Form 990-PF

Return of Private Foundation

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

9491030 04623 1 OMB No 1545-0047

2019

Open to Public Inspection

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 Go to www.irs.gov/Form990PF for instructions and the latest information.

Fo	r calen	dar year 2019 or tax year beginning	, and	nd ending				
	ne of fou			-		r identification number	,	
ĮΗ	ROCK	MORTON RISER FOUNDATION, INC						
		street (or PO box number if mail is not delivered to street address)	Roor	n/suite		48-1103316		
	BOX				B Telephone	e number (see instruction	ns)	
City	or town	, state or province, country, and ZIP or foreign postal code						
PIT	TSBU	RG KS	66762-06	10		(620) 231-465	50	
For	eign cou	ntry name Foreign province/state/county	Foreign post	tal code	C If exempt	tion application is pendin	ig, check here 🕨 🔲	
							_'	
G	Check	call that apply 🔲 Initial return 🔲 Initial return	of a former public of	charity	D 1. Foreig	ın organizations, check h	nere ►	
		☐ Final return ☐ Amended ret	urn		2. Foreig	ın organizations meeting	the 85% test,	
		Address change Name chang		1.	check	here and attach comput	ation ▶ 📗	
Н	Check	type of organization 💢 Section 501(c)(3) exempt pri	vate foundation 🌈	4		foundation status was te	erminated under	
	Section	on 4947(a)(1) nonexempt charitable trust 🔲 Other taxa	able private founda	ation	Section St	07(b)(1)(A), check here		
1	Fair m	narket value of all assets at J Accounting method	X Cash A	Accrual	E If the four	ndation is in a 60-month	to smunotion	
	end of	f year (from Part II, col (c), Other (specify)				ndation is in a 60-month ction 507(b)(1)(B), check		
	line 16	5) ▶ \$ 3,303,194 (Part I, column (d), must b	e on cash basis)				_	
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily	expenses per		t investment icome	(c) Adjusted net income	for charitable purposes	
		equal the amounts in column (a) (see instructions))	books	] "			(cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)		711-		1.01.1.侧下排	In the second	
	2	Check ►☐ if the foundation is not required to attach Sch B	图 "是"	11.6	有用:种小体	新的 。 扩散上班		
	3	Interest on savings and temporary cash investments	42		42	42	电管 1. 事: 二	
	4	Dividends and interest from securities	67,892		67,892	67,892		
	5a	Gross rents						
re	b	Net rental income or (loss)		J. F. 17			W.	
	6a	Net gain or (loss) from sale of assets not on line 10	163,989		: 下江		300C:	
e	h	Gross sales price for all assets on line 6a 539,681	<u>"]</u>	£ . !!	المراث براً.		the state of	
Revenue	7	Capital gain net income (from Part IV, line 2)			163,989		1,00	
œ	8	Net short-term capital gain			4 + 4 + 1 1 1		11 14 H 4 18	
	9	Income modifications		1.5				
	10a	Gross sales less returns and allowances		· · · · · · · · · · · · · · · · · · ·	<del></del>	CHA	10.BX:	
	b	Less Cost of goods sold	1. 12 L - 1. 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1/2		海岸 精工	7 1 2 1 3 1 3	
	C	Gross profit or (loss) (attach schedule)		L.P.	2 2 1 142		11 11 11	
	11	Other income (attach schedule)	904.000	ļ	004.000	07.004	1. t. 1	
	12	Total. Add lines 1 through 11	231,923		231,923		5.326 872	
enses	13	Compensation of officers, directors, trustees, etc	9,000	-	9,000	9,000	<b> </b>	
SU	14 15	Other employee salaries and wages		<del>                                     </del>				
	16a	Pension plans, employee benefits Legal fees (attach schedule)	7,450	<u> </u>	7,450	7,450		
ũ	b	Accounting fees (attach schedule)	1,450	<del> </del>	<i>1</i> , <del>4</del> 00	7,450		
\ Ve	C	Other professional fees (attach schedule)			· · · ·		<del></del>	
ati	17	Interest	<del></del>	<del> </del>		<del></del>		
Operating and Administrative Exp	18	Taxes (attach schedule) (see instructions)	21,822	<u> </u>	21,822	21,822		
Ξ	19	Depreciation (attach schedule) and depletion	21,022	<b>†</b>	21,022	21,022	The Fifth of the Court	
Ē	20	Occupancy		<u> </u>			y acressing the	
Ac	21	Travel, conferences, and meetings	647	1	647	647		
פַ	22	Printing and publications	, , , , , , , , , , , , , , , , , , ,		<del>-</del>			
<u>a</u>	23	Other expenses (attach schedule)	40		40	40		
<u>n</u>	24	Total operating and administrative expenses.	, ,					
ati		Add lines 13 through 23	38,959		38,959	38,959	0	
e.	25	Contributions, gifts, grants paid			14.4.11			
ō	26	Total expenses and disbursements. Add lines 24 and 25	190,214	1	38,959	38,959	151,255	
<u> </u>	27	Subtract line 26 from line 12	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N Too			21.11	
•	а	Excess of revenue over expenses and disbursements	41,709	MA.				
	b	Net investment income (if negative, enter -0-)	_1		192,964		江.作品	
	, c	Adjusted net income (if negative enter -0-)			7 3 - 1 110		िल जिल्हा	

