOCCER	
14 E. CACHE LA POUDRE STREET				5,00
COLORADO SPRINGS, CO 80903				
COLORADO MUSIC FESTIVAL	NONE	501(C)(3)	DONATION	
200 E. BASELINE RD. LAFAYETTE, CO 80026		İ		25,00
MARIE 112, CO 00020		-		
DESERT CLASSIC CHARITIES	NONE	501(C)(3)	DONATION	
39000 BOB HOPE DRIVE	NONE	B01(C)(3)	DONATION	
RANCHO MIRAGE, CA 92270				23,00
DUPAGE GRAUE MILL AND MUSEUM	NONE	501(C)(3)	DONATION .	
3800 YORK RD.				
DAK BROOK, IL 60523				1,00
,				
FIRST UNIVERSITY METHODIST CHURCH	NONE	501(C)(3)	MEMORIAL - GAWITH	
122 N. 8TH ST.				E 00
SALINA, KS 67401			-	5,00
FRIENDS OF MISSOULA PARKS, INC. 317 E SPRUCE STREET	NONE	501(C)(3)	DONATION FOR TREES	
MISSOULA, MT 59802				15,00
Total from continuation sheets				2,888,47

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Oona Batter	
GRAND FOUNDATION	NONE	501(C)(3)	OPPORTUNITY FOR YOUTH	
PO BOX 1432				
WINTER PARK, CO 80482				2,500.
HOLY APOSTLES GREEK ORTHODOX CHURCH	NONE	501(C)(3)	DONATION	
2501 SOUTH WOLF ROAD				
WESTCHESTER, IL 60154				1,000.
HONORHEALTH FOUNDATION	NONE	501(C)(3)	DONATION	
8125 N HAYDEN RD				
SCOTTSDALE, AZ 85258				5,000.
KU ENDOWMENT	NONE	501(C)(3)	DONATION FOR BUSINESS	
P.O. BOX 928			SCHOOL	
LAWRENCE, KS 66044	-	-		100,000.
LIKE PHILHARMONIC, INC.	NONE	501(C)(3)	DONATION	
178 COLUMBUS AVE, NO. 230607				
NEW YORK, NY 10023		-		5,000.
LIVE LIKE KAYLA FOUNDATION	NONE	501(C)(3)	DONATION	
500 LA TERAZZA BLVD STE 150			<u> </u>	
ESCONDIDO, CA 92025		-		10,000.
MISSOULA ART MUSEUM	NONE	501(C)(3)	UNDESIGNATED	
335 N. PATTEE MISSOULA, MT 59802				10,000.
MIDDOUR, MI JOUR				
		E01/0\/3\	ромалтом	
NORTHWESTERN UNIVERSITY	NONE	501(C)(3)	DONATION - SCHULZ-MORAN ENDOWED	
1201 DAVIS STREET EVANSTON, IL 60208			FUND	15,000.
				<u>, </u>
,	LOVE.	E01/0\/3\	PETMBERG SQUART OF	
NW UNIVERSITY - FEINBERG MEDICAL CTR	NONE	501(C)(3)	FEINBERG SCHOOL OF MEDICINE	
RUBLOFF BLDG, 9TH FLR 420 E. SUPERIOR ST. CHICAGO, IL 60211				1,000.
DARW NIGOLIEM POINDAMION	NONE	501(C)(3)	FRAUENSHUH CANCER	
PARK NICOLLET FOUNDATION 6500 EXCELSION BLVD	NONE	501(C)(3)	CENTER RESEARCH	
ST. LOUIS PARK, MN 55426				1,000.
Total from continuation sheets				

