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 \

Open to Public Inspection ► Go to www.irs.gov/Form990PFfor instructions and the latest information.

_		endar year 2019 or tax year beginning foundation	08/	12 , 2019,	and end		Employer identif	U8/31, ZU 1
			Z ECIMIDATETON			"	• •	2708703
		ID AND DOROTHY KEMPER FAMILS and street (or P O box number if mail is not delivered t			Room/suit	e R		er (see instructions)
IVU	iiiibei	and street for P. O. box number it mains not delivered t	o street address;		11001117 3011		Totophono name	(000
,	п Λ	. BOX 11356	•				Q 1	6-234- <u>181</u> 7
		 BOA 11336 bwn, state or province, country, and ZIP or foreign posta 	al code	·				0 234 1017
	,	~ ~ · · · · · · · · · · · · · · · · · ·				С	If exemption applica	tion is
	ימ.זיי	YTÓN, MO 63105-0156					pending, check here	
_		ck all that apply: X Initial return	Initial return	of a former pu	ublic cha	rity	4 Favaira arangina	wassa abaak bara ' 🏲 🗍
Ğ	0110	Final return	Amended ret	•		,	1 Foreign organizat 2 Foreign organizat	•
		Address change	Name change				85% test, check h	ere and attach
н	Che	ck type of organization: X Section 501				<u> </u>	•	
Ī	_	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri		on 01	<i>)</i> [If private foundation under section 507(b	status was terminated
亡			unting method: X Ca					n a 60-month termination
		1	ther (specify)			')(1)(B), check here .
		·	column (d), must be on co	ash basis)		_		
Р	art l	Analysis of Revenue and Expenses (The	(a) Revenue and					(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inver		(c)	Adjusted net income	for charitable of purposes
		column (a) (see instructions).)	books					(cash basis only)
Л	1	Contributions, gifts, grants, etc., received (attach schedule) .	5,734,000.	ROW. Christian	1500 L		KI KUKA	的技术的主义的重要
,	2	Check If the foundation is not required to attach Sch B	121.0°40.001.001	May the state of t			影響的關鍵的	CARAGOS ANALOS
	3	Interest on savings and temporary cash investments-						
	. 4	Dividends and interest from securities	· · ·					
1	5a	Gross rents			 			1788
	b	Net rental income or (loss)						PURE SAN AND
e	6a	Net gain or (loss) from sale of assets not on line 10	2 STAR TO CO CONTRATION TO STAR OF THE				"" """"	50 20 20 20 20 20 20 20 20 20 20 20 20 20
Revenu	Ь	Gross sales price for all assets on line 6a		100 Sept. 1889	\$835,075	1000		
é	7	Capital gain net income (from Part IV, line 2) .		BOOK ON A CONTRACTOR	Minta S	L)BEE	(多)。建建制度(2)	DE LEVER DE MET PLONETS
Œ	8	Net short-term capital gain						
	9	Income modifications				1 500° [64]		
	104	and allowances	Control of the second of the s	NAMES AND COMMISSION OF THE PROPERTY OF THE PR	TOP COLUMN	100 CM		KANAMASTAN MARK
		Less Cost of goods sold .		PSA PALAN	Name of the	CARGO IN	57.1309 (6868.03)	Halle William Control of the Control
		Gross profit or (loss) (attach schedule)		ENERGY TO THE SECOND	Mat-1786			
	11	Other income (attach schedule)	5,734,000.					
_	12	Total Add lines 1 through 11	5,734,000.				 	TO GRADE WORKER SELECT
S	13	Compensation of officers, directors, trustees, etc		_	NONE		NONE	
ıse	14	Other employee salaries and wages		-	NONE		NONE	
per	15	Pension plans, employee benefits	4		HONE		110111	·
Expense	16a	Legal fees (attach schedule)	1					
Ve		Other professional fees lattack calkerings	20 /					
ati	17	Interest						
Administrative	18	Taxes (attach schedule) (see instructions)	38/	-				
֖֚֓֡֞֝֞֞֟	19	Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) (and depletion occupancy Travel, conferences, and poetings Printing and publications		_				Kandenio ka
투	20	Occupancy						
	21	Travel, conferences, and meetings OF			NONE		NONE	
an	21 22	Printing and publications			NONE		NONE	
Ď	23	Other expenses (attach schedule)						
³ŧi	24	Total operating and administrative expenses.						
ěř	23 24 25	Add lines 13 through 23			NONE		NONE	
ဝ	25	Contributions, gifts, grants paid		Part Strike	数流行	學問題		-
	26	Total expenses and disbursements Add lines 24 and 25			NONE		NONE	
	27	Subtract line 26 from line 12.						
	a	Excess of revenue over expenses and disbursements	5,734,000.	\$187 43				LANGE CHARLES
	ь	Net investment income (if negative, enter -0-)				Y (44)	ALCOPPINE SEE	
	l c	Adjusted net income (if negative, enter -0-)						