Pa	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	Ε	nd of	year	
			should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Ma	arket Value
	1	Cash—non-interest	bearing	15,27	6 48,	723		48,723
	2	Savings and tempor	rary cash investments		· ·			
	3	Accounts receivable	· •			1,1	41 1 1 1	
		Less allowance for	doubtful accounts ▶			П		
	4	Pledges recéiváblé		FEW. N. TH		TI C		1 1
		•	doubtful accounts ▶					
	5	Grants receivable				$\neg$		
	6	Receivables due fro	m officers, directors, trustees, and other			$\neg$		
			(attach schedule) (see instructions)					
	7	· ·	eceivable (attach schedule)	THE PERSON	1 11 1 1 1 1		1,	
		Less. allowance for dou	, , , , , , , , , , , , , , , , , , , ,					
ts	8	Inventories for sale	or use					<del></del>
Assets	9		nd deferred charges	1,70	10 2.3	300		2,300
As	10a	· · · · · · · · · · · · · · · · · · ·	state government obligations (attach schedule)	.,,,,				
-	b		rate stock (attach schedule)	1,615,83	8 1,621,8	821		3,252,171
	C		rate bonds (attach schedule)	.,,,,,,,,	1,14=1,14	=-		<u> </u>
	11	•	dings, and equipment basis		11:41	71	+	<del></del>
			reciation (attach schedule)					
	12	Investments—morto						
	13	Investments—other						
	14	Land, buildings, and eq		117 137- 75	7 7 7 7 7 7 7 7	18 7 8 8 10 7 8 8		
		-	eciation (attach schedule)					
	15	Other assets (descr	, , , , , , , , , , , , , , , , , , , ,					
	16	•	completed by all filers—see the					
		instructions Also, se	· · · · · · · · · · · · · · · · · · ·	1,632,81	4 1,672,8	344	3	3,303,194
	17	Accounts payable a	nd accrued expenses				1	م ميد ه
S	18	Grants payable				$\Box$	1000	1
tie	19	Deferred revenue						1, "
Liabilities	20	Loans from officers, d	rectors, trustees, and other disqualified persons			Τ,		4
ial	21	Mortgages and other	r notes payable (attach schedule)			í	137 4	. 1/2
_	22	Other liabilities (des	cribe				1. 1. 1	, et :
	23	Total liabilities (add	d lines 17 through 22)		0	0 1	4 1 4	م الروز
S		Foundations that f	ollow FASB ASC 958, check here			1	17 1 1	7
ŭ		and complete lines	24, 25, 29, and 30.					
Balances	24	Net assets without of	lonor restrictions				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1 -
	25	Net assets with don	or restrictions			<u> </u>	1 1 1	
Fund			not follow FASB ASC 958, check here 🕨 🗵				ve i	
Fu		and complete lines	26 through 30.			- 4		
ō	26		orincipal, or current funds	1,632,81	4 1,672,8	344 .:	<u>, ', ')</u>	
ts	27	Paid-in or capital su	rplus, or land, bldg , and equipment fund				1)	
se	28		cumulated income, endowment, or other funds					-11 1
Net Assets or	29		fund balances (see instructions)	1,632,81	4 1,672,8	344 '	17	
et	30		net assets/fund balances (see				ET ' T	´ ,*¹ `
		instructions)		1,632,81	4 1,672,8	<u> 344 .</u>	<u>:1 + i                                  </u>	21
	rt III		anges in Net Assets or Fund Balances					
1			lances at beginning of year—Part II, column (a)	, line 29 (must agre				
		•	d on prior year's return)		}	1	1	1,632,814
2		amount from Part I, I			<u> </u>	2		41,709
3		r increases not includ	ed in line 2 (itemize)			3		
		ines 1, 2, and 3		NITIONS SCIENCE:	<u> </u>	4	1	1,674,523
5		eases not included in				5		1,679
6	iotal	net assets or fund ba	lances at end of year (line 4 minus line 5)—Part	t II, column (b), line	29	6	1	1,672,844