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
PHI GAMMA DELTA EDUCATIONAL	NONE	501(C)(3)	SCHOLARSHIP FUND	
FOUNDATION				
P.O. BOX 4599 LEXINGTON, KY 40544-4599				100,000.
DEATHGION, KI 40344-4377		-		
PUBLIC BROADCASTING OF COLORADO	NONE	501(C)(3)	UNDESIGNATED GIFT	
7409 S. ALTON CT.	NONE .	501(0)(3)		
CENTENNIAL, CO 80112				2,500.
RUSH UNIVERSITY MEDICAL CENTER	NONE	501(C)(3)	MED STAFF FOR MED	
28057 NETWORK PLACE			STUDENTS CAMPAIGN	
CHICAGO, IL 60673			1	1,000.
SAINT IGNATIUS COLLEGE PREP	NONE	501(C)(3)	JOSEPH E. LIPTAY '83	
1076 WEST ROOSEVELT RD.			MEMORIAL FUND	
CHICAGO, IL 60608				1,000.
SALINA FAMILY HEALTHCARE CENTER	NONE	501(C)(3)	MEMORIAL - NELSON	
651 E. PRESCOTT RD.				
SALINA, KS 67401				5,000.
		501/51/21	Taylor 12 aug 1	
SENTINELS OF FREEDOM SCHOLARSHIP FOUNDATION	NONE	501(C)(3)	SCHOLARSHIP FUND	,
PO 1316				(
SAN RAMON, CA 94583				25,000.
CM CMPDURN MUR MARMYR CAMUOLIC	NONE	501(C)(3)	MEMORIAL - ZIEGLER	
ST. STEPHEN THE MARTYR CATHOLIC	NONE	501(0)(3)	ALMORIAD - BIEGDER	
5373 WYDELLA ROAD SW				
LINBURN, GA 30047				1,000.
SUNRISE PRESBYTERIAN CHURCH	NONE	501(C)(3)	MEMORIAL - NELSON	
325 E. BELOIT				
SALINA, KS 67401		 		5,000.
THE FOUNDATION FOR BLIND CHILDREN	NONE	501(C)(3)	DONATION	
1234 EAST NORTHERN AVENUE				10.000
PHOENIX, AZ 85020				10,000.
THE MOSHARRAFA PLASTIC SURGERY	NONE	501(C)(3)	DONATION	
FOUNDATION, INC				
611 E. SHEA BLVD, SUITE 230				
PHOENIX, AZ 85028		<u> </u>		5,000.
Total from continuation sheets				

	Year (Continuation)	T		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
•				
UNIVERSITY OF COLORADO	NONE	501(C)(3)	MUSIC DEPARTMENT	
4740 WALNUT ST			1	
BOULDER, CO 80301				15,00
JNIVERSITY OF KANSAS ENDOWMENT	NONE	501(C)(3)	DONATION BLDG REMODEL	
P.O. BOX 928			FUND	
LAWRENCE, KS 66044			.	2,000,00
UNIVERSITY OF MONTANA FOUNDATION	NONE	501(C)(3)	DONATION FOR GLOBAL	
P.O. BOX 7159			PUBLIC HEALTH MINOR	
MISSOULA, MT 59807-7159				2,50
UNIVERSITY OF MONTANA FOUNDATION	NONE	501(C)(3)	SCHOLARSHIP FUND	
P.O. BOX 7159				•
MISSOULA, MT 59807-7159				2,50
WILLIAM WOODS UNIVERSITY	NONE	501(C)(3)	MEMORIAL - ANDERSON	
ONE UNIVERSITY AVENUE	NONE	501(0,(3)		
FULTON, MO 65251				5,00
,				· · · · · · · · · · · · · · · · · · ·
		E01/G1/21	DOMARTON	•
YOUNG LIFE 336 W HINSDALE AVE	NONE	501(C)(3)	DONATION	
HINSDALE AVE				1,00
11110011111				- /
Total from continuation sheets			• • • • • • • • • • • • • • • • • • • •	