Ρ	art II	Balance Sheets Attached schedules and amounts in the	Beginning of year	End	of year
		description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments			
		Accounts receivable >		21 - 27 - 18 - 28 - 28 - 28 - 28 - 28 - 28 - 28	数据的图像图像图像
		Less allowance for doubtful accounts			
		Pledges receivable ▶		Liver to the state of the state	
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers directors trustees and other			
	,	disqualified persons (attach schedule) (see instructions)		-	
	7	disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)	THE THE WAY SEED TO		
		Less allowance for doubtful accounts NONE		-	
ţ	8	inventories for sale or use			·
ssets	9	Prepaid expenses and deferred charges			
۲	10a	nvestments - U S and state government obligations (attach schedule)			
	ь	nvestments - corporate stock (attach schedule) . STMT .1.		13,228	. 5,707,000
	c	nvestments - corporate bonds (attach schedule)			
	11	nvestments-land, buildings, and equipment basis	A THE PROPERTY OF THE PARTY OF		the second
		Less accumulated depreciation Less accumulated depreciation			
1		nvestments - mortgage loans		<u> </u>	
Í	13	nvestments - other (attach schedule)	1		
		Land, buildings, and equipment basis			
		equipment basis			
-	15	Other assets (describe)			
		Total assets (to be completed by all filers - see the			
_		nstructions Also, see page 1, item I)		13,228	
	17	Accounts payable and accrued expenses	,	<u> </u>	
	18	Grants payable			
ies		Deferred revenue			
ij	20	oans from officers, directors, trustees, and other disqualified persons			
iab		Mortgages and other notes payable (attach schedule)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	22	Other liabilities (describe)			
) 17017	
4		Total liabilities (add lines 17 through 22)		NON	E is a second of the second of
nces		Foundations that follow FASB ASC 958, check here			
٤		and complete lines 24, 25, 29, and 30.			
画	24	Net assets without donor restrictions			17.1, 17.25.544. 147.7 32297.4547.
9	-	Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·			
		Foundations that do not follow FASB ASC 958, check here X			
Ž	26	•		13,228	
0	20 1	Capital stock, trust principal, or current funds		13,220	**************************************
힣	20 1	Paid-in or capital surplus, or land, bldg, and equipment fund			E3438 F 37.389 6 348 8 8 8
ş	20 '	Retained earnings, accumulated income, endowment, or other funds		13,228	9,4415, 747,58-74,49-2003
		Total liabilities and net assets/fund balances (see			
اچ اح		nstructions) · · · · · · · · · · · · · · · · · · ·		13,228	
Р		Analysis of Changes in Net Assets or Fund Bala	nces	15,220	of the first of the control of the c
		net assets or fund balances at beginning of year - Part		must agree with	
•		of-year figure reported on prior year's return)		- 1	
2		amount from Part I, line 27a			5,734,000.
		r increases not included in line 2 (itemize) ▶			
		lines 1, 2, and 3			5,734,000.
		eases not included in line 2 (itemize) > BOOK/TAX DIFFEREN		5	5,720,772.
		net assets or fund balances at end of year (line 4 minus l), line 29 6	13,228.
					OOO DE