Part	a) List and describe the kii	d Losses for Tax on Investm nd(s) of property sold (for example, real esta use, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	SEE ATTACHED SCHEDU			D-Donation P	VARIOUS	VARIUOS
b b	SEE AT TACHED SCHEDO	JCC		F	VARIOUS	VARIOUS
C						
d	-					
е						
	(e) Gross sales price (f) Depreciation allowed (or allowable)			r other basis ense of sale		in or (loss) (f) minus (g))
<u>a</u>	539,681			375,692		163,989
<u>b</u>						
<u>c</u> d						
e						
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	n on 12/31/69	(I) Gains (Co	ol (h) gain minus
	(ı) F M ∨ as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) l (j), ıf any	col (k), but no	ot less than -0-) or from col (h))
а						163,989
b						
<u> </u>						
<u>d</u>						<del></del>
e	<u> </u>	( If gain a	also enter in Pa	rt Line 7 1		
2	Capital gain net income or	(net canital loss) 1	enter -0- in Pa	<b> </b>	2	163,989
3	Net short-term capital gain	or (loss) as defined in sections 12		,		
	· · · · · · · · · · · · · · · · · · ·	line 8, column (c) See instruction		er -0- ın \		
	Part I, line 8			ſ	3	0
Part		<u>ler Section 4940(e) for Redu</u>				
If sect	tion 4940(d)(2) applies, leav the foundation liable for the s	vate foundations subject to the sec re this part blank section 4942 tax on the distributabualify under section 4940(e). Do no	ele amount of ar	ny year in the base		X Yes No
1	<del></del>	unt in each column for each year,		<del></del>	ng anv entries	
<del>•</del>	(a) Base period years	(b)		(c)	Di	(d) stribution ratio
Cale	endar year (or tax year beginning in)			of noncharitable-use as	col (b)	divided by col (c))
	2018		,089		7,903	0 023475
	2017	· · · · · · · · · · · · · · · · · · ·	,052	2,68		0 018295
	2016 2015		,000 ,959	2,36	1,737	0 019056 0 022531
	2014		,500		5,297	0 020437
	2011		,000		,	0 020 101
2	Total of line 1, column (d)				2	0 103794
3	Average distribution ratio f	or the 5-year base period—divide	the total on line	2 by 5 0, or by		·
	the number of years the fo	undation has been in existence if	less than 5 yea	rs	3	0 020759
4	Enter the net value of nonc	charitable-use assets for 2019 fror	m Part X, line 5		4	
5	Multiply line 4 by line 3				5	
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)			6	0
7	Add lines 5 and 6				7	0
8	Enter qualifying distribution If line 8 is equal to or great	ns from Part XII, line 4 ter than line 7, check the box in Pa	art VI, line 1b, a	nd complete that	8 part using a 1% ta	0 x rate See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	uctions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	4.
	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	1 3,859
_	here  and enter 1% of Part I, line 27b  All other demands foundations enter 3% of line 37b. Event foreign expensions, enter 4% of	\$ 1
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 0
3	Add lines 1 and 2	<b>3</b> 3,859
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-	<b>5</b> 3,859
6	Credits/Payments	
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 2,300	
b	Exempt foreign organizations—tax withheld at source 6b	
С	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 2,300
8	Enter any penalty for underpayment of estimated tax. Check here	8
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9 1,559
10		10 0 11 0
11 Post		11 0
	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
1a	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	14 / ^
U	Instructions for the definition	1b
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials	
	published or distributed by the foundation in connection with the activities	
С	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
	(1) On the foundation ► \$ (2) On foundation managers ► \$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	ed
	on foundation managers > \$	11
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
•	If "Yes," attach the statement required by General Instruction T  Are the requirements of costion 50%(a) (relating to sections 4941 through 4945) satisfied either	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>	
	conflict with the state law remain in the governing instrument?	6 X
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	7 X
, 8а	Enter the states to which the foundation reports or with which it is registered. See instructions	1, 1 to 1
J.	KS	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	al
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	784 - 31 - 47 - 12 - 1
_	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	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	eır
	names and addresses	10 X
		Form 990-PF (2010)

