

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation EM BURGER MEMORIAL FOUNDATION		A Employer identification number 23-7416312	
Number and street (or P.O. box number if mail is not delivered to street address) 32819 HIGHWAY 87		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code CALIFORNIA, MO 65018		B Telephone number (see instructions) (573) 796-3134	
G Check all that apply: ☐ Initial return☐ Initial return of a former public charity ☐ Final return☐ Amended return ☐ Address change☐ Name change		C If exemption application is pending, check here ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 2,382,862		J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	
		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)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	152,050			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	8,242	8,242		
	4 Dividends and interest from securities	50,669	50,669		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	38,734			
	b Gross sales price for all assets on line 6a 213,389				
	7 Capital gain net income (from Part IV, line 2)		38,734		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	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	249,695	97,645		
	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,395			1,395
	c Other professional fees (attach schedule)	20,918	20,918	20,918	
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	2,208	687	687	
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	35			35
	24 Total operating and administrative expenses. Add lines 13 through 23	24,556	21,605	21,605	1,430
	25 Contributions, gifts, grants paid	107,000			107,000
	26 Total expenses and disbursements. Add lines 24 and 25	131,556	21,605	21,605	108,430
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	118,139			
	b Net investment income (if negative, enter -0-)		76,040		
	c Adjusted net income (if negative, enter -0-)				

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	11,380	10,514	10,517
	2 Savings and temporary cash investments	28,320	28,936	28,936
	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	468		
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)	169,199	200,235	200,235
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,775,489	2,143,174	2,143,174
	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)	1,984,856	2,382,859	2,382,862	
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 ▶ _____)		321	
	23 Total liabilities (add lines 17 through 22)		321	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	1,984,856	2,382,538	
	29 Total net assets or fund balances (see instructions)	1,984,856	2,382,538	
30 Total liabilities and net assets/fund balances (see instructions) .	1,984,856	2,382,859		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	1,984,856
2 Enter amount from Part I, line 27a	2	118,139
3 Other increases not included in line 2 (itemize) ▶ _____	3	279,543
4 Add lines 1, 2, and 3	4	2,382,538
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 29 .	6	2,382,538

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.)
1a See Additional Data Table			
b			
c			
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 See Additional Data Table			
b			
c			
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 See Additional Data Table			
b			
c			
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	38,734
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	-377

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))
2018	108,199	2,099,380	0.051539
2017	104,959	2,052,599	0.051135
2016	87,129	1,806,159	0.048240
2015	89,666	1,769,997	0.050659
2014	90,778	1,792,901	0.050632

2 Total of line 1, column (d)	0.252205
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	0.050441
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	2,217,712
5 Multiply line 4 by line 3	111,864
6 Enter 1% of net investment income (1% of Part I, line 27b)	760
7 Add lines 5 and 6	112,624
8 Enter qualifying distributions from Part XII, line 4	108,430

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 ☐ 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 ☐ and enter 1% of Part I, line 27b	1	1,521
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	1,521
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	1,521
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	1,200
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	1,200
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 ▶	9	321
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 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?		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>		No
c Did the foundation file Form 1120-POL for this year?		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>		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>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
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>		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?	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>	Yes	
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? <i>If "No," attach explanation .</i>	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 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		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 ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>LAUREN LAWSON</u> Telephone no. ► <u>(573) 796-3134</u>			

Located at ► 32819 HWY 87 CALIFORNIA MOZIP+4 ► 65018

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here	☐		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2019, 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.**

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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.) ☐ Yes ☒ 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	1b		
	Organizations relying on a current notice regarding disaster assistance check here. ► ☐			
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 2019?	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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ 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? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2019 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 2019.)	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 2019?	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))?	☐ Yes ☒ No	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ 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?	☐ Yes ☒ 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.	☐	
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).	☐ Yes ☐ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ 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?	☐ Yes ☒ 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?	☐ Yes ☒ 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
See Additional Data Table				

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 DONATIONS ARE DISTRIBUTED TO OTHER 501(C)(3) ORGANIZATIONS.	108,430
2	
3	
4	