Par	t IV Capital Gains	and Losses for Tax on inv	estment Income			
•		cribe the kind(s) of property sold (for erick warehouse; or common stock, 200		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a						
_ <u>b</u>	<u> </u>					
<u>c</u>						
<u>d</u>				 		
<u>e</u>		(0 B	(g) Cost or other basis		(h) Gain or (lo	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale	_	((e) plus (f) minu	
a	<u></u>					
b						
<u>C</u>	-			 		
_ <u>d</u>				 		
e	Complete only for assets sh	owing gain in column (h) and owned	by the foundation on 12/31/69	m	Gains (Col. (h) ga	un minus
	· · · · · · · · · · · · · · · · · · ·	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
a						
b						
C						
d	1-					
е				<u> </u>		
2	Capital gain net income		gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	2		
3	Net short-term capital ga	ain or (loss) as defined in sections	,			
			structions. If (loss), enter -0- in $igr brace$			
	Part I, line 8	 <u> </u>	<u></u>	3		
Par	t V Qualification U	Inder Section 4940(e) for Rec	duced Tax on Net Investment I	ncome	N/	'A
Was			butable amount of any year in the b	ase perio	d?	Yes No
1			ar; see the instructions before making	ng any en	tries	
<u>'</u>	(a)	(b)	(c)	lig dity cit	(d)	
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2018			-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	2017				· 	
	2016					
	2015				·	
	2014					
2				2		
3	•	•	de 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		
4	Enter the net value of no	oncharitable-use assets for 2019 f	from Part X, line 5	4		
				_		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investm	ent income (1% of Part I, line 27b))	6		
				_		
7	Add lines 5 and 6			7		
8	Enter qualifying distributed line 8 is equal to or go Part VI instructions.	tions from Part XII, line 4 greater than line 7, check the box	x in Part VI, line 1b, and complete	that part	using a 1% tax	rate. See the

Form 9	99 b -PF (2019) 84 - 2708703	Page 4
Part	VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e instructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	
	Domestic foundations that meet the section 4940(e) requirements in Part V, check	NONE
	here and enter 1% 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)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	NONE
3	Add lines 1 and 2	NONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	NONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	NONE
6	Credits/Payments Credits/Payments	
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a	
	Exempt foreign organizations - tax withheld at source	
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE	
d	Backup withholding erroneously withheld	
7	Total credits and payments. Add lines 6a through 6d	NONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	NONE
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ NONE Refunded ▶ 11	
	t VII-A Statements Regarding Activities	12.3272
	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 X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	
	Instructions for the definition	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	S
	published or distributed by the foundation in connection with the activities	To the second se
	Did the foundation file Form 1120-POL for this year?	1c X
	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 X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	Fred with a Com
2	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	
	If "Yes," has it filed a tax return on Form 990-T for this year?	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	
J	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:	
•	By language in the governing instrument, or	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	at Signatura
	conflict with the state law remain in the governing instrument?	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	••
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	
	MO	
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 ² If "No," attach explanation STMT .2	. 8b X
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"	,"
	complete Part XIV	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ir
	names and addresses	