Page 12

Part XVI-A Analysis of Income-Producing Activities

	Unrelated h	usiness income	Evolude	d by section 512, 513, or 514	1-3
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Tunction income
a	— 		+ +		
b			+ +		· ·- ,
<u> </u>	1 3		+ +		
d			+ +		
e			+ +		
g Fees and contracts from government agencies	 		++		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	17,345.	
4 Dividends and interest from securities			14	17,345. 164,609.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			16	30,462.	<u></u>
6 Net rental income or (loss) from personal		· · · · · ·			
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other		·			· ·
than inventory			18	1,411,021.	
9 Net income or (loss) from special events					·
10 Gross profit or (loss) from sales of inventory					
11 Other revenue;					
a		-			
b	_				_,
c					
d			1 1		
e					
12 Subtotal. Add columns (b), (d), and (e)	Ll	0.	<u>. </u>	1,623,437.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	1,623,437
(See worksheet in line 13 instructions to verify calculations	<u>s.) </u>				
Part XVI-B Relationship of Activitie	s to the Accom	plishment of Ex	empt P	Purposes	
Line No. Explain below how each activity for which			A contribut	ed importantly to the accomp	lishment of
the foundation's exempt purposes (other the	han by providing funds	for such purposes).			
N/A		·			.
					
					- · · ·
-		<u> </u>			
		.		·	
				 	
		.			
	<u> </u>				
-		- 			
	-				

823621 12-11-18

Form 990-PI				OUNDATION, 1		46-044		Pa	ige 13
Part XV	II Information Re Exempt Organ		sfers to a	nd Transactions a	and Relation	onships With Nonchari	table		
1 Did the	organization directly or indi		of the follows	ng with any other organiza	tion described	in section 501/c)	$\overline{}$	Yes	No
	than section 501(c)(3) organ			• •		111 30001011 30 1(0)		-	
•	ers from the reporting found	•							
(1) Ca				3			1a(1)		х
	her assets						1a(2)		Х
. ,	ransactions:								
(1) Sa	les of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2) Pu	rchases of assets from a no	ncharitable exempt (organization	•			1b(2)		Х
(3) Re	ental of facilities, equipment,	or other assets					1b(3)		X
(4) Re	imbursement arrangements						1b(4)		X
(5) Lo	ans or loan guarantees						1b(5)		X
(6) Pe	rformance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)		X
c Sharing	g of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c		X
d If the a	nswer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should a	always show th	e fair market value of the goods,	other ass	ets,	
				ed less than fair market va	lue in any trans	saction or sharing arrangement, s	now in		
	(d) the value of the goods,			 					
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) De:	scription of transfers, transactions, and	haring arra	ingemen	ts
			N/A						
									—
									—
-									
					<u> </u>			-	
					-				
					<u> </u>				
							-		
						·			
2a Is the fo	oundation directly or indirect	lv affiliated with, or	related to, one	or more tax-exempt organ	nizations descri	bed			
	on 501(c) (other than section	•					Yes	X	No
	complete the following sche	, ,					_	· ·	•
	(a) Name of org	anization		(b) Type of organization		(c) Description of relations	hip		
	N/A								
					<u> </u>				
					ļ				
	der perhalties of perjury, I declare to believe it is true, correct, and com			accompanying schedules and s taxpayer) is based on all inform		May	y the IRS d	scuss th	ıs
Sign Here	MILLA	2 h. odo.	Paul	to blobs		sho	irn with the	See inst	ŗ
	TO MINION	Zimeni	your	~ r = 13/20		SEC/TREAS	X Yes		No
Si	gnature of officer or trustee		· · · · · · · · · · · · · · · · · · ·	Date	Title	Charle CT of DTIN			=
	Print/Type preparer's na		Preparer's s	gnature •	Date	Check if PTIN self- employed			
Paid	TIMOTHY P.	WATSON,	1 hi	t C. Wal-	5601	. ' '	2240	-16	
Prepare	CPA	TID		1 - 0-0-4	1 2 1011	Firm's EIN ► 01-0	0340		
Use Only	THIN SHAINC P 22022	אחה				FIRM'S EIN PUT-0	· 440(
200 0111		QQ DFADT	EVGu C.	IRCLE, SUITE	300				
		ULDER, CO		INCLE, SUITE	200	Phone no. (303)	44 0.	- 0.30	19
		CHUHK, CO	00301				rm 990		
						T.	.,,, 500	(-0.0/

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2018

Name of the organization

HOREJSI CHARITABLE FOUNDATION, INC

Employer identification number

46-0447536

Organiz	ation type (check or	ne)
Filers of	:	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		s covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	Rule	
X		one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter he purpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively except, contributions totaling \$5,000 or more during the year.
but it mi	ıst answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