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	
All other program-related investments. See instructions.	
3	
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	2,200,152
b	Average of monthly cash balances.	1b	51,332
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	2,251,484
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	2,251,484
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	33,772
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,217,712
6	Minimum investment return. Enter 5% of line 5.	6	110,886

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	110,886
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	1,521
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	1,521
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	109,365
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	109,365
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	109,365

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	108,430
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	108,430
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	108,430

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 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				109,365
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.				
b Total for prior years: 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				4,611
e From 2018.				5,494
f Total of lines 3a through e.	10,105			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ _____ 108,430				
a Applied to 2018, 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 2019 distributable amount.				108,430
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	935			935
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	9,170			
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.				
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				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 2014 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	9,170			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				3,676
d Excess from 2018.				5,494
e Excess from 2019.				

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 2019, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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					

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

Part XV

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).)

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.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ 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:

MARY KEIL
205 KELLY
CALIFORNIA, MO 65018
(573) 796-4728
NA

b The form in which applications should be submitted and information and materials they should include:

NO REQUIRED FORMAT

c Any submission deadlines:

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

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	107,000
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments				14	8,242	
4 Dividends and interest from securities. . . .				14	50,669	
5 Net rental income or (loss) from real estate:						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory				25	38,532	202
9 Net income or (loss) from special events:						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue: a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e). . .					97,443	202
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13		97,645

[illegible]

Part XVII

		Yes	No
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1a(1)		No
1a(2)		No

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1b(1)	No
--------------	-----------

1b(2)		No
--------------	--	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
--------------	--	-----------

1b(5)		No
--------------	--	-----------

1b(6)		No
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1c		No
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value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated 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.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here 	*****	2020-07-01	*****	May the IRS discuss this return with the preparer shown below (see instr.) ☒ Yes ☐ No
	_____ Signature of officer or trustee	_____ Date	_____ Title	

Paid Preparer Use Only	HALEY HOMAN CPA		2020-07-02		
	Firm's name ► BOBBY MEDLIN CPA GROUP LLC				Firm's EIN ► 47-2223054
	Firm's address ► PO BOX 789 TIPTON, MO 650810789				Phone no. (660) 433-2006

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
COMMERCE BANCSHARES INC	P	2019-12-18	2019-12-18
APPLE INC	P	2017-07-26	
TEXAS INST	P	2017-07-26	2019-12-27
GRAINGER W W INC	P	2019-07-12	2019-12-27
CISCO SYSTEMS INC	P	2016-08-02	2019-07-12
UNITED PARCEL	P	2016-08-02	2019-12-27
HONEYWELL INTL	P	2018-07-23	2019-07-12
COMMERCE BANCSHARES INC	P	2018-07-23	2019-12-27
UNITED TECH CORP	P	2016-08-02	2019-07-12
MONDELEZ INTL	P	2018-10-01	2019-07-12

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
61			61
2,363		1,381	982
385		249	136
1,012		804	208
463		245	218
358		322	36
527		441	86
614		572	42
3,976		3,189	787
5,394		4,260	1,134

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			61
			982
			136
			208
			218
			36
			86
			42
			787
			1,134

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
DISNEY WALT COMPANY	P	2016-08-02	2019-07-12
UNITED HEALTH GROUP	P	2017-07-26	2019-12-27
NIKE INC	P	2019-07-12	2019-12-27
FACTSET RESEARCH	P	2017-07-26	2019-07-12
VANGUARD SHORT TERM ETF	P	2016-06-02	2019-01-03
P P G INDUSTRIES	P		
IL TOOL WORKS	P	2018-07-23	2019-12-27
VANGUARD EXT ETF	P	2016-08-02	2019-07-12
PEPSICO INC	P	2018-07-23	2019-07-12
ISHARES ETF	P	2016-08-02	2019-01-03

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
581		379	202
296		191	105
406		355	51
1,180		666	514
7,184		7,414	-230
660		651	9
544		408	136
962		709	253
268		229	39
310		359	-49

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			202
			105
			51
			514
			-230
			9
			136
			253
			39
			-49