Part	t VII-A Statements Regarding Activities (continued)			
		HOUSE	Yes	No
11`	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			<u> X</u>
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	1 40		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
	Website address ► N/A			
14	The books are in care of ► COMMERCE TRUST COMPANY Telephone no ► (816) 23	1-181	.7	-
	Located at ▶ 8000 FORSYTH BLVD, ST LOUIS, MO ZIP+4 ▶ 63105			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	T
15	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authori		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16		$\overline{\mathbf{x}}$
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name	of Marie	107	1.20
	the foreign country			
Par	VILB Statements-Regarding Activities for Which Form 4720 May Be Required	Brown and	26.774	3
T at	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
_		127	3.73	
та	During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1) Linguige in the object of			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	diodasined belock			
	(o) turning goods, out to the cooperation of the co			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			15
	(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)?			
	and definition are also are an adjustment personny in the control of the control			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			34.2
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. 1b	. 200	Q29998
	Organizations relying on a current notice regarding disaster assistance, check here			3.4
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			v
	were not corrected before the first day of the tax year beginning in 2019?	. <u>1c</u>	10052155	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		10.00	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			() A
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
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	-200	N. San
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			77
)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			14.
	at any time during the year?	127.3		35.0
b	olf "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of			
	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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	. <u>3b</u>	 -	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	4a	, 7/, Addrson N	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			فتخضينا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019	4b	<u> </u>	X
		Form 9 9	≀∩.PF	(2019)

Part VII-B	04.4	AMILIA FARMA	700 May D. D.	المحبيمة ومما المحسنيي	
		· ·	720 May Be Red	uirea (continuea)	
	the year, did the foundation pay or incur any amo				Yes No
	arry on propaganda, or otherwise attempt to influe	•			
(2) In	fluence the outcome of any specific public ele	ection (see section 4	955), or to carry or		
	rectly or indirectly, any voter registration drive?				
(3) Pr	ovide a grant to an individual for travel, study, or o	ther similar purposes?		. Yes X No	
(4) Pr	ovide a grant to an organization other than a	charitable, etc, org	anization described i		
	ection 4945(d)(4)(A)? See instructions				
	ovide for any purpose other than religious, ch				
•	rposes, or for the prevention of cruelty to children				E - 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	answer is "Yes" to 5a(1)-(5), did any of the				1 1 1
	ations section 53.4945 or in a current notice regar				5b
	izations relying on a current notice regarding disas				
	answer is "Yes" to question 5a(4), does the		•		
becau	se it maintained expenditure responsibility for the	grant ⁷		. Yes No	
	s," attach the statement required by Regulations se				
	ne foundation, during the year, receive any fur			1 1 11	
	ersonal benefit contract?				77
	e foundation, during the year, pay premiums, direc	tly or indirectly, on a p	personal benefit contra	act'	. 6b X
	" to 6b, file Form 8870		-114444	Yes X No	
	r time during the tax year, was the foundation a pa s," did the foundation receive any proceeds or have			•	7 7b
	foundation subject to the section 4960 tax on pay	•			7 90 35 THE LEWIS
	roundation subject to the section 4960 tax on pay neration or excess parachute payment(s) during the			. Yes X No	
Part VIII	Information About Officers, Directo	rs. Trustees. Fou	ndation Manager	s. Highly Paid Emi	plovees,
	and Contractors				
1 List al	l officers, directors, trustees, and foundation	n managers and tr	(c) Compensation.	(d) Contributions to	(e) Expense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
DAVID W KEM	PER	GRANTOR & TRUSTE			<u> </u>
	ON ROAD, LADUE, MO 63124	1	-0-	-0-	-0-
DOROTHY J K	EMPER	TRUSTEE			
2101 S WARS					
	ON ROAD, LADUE, MO 63124	1	-0-	-0-	-0-
	ON ROAD, LADUE, MO 63124	1	-0-	-0-	-0-
	ON ROAD, LADUE, MO 63124	1	-0-	-0-	-0-
- Tarana	ON ROAD, LADUE, MO 63124	1	-0-	-0-	-0-
		1			
2 Comp	ensation of five highest-paid employees	(other than thos			
	ensation of five highest-paid employees	- -		e 1 - see instruction	ons). If none, enter
2 Compo	ensation of five highest-paid employees	(b) Title, and average hours per week		e 1 - see instruction	
2 Compo	ensation of five highest-paid employees E."	(b) Title, and average	e included on lin	e 1 - see instruction (d) Contributions to employee benefit	ons). If none, enter
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred	ons). If none, enter
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NONI (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
2 Compo "NON! (a) Name a	ensation of five highest-paid employees E."	(b) Title, and average hours per week devoted to position	e included on lin	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances

