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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 07-01-2018, and ending 06-30-2019

Name of foundation
SMOOT CHARITABLE FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)
PO BOX 678

City or town, state or province, country, and ZIP or foreign postal code
SALINA, KS 674020678

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 11,129,736

J Accounting method

☒ Cash

☐ Accrual

☐ Other (specify) (Part I, column (d) must be on cash basis)

A Employer identification number
48-0851141

B Telephone number (see instructions)
(785) 827-1991

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total 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	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc , received (attach schedule)				
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	427,573	427,573	427,573	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	193,857			
b Gross sales price for all assets on line 6a	434,670			
7 Capital gain net income (from Part IV, line 2)		193,857		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	621,430	621,430	427,573	
13 Compensation of officers, directors, trustees, etc	80,000	60,000		20,000
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)	3,750	2,813		937
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions)	7,800	2,291		
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)	5,474	5,474		
24 Total operating and administrative expenses. Add lines 13 through 23	97,024	70,578		20,937
25 Contributions, gifts, grants paid	570,019			570,019
26 Total expenses and disbursements. Add lines 24 and 25	667,043	70,578		590,956
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-45,613			
b Net investment income (if negative, enter -0-)		550,852		
c Adjusted net income (if negative, enter -0-)			427,573	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	35,653	1,951	1,950
	2 Savings and temporary cash investments	346,576	48,070	48,070
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	1,229	987	
	10a Investments—U S and state government obligations (attach schedule)	302,781	304,406	304,406
	b Investments—corporate stock (attach schedule)	9,599,306	10,775,310	10,775,310
	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)	10,285,545	11,130,724	11,129,736	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule).			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	10,285,545	11,130,724	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> 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			
	30 Total net assets or fund balances (see instructions)	10,285,545	11,130,724	
31 Total liabilities and net assets/fund balances (see instructions) .	10,285,545	11,130,724		

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 (must agree with end-of-year figure reported on prior year's return)	1	10,285,545
2 Enter amount from Part I, line 27a	2	-45,613
3 Other increases not included in line 2 (itemize) ▶ _____	3	890,792
4 Add lines 1, 2, and 3	4	11,130,724
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	11,130,724

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a EVERGY INC	P	2017-01-01	2018-08-15
b REALTY INCM CORP	P	2015-09-21	2019-05-01
c KONTOOR BRANDS INC	P	2009-12-11	2019-06-10
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 286,620		143,095	143,525
b 140,242		95,679	44,563
c 7,808		2,039	5,769
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			143,525
b			44,563
c			5,769
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	193,857
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount 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 noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	590,503	10,524,492	0 056108
2016	603,910	10,632,635	0 056798
2015	588,961	10,027,386	0 058735
2014	592,638	10,307,457	0 057496
2013	435,284	10,215,604	0 042610

2 Total of line 1, column (d)	2	0 271747
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	0 054349
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	10,683,380
5 Multiply line 4 by line 3	5	580,631
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	5,509
7 Add lines 5 and 6	7	586,140
8 Enter qualifying distributions from Part XII, line 4	8	590,956

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	5,509
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	5,509
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	5,509
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	6,496
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	6,496
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	987
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 987 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	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 any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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 managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ JANICE L DOHERTY Telephone no ▶ (785) 827-1991			

Located at **▶** PO BOX 678 SALINA KSZIP+4 **▶** 67402

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. ▶ <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GEORGE W YARNEVICH PO BOX 678 SALINA, KS 67402	PRESIDENT 2 00	20,000	0	0
JANICE L DOHERTY PO BOX 678 SALINA, KS 67402	SECRETARY 4 00	20,000	0	0
TOM A WILLIAMSON PO BOX 678 SALINA, KS 67402	TREASURER 2 00	20,000	0	0
MARK A ZIMMERMAN PO BOX 678 SALINA, KS 67402	VICE PRESIDE 2 00	20,000	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3

Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		

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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 <div></div>	
2 <div></div>	
3 <div></div>	
4 <div></div>	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2 <div></div>	
All other program-related investments. See instructions.	
3 <div></div>	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	10,586,121
b	Average of monthly cash balances.	1b	259,950
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	10,846,071
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	10,846,071
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	162,691
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,683,380
6	Minimum investment return. Enter 5% of line 5.	6	534,169

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	534,169
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	5,509
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	5,509
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	528,660
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	528,660
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	528,660

Part 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	590,956
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	590,956
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	5,509
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	585,447