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
VANGUARD INTER ETF	P	2016-08-02	2019-01-03
POLARIS INC	P	2019-01-03	2019-12-27
MICROSOFT CORP	P	2016-08-02	
VANGARD INDEX FDS ETF	P	2016-08-02	2019-07-12
SCHWAB STRAT	P	2018-07-23	2019-01-03
NOVARTIS AG	P	2017-07-26	2019-01-03
WEC ENERGY GROUP	P	2017-07-26	2019-01-03
UNITED TECH	P	2019-01-03	2019-07-12
P P G IND	P		2019-01-03
WALMART INC	P	2017-07-26	2019-01-03

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
3,325		3,571	-246
507		380	127
1,150		452	698
6,894		6,849	45
1,171		1,147	24
3,826		3,801	25
405		376	29
663		525	138
3,532		3,754	-222
468		392	76

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			-246
			127
			698
			45
			24
			25
			29
			138
			-222
			76

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
NOVARTIS	P	2018-07-23	2019-01-03
REALTY INCOME CORP	P	2017-07-26	2019-01-03
ISHS EDGE MSCI	P	2019-07-11	2019-12-03
AFLAC	P	2017-02-10	
SCHWAB STRATEGIC TR	P	2017-07-26	2019-01-03
ISH CORE MSCI TOT	P	2019-06-19	2019-12-06
AT&T	P		2019-12-27
SCWAB STRATEGIC TR	P	2017-07-26	2019-01-03
VODAFONE GROUP	P		
AIR PRODUCTS & CHEM	P	2017-07-26	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
425		413	12
1,004		907	97
51,723		50,407	1,316
5,009		3,151	1,858
700		706	-6
665		633	32
5,230		5,312	-82
857		880	-23
8,014		10,261	-2,247
5,734		3,769	1,965

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			12
			97
			1,316
			1,858
			-6
			32
			-82
			-23
			-2,247
			1,965

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 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.)
STARBUCKS CORP	P	2017-07-26	
INVESCO LTD	P		
AMGEN INC	P	2016-08-02	2019-12-27
TJX COS INC	P	2017-07-26	2019-12-27
ISH CORE MSCI	P		2019-12-06

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(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)
1,793		1,461	332
9,041		10,408	-1,367
1,446		1,044	402
304		171	133
41,032		41,061	-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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	
			332
			-1,367
			402
			133
			-29

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ROBERT KEIL	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
MARY KEIL	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
SARA ROHRBACH	SECRETARY 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
AMY MOUSE	PRESIDENT 2.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
AARON BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
MORRIS BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
MICHAEL BIERI	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
PHILIP BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
STEVEN BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
ANN FLETCHER	TREASURER 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
KRIS BIERI	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
DOLORES BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
LAURA BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
SUSAN BURGER	VICE PRESIDE 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
KEITH FLETCHER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHRIS MOUSE	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
TED ROHRBACH	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
COLE FLETCHER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
HEATHER FLETCHER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
DREW FLETCHER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
CALLIE SIMMONS	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
BRICE SIMMONS	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
ERIC BIERI	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
HOLLY BIERI	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
ERIC LAWSON	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
LAUREN LAWSON	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
AUSTIN MOUSE	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
SETH ROHRBACH	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
GRANT BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				
BAILY BURGER	DIRECTOR 1.00	0	0	0
32819 HWY 87 CALIFORNIA, MO 65018				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
KELCI BURGER 32819 HWY 87 CALIFORNIA, MO 65018	DIRECTOR 1.00	0	0	0
ADAM BURGER 32819 HWY 87 CALIFORNIA, MO 65018				
COLLIN MOUSE 32819 HWY 87 CALIFORNIA, MO 65018	DIRECTOR 1.00	0	0	0

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>				
AMERICAN CANCER SOCIETY 1100 PENNSYLVANIA AVE KANSAS CITY, MO 64105	N/A	PC	FURTHER EXEMPT PURPOSE	500
AMERICAN HEART ASSOCIATION 104 CORPORATE LAKE DR COLUMBIA, MO 65203	N/A	PC	FURTHER EXEMPT PURPOSE	500
BOY SCOUTS OF AMERICA1203 FAY ST COLUMBIA, MO 65201	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
Total ▶ 3a				107,000