Page	4

3 Fi	ve highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	<u> </u>
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		17017
ONE		NON
-		
		
otal nu	mber of others receiving over \$50,000 for professional services	NONE
art IX		
	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of actions and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NON	€	
		·
2		
3		
4		
art IX	-B Summary of Program-Related Investments (see instructions)	
	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NON	E	
2		· · · · · · · · · · · · · · · · · · ·
<u> </u>		
	er program-related investments. See instructions	
3 NON	E	

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
a Average monthly fair market value of securities
b Average of monthly cash balances
b Average of monthly cash balances
d Total (add lines 1a, b, and c)
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.) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).
1c (attach detailed explanation)
2 Acquisition indebtedness applicable to line 1 assets
3 Subtract line 2 from line 1d
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)
instructions)
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 5,634, 6 Minimum investment return. Enter 5% of line 5
6 Minimum investment return. Enter 5% of line 5 15, 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 2a Tax on investment income for 2019 from Part VI, line 5 2a b Income tax for 2019. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b
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
and certain foreign organizations, check here ▶ and do not complete this part.) 1 Minimum investment return from Part X, line 6
Minimum investment return from Part X, line 6
2a Tax on investment income for 2019 from Part VI, line 5 2a NONE b Income tax for 2019. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b
b Income tax for 2019. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b
c Add lines 2a and 2b
• Add Inico 2d dilo 25.
2 Distributable amount before adjustments Cubtrest line 2s from line 1
3 Distributable amount before adjustments. Subtract line 2c from line 1
5 Add lines 3 and 4
6 Deduction from distributable amount (see instructions)
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,
line 1
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
b Program-related investments - total from Part IX-B
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,
purposes
3 Amounts set aside for specific charitable projects that satisfy the:
a Suitability test (prior IRS approval required)
b Cash distribution test (attach the required schedule)
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.
Enter 1% of Part I, line 27b. See instructions
6 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 foun

Part P	XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d) 3
1 D	Pistributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
lı	ne 7				<u>15,438.</u>
2 U	Indistributed income, if any, as of the end of 2019				
аE	nter amount for 2018 only			NONE	
ЬΤ	otal for prior years 20,20,20		NONE		<u> </u>
	xcess distributions carryover, if any, to 2019:				1
аF	rom 2014 NONE				
b F	rom 2015 NONE]
c F	rom 2016 NONE				
đ F	rom 2017 NONE		Ì	1	
e F	rom 2018 NONE				
f T	otal of lines 3a through e	NONE			
4 0	Qualifying distributions for 2019 from Part XII,				
h	ne 4. > \$ NONE				
aА	Applied to 2018, but not more than line 2a			NONE	
b A	applied to undistributed income of prior years				1
	Election required - see instructions)		NONE		
сТ	reated as distributions out of corpus (Election				:1
	equired - see instructions)	NONE			
d A	Applied to 2019 distributable amount				NONE
e R	lemaining amount distributed out of corpus	NONE			
	xcess distributions carryover applied to 2019				j
	If an amount appears in column (d), the same mount must be shown in column (a).)	NONE			NONE NONE
6 E	inter the net total of each column as				1
	ndicated below:				1
aС	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONB			,
ЬΡ	rior years' undistributed income Subtract				
li	ne 4b from line 2b		NONE		
	nter the amount of prior years' undistributed				1
	ncome for which a notice of deficiency has been issued, or on which the section 4942(a)				1
	ax has been previously assessed		. NONE		
d S	Subtract line 6c from line 6b. Taxable			•	
	mount - see instructions		NONE		
	Indistributed income for 2018 Subtract line a from line 2a Taxable amount - see				
	nstructions			NONE	
f U	Indistributed income for 2019 Subtract lines				•
	d and 5 from line 1. This amount must be				
d	listributed in 2020				15,438.
7 A	Amounts treated as distributions out of corpus		_		j
to	s satisfy requirements imposed by section				']
1	70(b)(1)(F) or 4942(g)(3) (Election may be				
Г	equired - see instructions)	NONE			
	xcess distributions carryover from 2014 not				
а	pplied on line 5 or line 7 (see instructions)	NONE			
	excess distributions carryover to 2020.	NONE			1
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9				
	xcess from 2015 NONE				ł
	xcess from 2016 NONE				. 1
	xcess from 2017 NONE				<i>`</i> ']
	xcess from 2018 NONE				į
e E	xcess from 2019 NONE				5 990 PE (2010)