Part	VII-A Statements Regarding Activities (continued)			
		1	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	11	<u> </u>	X
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		_ X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
4.4	Website address ► N/A  The books are in care of ► WHEELER & MITCHELSON, CHARTERED Telephone no ► (620) 23	1 465		
14	The books are in care of ► WHEELER & MITCHELSON, CHARTERED Telephone no ► (620) 23  Located at ► PO BOX 610 PITTSBURG KS  ZIP+4 ► 66762-0		<u>.</u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here	<u> </u>		<b>▶</b> [
10	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 authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the	, ,		
	name of the foreign country	<u> </u>	,	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	letter i		F
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)	1	٠,	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		,	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	,	,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1	;	<u> </u>
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ř.	ی ا	1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		9	ŀ
	the benefit or use of a disqualified person)?	[', i	1	ļ.
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			<u> </u>
	foundation agreed to make a grant to or to employ the official for a period after	:	- 1	,
	termination of government service, if terminating within 90 days )	í.	•	,
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in	<u> </u>		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here		a l	, ,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	الشا		لئينا
2	were not corrected before the first day of the tax year beginning in 2019?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c	- <del>-</del>	, X
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	i 
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	1	1	† -
_	6d and 6e) for tax year(s) beginning before 2019?	1	‡	,
	If "Yes," list the years ▶ 20 , 20 , 20	<b>[</b> ]. }	4	ľ l
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	ı		
	(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	- 1	_X_
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		- 1	
Ja	at any time during the year?  Yes X 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	R 1   1	f	
	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 )	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	- 1.5-	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ليبا		لــــــــا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х