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.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				528,660
2	Undistributed income, if any, as of the end of 2018				
a	Enter amount for 2017 only.				
b	Total for prior years 20____, 20____, 20____				
3	Excess distributions carryover, if any, to 2018				
a	From 2013.				
b	From 2014. 88,167				
c	From 2015. 96,944				
d	From 2016. 87,720				
e	From 2017. 77,268				
f	Total of lines 3a through e.	350,099			
4	Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 590,956				
a	Applied to 2017, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions).				
c	Treated as distributions out of corpus (Election required—see instructions).				
d	Applied to 2018 distributable amount.				528,660
e	Remaining amount distributed out of corpus	62,296			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	412,395			
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—see instructions				
e	Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f	Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must 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 may be required - see instructions).				
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	412,395			
10	Analysis of line 9				
a	Excess from 2014. 88,167				
b	Excess from 2015. 96,944				
c	Excess from 2016. 87,720				
d	Excess from 2017. 77,268				
e	Excess from 2018. 62,296				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or 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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest NONE	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed GEORGE YARNEVICH PO BOX 678 SALINA, KS 67401 (785) 827-1991 JANDOHERTY55@YAHOO.COM	
b The form in which applications should be submitted and information and materials they should include LETTER DETAILING NEEDS AND APPROPRIATE TAX EXEMPT STATUS	
c Any submission deadlines NONE	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors MUST BE AN ORGANIZATION SITUATED IN SALINE COUNTY, KANSAS OR AN ORGANIZATION OPERATING FOR THE STRICT BENEFIT OF SALINE COUNTY, KANSAS	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

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

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)

Form **990-PF** (2018)

Part XVII

- | | | |
|---|----|----|
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | No |
|---|----|----|

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

- 2d Is the foundation an entity or individual, animated (with) or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

Sign _____ May the IRS discuss this _____

(see instr)? ☒ Yes ☐ No

Title

Print/Type preparer's name	Preparer's Signature	Date	PTIN
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P00631203