HPN762 D73X 06/30/2020 13:46:51

Recipient (increased and address (home or business)) Paul during the year Paul during the year Total Disproved for future payment	3,	Grants and Contributions Paid During	ontinueu)	oved for	Future Payment	
Total	<u> </u>	Recipient	If recipient is an individual,	Foundation	D	
Total		Name and address (home or business)	show any relationship to any foundation manager	status of	contribution	Amount
Total		Paid during the year	Or substantial contributor	, coopions		
b Approved for future payment		and carmy and year				,
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						ļ .
b Approved for future payment						
b Approved for future payment				·		
b Approved for future payment						ļ
b Approved for future payment						,
b Approved for future payment						
b Approved for future payment						4
b Approved for future payment						,
b Approved for future payment						•
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						,
b Approved for future payment						1
b Approved for future payment						
b Approved for future payment						Ĭ
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						
b Approved for future payment						,
b Approved for future payment						
b Approved for future payment						}
b Approved for future payment						
b Approved for future payment		Total			▶ 3a	9
	b					
Total > 2h						5
Total						
Total						
Total Date of the state of the						,
Total Date 2h						;
Total						
Total						
Total						
Total						•
Total						
Total						
Total						
Total						
Total						
Total						'
Total						
		Total			▶ 3b	

m 990-PF (2019)			84-2	708703	Page
t XVI-A Analysis of Income-Prod	ucing Activi	ties		 	
er gross amounts unless otherwise indicated	Unrelated	d business income	Excluded by se	ection 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
·					(occ moducation)
		-	 	-	
Fees and contracts from government agencies		_			·
lembership dues and assessments			 		
terest on savings and temporary cash investments ividends and interest from securities					
et rental income or (loss) from real estate		•		·	Q.
Debt-financed property					
Not debt-financed property	1 1		 - -		
et rental income or (loss) from personal property	1		 - -		
ain or (loss) from sales of assets other than inventory					
let income or (loss) from special events · · ·					
ross profit or (loss) from sales of inventory					
ther revenue: a					
		···			
	1 1				
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	L				
worksheet in line 13 instructions to verify calcu					
t XVI-B Relationship of Activities	to the Acc	omplishment of	Exempt Purpos	ses	
e No. Explain below how each activit accomplishment of the foundation					
	<u>-</u>				
	· · · · · · · · · · · · · · · · · · ·				
					