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>				
CALIFORNIA CHURCH OF CHRIST 301 W OAK ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	750
CALIFORNIA ELEMENTARY SCHOOL 205 S OWEN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	34,050
CALIFORNIA HIGH SCHOOL - GIRLS STAT 1501 W BUCHANAN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	300
Total ▶ 3a				107,000

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>				
CALIFORNIA MIDDLE SCHOOL 205 S OWEN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	2,500
CALIFORNIA MINISTERIAL ALLIANCE 1188 HAMPTON LANE CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
CALIFORNIA PROGRESS501 S OAK ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	14,000
Total ▶ 3a				107,000

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>				
CALIFORNIA PROJECT GRADUATION 1501 W BUCHANAN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	500
CALIFORNIA R1 HIGH SCHOOL 1501 W BUCHANAN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	9,500
CALIFORNIA RURAL FIRE DEPARTMENT 531783 COUNTY LINE RD CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	2,500
Total ▶ 3a				107,000

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>				
CALIFORNIA STINGRAY SWIM TEAM 205 S OWEN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	500
CALIFORNIA UNITED CHURCH OF CHRIST 101 N OAK ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	1,200
CAPITAL REGION FOUNDATION 1125 MADISON ST JEFFERSON CITY, MO 65102	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
Total ▶ 3a				107,000

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>				
CES PTO205 S OWEN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	800
CHILDRENS MIRACLE NETWORK HOSPITAL RD COLUMBIA, MO 65201	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
ELIA WOOD PAEGELOW FOUNDATION 501 S OAK ST CALIFORNIA, MO 65018	N/A	PF	FURTHER EXEMPT PURPOSE	1,000
Total ▶ 3a				107,000

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 FINKE315 N HIGH ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
GATEWAY INDUSTRIES 1204 E NORTH ST ELDON, MO 65026	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
GIRL SCOUTS OF MISSOURI HEARTLAND 330 METRO DR JEFFERSON CITY, MO 65109	N/A	PC	FURTHER EXEMPT PURPOSE	600
Total ▶ 3a				107,000

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>				
GRACE LIVING CENTER120 W STATE ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
HAVEN HOUSE - ST LOUIS 12685 OLIVE BLVD ST LOUIS, MO 63141	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
JAMESTOWN C1 SCHOOL1 SCHOOL AVE JAMESTOWN, MO 65046	N/A	PC	FURTHER EXEMPT PURPOSE	5,000
Total ▶ 3a				107,000

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>				
JAMESTOWN SWIMMING POOLROUTE 1 JAMESTOWN, MO 65046	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
MISSOURI AMPUTEE GOLF ASSN 607 DAVE DR CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	200
MONITEAU CHRISTIAN MINISTRIES 303 LATHAM RD CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
Total ▶ 3a				107,000

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>				
MONITEAU COUNTY HISTORICAL SOCIETY 201 N HIGH ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
MONITEAU COUNTY NUTRITION CENTER 107 W VERSAILLES AVE CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	250
MONITEAU COUNTY REGIONAL EC DEV PO BOX 112 CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
Total ▶ 3a				107,000

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>				
MONITEAU COUNTY SHERIFF 110 N HIGH ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	3,500
NATIONAL FIRE SAFETY PROGRAM CALIFORNIA CITY HALL CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	100
RAPE & ABUSE CRISIS SERVICES PO BOX 416 JEFFERSON CITY, MO 65102	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
Total ▶ 3a				107,000

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>				
RONALD MCDONALD HOUSE 3501 LANSING AVE COLUMBIA, MO 65201	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
SALVATION ARMYPO BOX 55 JEFFERSON CITY, MO 65101	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
ST PAUL'S EVANGELICAL149 E ROW ST JAMESTOWN, MO 65046	N/A	PC	FURTHER EXEMPT PURPOSE	750
Total ▶ 3a				107,000

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>				
UNIVERSITY OF CENTRAL MISSOURI PO BOX 800 SMISER ALUMNI WARRENSBURG, MO 64093	N/A	PC	FURTHER EXEMPT PURPOSE	2,500
UNITED WAY205 ALAMEDA DR JEFFERSON CITY, MO 65109	N/A	PC	FURTHER EXEMPT PURPOSE	1,000
LEUKEMIA SOCIETY 6811 SHAWNEE MISSION PKWY MISSION, KS 66202	N/A	PC	FURTHER EXEMPT PURPOSE	300
Total ▶ 3a				107,000