HOREJST	CHARITABLE	FOUNDATION,	INC
1101111001	CIMPLE	1 0 0 1 1 2 1 1 2 1 1 1	

46-0447536

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEWART R. HOREJSI BELLERIVE, QUEEN STREET ST. PETER, BARBADOS	\$\$,939,000.	Person Payroll Oncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omplete Part II for noncash contributions)

Name of organization

Employer identification number

HORÈJSI CHARITABLE FOUNDATION, INC

46-0447536

art II	Noncash Property (see instructions) Use duplicate copies of Property	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	BERKSHIRE HATHAWAY INC - BRK-A, 10 SHARES		
		\$ 2,939,000.	12/27/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

(a) No from Part I	Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	,		

Name of organization Employer identification number HOREJSI CHARITABLE FOUNDATION, INC 46-0447536 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year (Partilli from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once.) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH	NVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
ETRADE FIRST BANK & TRUST MERRILL LYNCH			34. 07. 04.	734. 407. 16,204.	
TOTAL TO PART I, LI	NE 3	17,3	45.	17,345.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECU	JRITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO	
BAILEY VALUE LIMITED PARTNERSHIP ETRADE NORTHERN TRUST	622. 162,940. 1,047.	0. 0. 0.	622 162,940 1,047	162,94	
TO PART I, LINE 4	164,609.	0.	164,609	164,60	09.
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·	RENTAL INCOM	E		STATEMENT 3
KIND AND LOCATION O	F PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCOME
COMMERCIAL PROPERTY	, SALINA, KS	1		1	74,974.
TOTAL TO FORM 990-P	F, PART I, L	INE 5A			74,974.

FORM 990-PF	RENTAL EXP	ENSES		STATEMENT 4
DESCRIPTION		CTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION POSTAGE AND SHIPPING SUPPLIES			8,176. 1,312. 513.	
INSURANCE BANK CHARGES			1,299. 496.	
WATER SAMPLING & ENVIRONMENT TAXES & LICENSES	AL COSTS		8,510. 50.	
PROPERTY TAXES -	SUBTOTAL -	1	24,156.	44,512.
TOTAL RENTAL EXPENSES			_	44,512.
NET RENTAL INCOME TO FORM 99	0-PF, PART I	, LINE 5B	=	30,462.
FORM 990-PF	LEGAL	FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	7,852.	0.		0.
TO FM 990-PF, PG 1, LN 16A	7,852.	0.		0.
) GGOVDIM T	NO DEEG		CONTRACTOR C
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	5,281.	4,753.		528.
TO FORM 990-PF, PG 1, LN 16B	5,281.	4,753.		528.

FORM 990-PF	TAX	ES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	1,836.			0.	
FEDERAL TAX	75,442.			0.	
PROPERTY TAXES	24,156.	24,156.		0.	
TO FORM 990-PF, PG 1, LN 18	101,434.	25,992.		0.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 8	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK AND BROKERAGE FEES	350.	350.		0.	
401K MANAGEMENT FEES	3,525.			0.	
INVESTMENT FEES (BAILEY)	84.	-		0.	
LICENSES AND PERMITS	10.			0.	
PENALTIES	317.			0.	
POSTAGE AND SHIPPING	1,312.			0.	
SUPPLIES	513.			0.	
BANK CHARGES	496.			0.	
WATER SAMPLING &					
ENVIRONMENTAL COSTS	8,510.	8,510.		0.	
TAXES & LICENSES	50.	50.		0.	
TO FORM 990-PF, PG 1, LN 23	15,167.	11,315.		0.	