	VILE Statements Regarding Activiti	<b></b>	111011 1 01111	7120	nay be in	- quii c	4 100,,,,,	iucuj			
5a	During the year, did the foundation pay or incur (1) Carry on propaganda, or otherwise attempt	any amou	int to				Yes			Yes No	- -
	(2) Influence the outcome of any specific public directly or indirectly, any voter registration di		see section 4	955), or	to carry on	١,		X No			
	(3) Provide a grant to an individual for travel, sti		ner sımılar pur	noses?			Yes	X No		4	
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions	•	-	•		ın	☐ Yes	_			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to			terary, o	or education	nal	Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the	e transac	tions fail to qu	-		-	describe				
	Regulations section 53 4945 or in a current noti	-	-			truction	IS		5b	N/A	
С	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	e foundat	on claim exer				☐ Yes	<ul><li>▶ □</li><li>No</li></ul>			
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any on a personal benefit contract?				pay premiur	ms	☐ Yes	X No			
b	Did the foundation, during the year, pay premiur	ne directi	v or indirectly	on a n	erconal her	efit cor		<u> </u>	6b	X	
_	If "Yes" to 6b, file Form 8870	ient coi				î					
7a b											
8	Is the foundation subject to the section 4960 tax remuneration or excess parachute payment(s) of	luring the	yeàr <sup>⁄</sup> ?		· · ·			X No			
Part	VIII Information About Officers, Dire	ctors, T	rustees, Fo	undati	ion Manag	gers, l	lighly P	aid En	ployee	s,	
1	and Contractors List all officers, directors, trustees, and found	dation m	nagere and	their co	mponeatio	n S00	inetructi	one	<del>-</del>		_
	List all Officers, directors, trustees, and four	aauvii iii	illayers allu		niiveiisauv	nı. See	าเมอเเนเน				
		(b) Tit	e, and average		mpensation		Contribution		(a) Evans		,
DIAMO	(a) Name and address	(b) Tit hou devo	e, and average irs per week ted to position	(c) Co (If r en		(d) empl		s to plans	(e) Expension	se accoun lowances	t,
	(a) Name and address	(b) Tit hot devo	e, and average irs per week ted to position S/DIRECTOR	(c) Co (If r en	mpensation not paid, nter -0-)	(d) empl	Contribution oyee benefit	s to plans			t,
P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032	(b) Tit hou devo TREA VARIO	e, and average irs per week ted to position S/DIRECTOR OUS	(c) Co (If r en	mpensation not paid,	(d) empl	Contribution oyee benefit	s to plans			t,
P O E JOHN	(a) Name and address HTA_NELSON BOX 329 GARNETT, KS 66032 H_MITCHELSON	(b) Tit hor devo TREA VARIO	e, and average urs per week ted to position S/DIRECTOR OUS /DIRECTOR	(c) Co (If r en	mpensation not paid, iter -0-)	(d) empl	Contribution oyee benefit	s to plans			t,
POE JOHN POE	(a) Name and address HTA_NELSON BOX 329 GARNETT, KS 66032 H_MITCHELSON BOX 610 PITTSBURG, KS 66762	(b) Tit hot devo TREA VARIO PRES VARIO	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR	(c) Co (If r en	mpensation not paid, nter -0-)	(d) empl	Contribution oyee benefit	s to plans			t,
POE JOHN POE KEVIN	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 I F MITCHELSON	(b) Tit hot devo TREA VARIO PRES VARIO	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DUS	(c) Co (If r en	mpensation not paid, iter -0-)	(d) empl	Contribution oyee benefit	s to plans			t,
POE JOHN POE KEVIN	(a) Name and address HTA_NELSON BOX 329 GARNETT, KS 66032 H_MITCHELSON BOX 610 PITTSBURG, KS 66762	(b) Tit hot devo  TREA VARIO PRES VARIO SEC/I	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DUS	(c) Co (If r en	mpensation not paid, iter -0-) 3,000	(d) empl	Contribution oyee benefit	s to plans			t,
POE JOHN POE KEVIN	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 I F MITCHELSON	(b) Tit hold devo VARIO PRES VARIO VARIO	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS	(c) Co (If r en	3,000 3,000 3,000	(d) empl and det	Contribution oyee benefit ferred compe	s to plans ensation	other all	owances	t,
POE JOHN POE KEVIN POE	(a) Name and address HTA_NELSON BOX 329 GARNETT, KS 66032 H_MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee	(b) Tit hold devo devo VARIC VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS	(c) Co (lif r en	3,000 3,000 3,000	(d) empl and det	Contribution oyee benefit ferred compe	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances	
POE JOHN POE KEVIN POE	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those ind (b) Title, and a hours per week	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	
P O E JOHN P O E KEVIN P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those ind (b) Title, and a hours per week	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	
P O E JOHN P O E KEVIN P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those ind (b) Title, and a hours per week	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	
P O E JOHN P O E KEVIN P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those inc	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	
P O E JOHN P O E KEVIN P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those inc	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	
P O E JOHN P O E KEVIN P O E	(a) Name and address HTA NELSON BOX 329 GARNETT, KS 66032 H MITCHELSON BOX 610 PITTSBURG, KS 66762 IF MITCHELSON BOX 610 PITTSBURG, KS 66762 Compensation of five highest-paid employee "NONE."	(b) Tit hold devo devo VARIC VARIC VARIC SEC/E VARIC S (other t	e, and average urs per week ted to position S/DIRECTOR DUS /DIRECTOR DUS DIRECTOR DUS han those inc	(c) Co (lif r en	3,000 3,000 3,000 on line 1—	(d) empl and det	contribution oyee benefit ferred compessions:  (d) Contribute employee plans and of the contribute of	s to plans ensation  s). If no utions to benefit deferred	ne, ente	lowances r	

Form 990-PF (2019)

Pş	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empartment and Contractors (continued)	ployees,
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
NO	NE NE	<del></del>
		<del></del>
Tot	al number of others receiving over \$50,000 for professional services	
	art IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
•	<u> </u>	
2		
3		
4		
	Summary of Program-Related Investments (see instructions)	Amount
1	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  N/A	Amount
•	N/A	
2		
_		
A	Other program-related investments. See instructions	
3		
Tota	al. Add lines 1 through 3	0

Form **990-PF** (2019)

Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a Average monthly fair market value of securities 3,020,005 1b Average of monthly cash balances 37,193 1c c Fair market value of all other assets (see instructions) 1d 3,057,198 d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 2 2 Acquisition indebtedness applicable to line 1 assets 3,057,198 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2 % of line 3 (for greater amount, see 45.858 instructions) 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 3,011,340 6 Minimum investment return. Enter 5% of line 5 150.567 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 ) 1 150,567 Minimum investment return from Part X, line 6 3.859 Tax on investment income for 2019 from Part VI, line 5 2a Income tax for 2019 (This does not include the tax from Part VI) 2b 2c 3,859 Add lines 2a and 2b 3 Distributable amount before adjustments Subtract line 2c from line 1 146,708 4 Recoveries of amounts treated as qualifying distributions 4 5 146,708 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 7 146,708 line 1 Part XII Qualifying Distributions (see instructions) DIE S Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 151,255 1b Program-related investments—total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 强约 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 4 151,255 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 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 6 151,255 Adjusted qualifying distributions. Subtract line 5 from line 4