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>				
PREGNANCY HELP CENTER 1760 SOUTHRIDGE DR JEFFERSON CITY, MO 65109	N/A	PC	FURTHER EXEMPT PURPOSE	250
MCSWCO410 WEST BUCHANAN ST CALIFORNIA, MO 65018	N/A	PC	FURTHER EXEMPT PURPOSE	100
VERSAILLES COMMUNITY BETTERMENT 14978 HIGHWAY 5 VERSAILLES, MO 65084	N/A	PC	FURTHER EXEMPT PURPOSE	300
Total ▶ 3a				107,000

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>				
SHOWDOWN STAGE COMPANY 25316 VIA CALINDA VALENCIA, CA 91355	N/A	PC	FURTHER EXEMPT PURPOSE	200
ELDON MINISTERIAL ALLIANCE 1009 MCKINLEY ELDON, MO 65026	N/A	PC	FURTHER EXEMPT PURPOSE	2,000
RIDING FOR VETERANS20166 CR 256 CARROLLTON, MO 64633	N/A	PC	FURTHER EXEMPT PURPOSE	250
Total ▶ 3a				107,000

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>				
BOY SCOUTS300 HOMESTEAD AVE JEFFERSON CITY, MO 65109	N/A	PC	FURTHER EXEMPT PURPOSE	100
Total ► 3a				107,000

TY 2019 Accounting Fees Schedule**Name:** EM BURGER MEMORIAL FOUNDATION**EIN:** 23-7416312

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	1,395			1,395

TY 2019 Investments Corporate Bonds Schedule

Name: EM BURGER MEMORIAL FOUNDATION

EIN: 23-7416312

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS - EJ	200,235	200,235

TY 2019 Investments - Other Schedule

Name: EM BURGER MEMORIAL FOUNDATION

EIN: 23-7416312

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS & STOCKS- EJ	FMV	1,808,718	1,808,718
STOCKS, OPTIONS, AND ETFS- WF	FMV	334,456	334,456

TY 2019 Other Expenses Schedule**Name:** EM BURGER MEMORIAL FOUNDATION**EIN:** 23-7416312**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ANNUAL REGISTRATION FEES	10			10
SUPPLIES (CHECKS)	25			25

TY 2019 Other Increases Schedule

Name: EM BURGER MEMORIAL FOUNDATION
EIN: 23-7416312

Description	Amount
UNREALIZED GAIN ON INVEST.	279,543

TY 2019 Other Liabilities Schedule**Name:** EM BURGER MEMORIAL FOUNDATION**EIN:** 23-7416312

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCISE TAXES PAYABLE		321

TY 2019 Other Professional Fees Schedule

Name: EM BURGER MEMORIAL FOUNDATION

EIN: 23-7416312

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVISORY FEES- WELLS FARGO	3,037	3,037	3,037	
ADVISORY FEES- EJ	17,881	17,881	17,881	

TY 2019 Taxes Schedule**Name:** EM BURGER MEMORIAL FOUNDATION**EIN:** 23-7416312

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	1,521			
FOREIGN TAXES-WELLS FARGO	135	135	135	
FOREIGN TAXES- EJ-3	552	552	552	

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2019
Name of the organization EM BURGER MEMORIAL FOUNDATION		Employer identification number 23-7416312

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 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

- ☒ 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 other 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 33¹/₃% 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 totaling \$5,000 or more during the year ▶ \$ _____

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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
EM BURGER MEMORIAL FOUNDATIONEmployer identification number
23-7416312**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	BURGER'S OZARK COUNTRY CURED HAMS 32819 HWY 87 CALIFORNIA, MO 65018	\$ 150,000	☒ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization EM BURGER MEMORIAL FOUNDATION	Employer identification number 23-7416312
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(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
-		\$	
(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
-		\$	

Name of organization EM BURGER MEMORIAL FOUNDATION	Employer identification number 23-7416312
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Part III

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 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 information once. See instructions.) ▶ \$ _____**

Use duplicate copies of Part III if additional space is needed.

(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 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 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 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