FORM 990-PF DEPRECIATION OF ASSE	ETS HELD FOR IN	/ESTMENT	STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BLDG 253 N SANTA	64,000.	64,000.	0.
LAND	123,997.	0.	123,997.
H & A/C @253 N. S	16,293.	16,293.	0.
REMODEL 253 N. SANTA FULLY DEPRECIATED FURNITURE &	98,541.	98,541.	0.
FIXTURES	21,520.	21,520.	0.
FENCE & SLAB N WHSE	19,804.	19,804.	0.
STORE REMODEL-B AL	11,214.	11,214.	0.
STORE REMODEL-RITT	2,331.	2,331.	0.
WILBUR CONSTRUCTIONS	18,377.	18,377.	0.
TRUCK BUILDING	15,723.	15,723.	0.
LAUNDROMAT 340 N S	27,872.	27,872.	0.
CHAIN LINK FENCE	4,416.	3,884.	532.
NEW CYLINDER PREP	114,854.	97,858.	16,996.
ELECTRICAL NEW CYL	34,825.	34,825.	0.
RETAIL STORE BUILDING	76,195.	52,707.	23,488.
BWS-S WAREHOUSE BLDG	61,920.	42,833.	19,087.
H2 PUMP BLDG	4,276.	2,918.	1,358.
TOTAL TO FM 990-PF, PART II, LN 11	716,158.	530,700.	185,458.
FORM 990-PF OTHE	R INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
WARTOUG CECUDIMIEC	FMV	43,654,923.	43,654,923.
VARIOUS SECURITIES INVESTMENT IN BWS, LLC INVESTMENT IN BAILEY VALUE LTD	FMV FMV	201,783.	201,783.
PARTNERSHIP	r m v	120,986.	120,986.
TOTAL TO FORM 990-PF, PART II, LINE	: 13	43,977,692.	43,977,692.
	=		

FORM 990-PF TRANSFERS FR	OM CONTROLLED ENTITIES VII-A, LINE 11	STATEMENT 11
NAME OF CONTROLLED ENTITY		EMPLOYER ID NO
BWS, LLC		48-1160771
ADDRESS	*	
2121 E. CRAWFORD PLACE SALINA, KS 67401		
DESCRIPTION OF TRANSFER		
NO TRANSFERS IN 2018		
		AMOUNT OF TRANSFER
		0
TOTAL AMOUNT OF TRANSFERS FROM	CONTROLLED ENTITIES	
	CONTROLLED ENTITIES II-A, LINE 11	STATEMENT 12
, <u>-</u>		
NAME OF CONTROLLED ENTITY		EMPLOYER ID NO
BWS, LLC		48-1160771
ADDRESS	EXCESS BUSINESS HOLDING	G [] YES [X] NO
Z121 E. CRAWFORD PLACE SALINA, KS 67401		

	TITLE AND	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
NAME AND ADDRESS STEWART HOREJSI BELLERIVE, QUEEN STREET ST. PETER, BARBADOS	PRESIDENT / DI		O.	-
STEPHEN MILLER 2450 AGATE LANE BOULDER, CO 80304	VP / ASSISTANT 0.00	r secretary 0.	0.	0
LAURA RHODENBAUGH 2121 E. CRAWFORD PLACE SALINA, KS 67401	VP / SECRETARY	y / TREASUREF 0.	0.	0
SUSAN CICIORA 2911 OAK BROOK HILLS ROAD OAK BROOK, IL 60523	DIRECTOR 0.00	0.	0.	0
JOHN HOREJSI 1736 JACOBS DRIVE GALLATIN, TN 37066	DIRECTOR 0.00	0.	0.	0
TOTALS INCLUDED ON 990-PF, PAGE	: 6, PART VIII	24,000.	0.	0
	RT XV - LINE 1A FOUNDATION MANAGE	ERS	STAT	EMENT 14
NAME OF MANAGER				
STEWART HOREJSI SUSAN CICIORA				

JOHN HOREJSI

GENERAL EXPLANATION

STATEMENT 15

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990, PAGE 5, PART VII_A, LINE 11 - INFO REGARDING CONTROLLED ENTITIE EXPLANATION:

TRANFERS FROM CONTROLLED ENTITIES, PART VII-A, LINE 11 INFORMATION REGARDING CONTROLLED ENTITY:

NAME: BWS, LLC EIN: 48-1160771

ADDRESS: 2121 E. CRAWFORD PLACE, SALINA, KS 67401

NO TRANSFERS IN 2018 - \$0 TRANSFERED