			_ 	_	
	 .	NOT APPLICAB	LE _		
					
		_ 			
					_ _
					
		_			
I					

Part	XVII	Information Re Organizations	garding Tra	nsfers to and	1 Transaction	s and I	Relationship	s With	Nonchari	table	Exe	empt ‡
1		e organization directl									Yes	No
		tion 501(c) (other	than section	501(c)(3) org	janizations) or	in secti	on 527, rela	ating to	political			
а	•	zations ⁷ ers from the reporting	n foundation to	n a noncharitable	e exempt organ	ization of	•					
a		sh								1a(1)	·	Х
		ner assets								1a(2)		X
b		Other transactions:										
		(1) Sales of assets to a noncharitable exempt organization										X
		Purchases of assets from a noncharitable exempt organization Rental of facilities, equipment, or other assets										X
		ntal of facilities, equip mbursement arrange										X
		mbursement arrange ans or loan guarantee										X
		formance of services										Х
c		g of facilities, equipm										X
d		answer to any of th										
		of the goods, other										
		n any transaction or				·						
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable exemp	pt organization	(d) Des	cription of transfe	rs, transacti	ons, and snari	ng arra	ngeme	ents ;
									· ·			i
		_										
										_		
	-					-						
												_
					- **		-		 -	-		
									-			
			<u> </u>			<u> </u>						_
	1. 41	formal ation all and to		ffilianaltale					tions			
Za		foundation directly oped in section 501(c)					e tax-exempt	organiza	itions	¬ v.	96 7	X No
h		," complete the follow		5011011 50 1(0)(5))	or in section 5	27: • • •				• `		
		(a) Name of organizatio		(b) Typ	e of organization		(4	c) Description	on of relations	hip		
							-	_				<u>.</u>
								. <u></u> .				
				-					·			
	Under	r penalties of perjury, I decla	are that I have exar	nined this return, inclu	iding accompanying s	chedules and	statements, and to	the best of	f my knowledge	and b	elief, it	ıs true,
٥.	€ CELLOS	and complete Declaration o	f preparer (other than	taxpayer) is based on a	I information of which	preparer has	any knowledge	1				
Sig		Land W	Kent	32 17/	5/20	TRUS	TEE		May the IRS with the prej			
Her	e Sign	nature of officer or trustee		Date		Title	-		See instructions		Yes [No
	DA	VID W KEMPER										
Paid	1	Print/Type preparer's na		Prepare s sign	nature \(\sigma \)	A	Date	Che	<u>~ □ " </u>	TIN		
	parer	DOUGLAS L NE		1	list he	لمسحولا	06/30/2				1335	<u> </u>
_			MMERCE TR		<u>y</u>			Firm's EIN	▶ 48-0	1962	6∠6	
USE	Only		BOX 1135 LOUIS,	6 MO	63	105		Phone no	816-76	:n-8	466	
		1 51	поото,	110	03	<u> </u>		THORIE HO				(2019)

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/Form990for the latest information.

OMB No 1545-0047

2019

Employer identification number Name of the organization DAVID AND DOROTHY KEMPER FAMILY FOUNDATION 84-2708703 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) 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 any one contributor, 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; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization DAVID AND DOROTHY KEMPER FAMILY FOUNDATION **Employer identification number** 84-2708703

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1_	DAVID W KEMPER 2101 WARSON ROAD ST LOUIS, MO 63124	\$5,734,000.	Person X Payroll X Noncash X (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 Noncash (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 Noncash (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)				

Name of organization

DAVID AND DOROTHY KEMPER FAMILY FOUNDATION

Employer identification number

84-2708703

rart II	Noncash Property (see instructions). Ose duplicate copies	or rait in in additional space is fied	ueu.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1_	100,000 SH COMMERCE BANCSHARES INC.	\$\$.	08/12/2019
(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
		\$	
(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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

- CORPORATE STOCK FORM 990PF, PART II

DESCRIPTION

COMMERCE BANCSHARES INC

ENDING	FMV	1
ENDING	BOOK VALUE	1 1 1 1 1 1 1 1

5,707,000	
13,228.	

TOTALS

5,707,000.

13,228.

HPN762 D73X 06/30/2020 13:46:51

STATEMENT THE

990PF, PART VII-A LINE 8b - EXPLANATION OF NON-FILING WITH A.G. STMT.

MO

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS _______

NAME AND ADDRESS

DAVID W KEMPER

2101 WARSON ROAD ST LOUIS, MO 63124 ĎAŸIĎ AND DOROTHY KEMPER FAMILY FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

DAVID W KEMPER C/O DAVID AND DOROTHY

ADDRESS:

KEMPER FAMILY FOUNDATION, PO BOX 11356

CLAYTON, MO 63105

RECIPIENT'S PHONE NUMBER: 816-234-1817

E-MAIL ADDRESS: N/A

FORM, INFORMATION AND MATERIALS:

NO FORMAL PROCESS

SUBMISSION DEADLINES:

N/A

RESTRICTIONS OR LIMITATIONS ON AWARDS:

N/A