Firm's EIN ▶ 48-0969601

Phone no (785) 825-5479

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
ASHBY HOUSE150 S 8TH ST SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	6,000
AMBUCS1648 S OHIO PMB 912 SALINA, KS 67401	NONE	PUBLIC	PLAYGROUND	2,000
SAUW BACK TO SCHOOL FAIR 210 E WALNUT ST 100 SALINA, KS 67401	NONE	PUBLIC	BACK TO SCHOOL	2,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
BIG BROTHERSBIG SISTERS639 S OHIO SALINA, KS 67401	NONE	PUBLIC	GENERAL & ENDOWEDMENT	7,000
CATHOLIC CHARITIES 1500 S 9TH ST STE A SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	6,000
CHILD ADVOCACY PARENTING SERVICES I 302 S 7TH ST SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	3,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
COMMUNITIES IN SCHOOLS 722 W 6TH AVE EMPORIA, KS 66801	NONE	PUBLIC	EDUCATION	2,000
CORONADO AREA COUNIL OF BOY SCOUTS 644 S OHIO SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
DOMESTIC VIOLENCE ASSOC OF KANSAS 203 S SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	12,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
EMERGENCY AID FOOD BANK INC 410 W ASH SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	20,000
FIRST TEE OF SALINA INC 2500 E CRAWFORD SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	1,000
FRIENDS OF THE RIVER FOUNDATION 159 S 4TH SALINA, KS 67401	NONE	PUBLIC	WILDLIFE	1,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
FRIENDS OF THE SALINA PUBLIC LIBRAR 310 W ELM SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	1,000
FRIENDS OF THE SMOKY HILL MUSEUM 211 W IRON AVE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	1,000
GIRL SCOUTS OF CENTRAL KANSAS 1550 S BROADWAY SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a Paid during the year				
HEARTLAND HEAD START (USD 305) 700 JUPITER SALINA, KS 67401	NONE	PUBLIC	EDUCATION	3,000
HOSPICE OF SALINA INC 139 N PENN AVE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	2,000
KANSAS WESLEYAN UNIVERSITY 100 E CLAFLIN SALINA, KS 67401	NONE	PUBLIC	STUDENT ACTIVITIES CENTER/SCHOLARSHI	35,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
KU SCHOOL OF MEDICINE 138 N SANTA FE SALINA, KS 67401	NONE	PUBLIC	EDUCATION	10,000
THE LAND INSTITUTE 2440 E WATERWLL RD SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	2,000
MARTIN LUTHER KING JR CHILD CARE 1214 N SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
OCCK INC1710 W SCHILLNG RD SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
RED CROSS NORTH CENTRAL CHAPTER 145 S BROADWAY SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	12,000
ROLLING HILLS WILDLIFE REFUGE 625 N HEDVILLE RD SALINA, KS 67401	NONE	PUBLIC	WILDLIFE	6,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINA AREA TECHNICAL COLLEGE 2562 CENTENNIAL RD SALINA, KS 67401	NONE	PUBLIC	STUDENT SCHOLARSHIPS	1,500
SALINA AREA UNITED WAY 128 N SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	50,000
SALINA ART CENTER242 S SANTA FE SALINA, KS 67401	NONE	PUBLIC	YOUTH ACTIVITIES	15,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINA ARTS & HUMANITIES COMMISSION PO BOX 2181 SALINA, KS 67401	NONE	PUBLIC	SMOKY HILL RIVER FESTIVAL	5,000
SALINA BASEBALL ENTERPRISES INC PO BOX 500 SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	1,000
SALINA CHILD CARE 155 N OAKDALE AVE STE 100 SALINA, KS 67401	NONE	PUBLIC	CHILD CARE	2,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINA CHRISTMAS FUND 227 N SANTA FE 203 SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	3,000
SALINA COMMUNITY THEATER 303 E IRON AVE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	3,000
SALINE COUNTY COMMISION ON AGING 245 N 9TH SALINA, KS 67401	NONE	PUBLIC	MEALS ON WHEELS & ADULT DAY SERVICES	7,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINA EDUCATION FOUNDATION PO BOX 797 SALINA, KS 67401	NONE	PUBLIC	GROW YOUR TEACHER/LIFT PROGRAM	2,500
SALINA FAMILY HEALTHCARE CENTERSHE 501 S SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	11,000
SALINA HABITAT FOR HUMANITY INC 1425 SHERWOOD LANE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	1,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINA REGIONAL HEALTHCARE FOUNDATI 400 S SANTA FE SALINA, KS 67401	NONE	PUBLIC	CIRCLE OF LIFE/RURAL HEALTH	1,000
SALINA RESCUE MISSION INC 336 N 13TH SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	4,000
SALINA SYMPHONY151 S SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
Total ► 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
SALINE COUNTY ASSOC FOR RETARDED CI PO BOX 362 SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	3,000
SMOKY HILL AUDUBON SOCIETY PO BOX 2936 SALINA, KS 67401	NONE	PUBLIC	WILDLIFE	500
ST JOHN'S MISSIONARY BAPTIST CHURCH 215 S CHICAGO SALINA, KS 67401	NONE	PUBLIC	CAMP	2,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
TEEN TOWN INCPO BOX 1332 SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
SALINA FAMILY YMCA570 YMCA DR SALINA, KS 67401	NONE	PUBLIC	GENERAL & RESTRICTED FUNDS	285,519
THE SALVATION ARMY1137 N SANTA FE SALINA, KS 67401	NONE	PUBLIC	GENERAL FUND	5,000
Total ▶ 3a				570,019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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)				
a <i>Paid during the year</i>				
CITY OF ASSARIA315 E MAIN ST ASSARIA, KS 67416	NONE	PUBLIC	SUMMER YOUTH PROGRAMS	1,000
SALINA SHARESPO BOX 1474 SALINA, KS 67402	NONE	PUBLIC	GENERAL FUND	2,000
Total ▶ 3a				570,019

TY 2018 Accounting Fees Schedule**Name:** SMOOT CHARITABLE FOUNDATION**EIN:** 48-0851141

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	3,750	2,813		937

TY 2018 Investments Corporate Stock Schedule

Name: SMOOT CHARITABLE FOUNDATION

EIN: 48-0851141

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCKS	10,775,310	10,775,310

TY 2018 Other Expenses Schedule**Name:** SMOOT CHARITABLE FOUNDATION**EIN:** 48-0851141**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BROKER MANAGMENT FEES	290	290		
DUES AND SUBSCRIPTIONS	1,385	1,385		
INSURANCE	3,253	3,253		
MISC EXPENSE	546	546		

TY 2018 Other Increases Schedule

Name: SMOOT CHARITABLE FOUNDATION

EIN: 48-0851141

Description	Amount
INCREASE IN MARKET VALUE	890,792

TY 2018 Other Liabilities Schedule**Name:** SMOOT CHARITABLE FOUNDATION**EIN:** 48-0851141

Description	Beginning of Year - Book Value	End of Year - Book Value
PREPAID FED EXCISE TAX		

TY 2018 Taxes Schedule**Name:** SMOOT CHARITABLE FOUNDATION**EIN:** 48-0851141

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REPROT FEE	40	40		
FEDERAL EXCISE TAXES	5,509			
FOREIGN TAXES	2,251	2,251		