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

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

Form **990-PF** (2019)

rajru	Ondistributed income (see instructions)		т		
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,				146 700
2	line 7		<del> </del>		146,708
2	Undistributed income, if any, as of the end of 2019		'	140,673	
a	Enter amount for 2018 only		CE 222		
, b	Total for prior years 20 15 , 20 16 , 20 17		65,333		
3	Excess distributions carryover, if any, to 2019			,	
a	From 2014	•		ľ	
b	From 2015				
C	From 2016				
ď	From 2017		'		
C	From 2018		. 1		<del></del>
f	Total of lines 3a through e	0	-	1	
4	Qualifying distributions for 2019 from Part XII,		'		
_	line 4 ▶ \$ 151,255			140 673	
a	Applied to 2018, but not more than line 2a Applied to undistributed income of prior years			140,673	
D	(Election required—see instructions)			·	
_	· · · · · · · · · · · · · · · · · · ·				
С	Treated as distributions out of corpus (Election				
	required—see instructions) Applied to 2019 distributable amount		<del> </del>	<del>   </del>	10,582
	Remaining amount distributed out of corpus		<del> </del>		10,362
е 5	Excess distributions carryover applied to 2019				· · · · · · · · · · · · · · · · · · ·
3	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
6	Enter the net total of each column as			,	, , , , , , , , , , , , , , , , , , ,
·	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract				· · · · · · · · · · · · · · · · · · ·
-	line 4b from line 2b		65,333		
С	Enter the amount of prior years' undistributed			<del></del>	
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)	•			· :
	tax has been previously assessed		65,333	,	,
d	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2018 Subtract line		3		, , , , , , , , , , , , , , , , , , , ,
	4a from line 2a Taxable amount—see		1		
	instructions	,	<u> </u>	o	
ť	Undistributed income for 2019 Subtract lines	,			•
	4d and 5 from line 1 This amount must be			•	
	distributed in 2020	· · · · · · · · · · · · · · · · · · ·			136,126
7	Amounts treated as distributions out of corpus		1 1		
	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.		 	,	
	Şubtract lines 7 and 8 from line 6a		1		
10	Analysis of line 9				
а	Excess from 2015	1	,		
b	Excess from 2016	1	1	h l	
С	Excess from 2017	'	1	1 1	
d	Excess from 2018				1
е	Excess from 2019			,	

b The form in which applications should be submitted and information and materials they should include c Any submission deadlines Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information (continued)

	Grants and Contributions Paid During			ture Payment	Τ
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
	Paid during the year ATTACHED				151,255
	Total			▶ 3	a 151,255
SEE	Approved for future payment ATTACHED				60,000
	Total	<u> </u>	1	▶ 3	<b>b</b> 60,000

orm	990-PF (2019)	THROCKMORTON RISER FO	UNDATION, INC			48-11	03316 Page <b>12</b>
_		lysis of Income-Producing A	ctivities				
Ente	er gross amounts u	nless otherwise indicated	(a)	(b)	Excluded by sect  (c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	a	revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
2 3	d e f g Fees and contr Membership dues Interest on savings	racts from government agencies and assessments and temporary cash investments					42
4 5 6 7 8 9 10	Net rental income or (loss) from real estate  a Debt-financed property  b Not debt-financed property  Net rental income or (loss) from personal property  Other investment income  Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events  Gross profit or (loss) from sales of inventory			(h)			67,892
	c d e Subtotal Add colu	umns (b), (d), and (e)		0		0	<del></del>
Se	e worksheet in line	<ol> <li>columns (b), (d), and (e)</li> <li>instructions to verify calculation</li> <li>tionship of Activities to the Activities</li> </ol>		ent of Exempt	t Purposes	13	67,934
_	accompli  & 4 INCOME PROVIDE C	pelow how each activity for which incollishment of the foundation's exempt pure RODUCING ASSETS THAT GO TO COLLEGE EDUCATIONAL SCHOL	rposes (other than D FUND THE CH ARSHIPS TO HI	by providing fund ARITABLE PUR GH SCHOOL GI	s for such purpos POSES OF TH	es) (See instruction	ons ) , TO
_							

Page **13** 

Preparer

**Use Only** 

Firm's name WHEELER & MITCHELSON CHTD

Firm's address ▶ P O BOX 610, PITTSBURG, KS 66762

Part	XVII	Information Exempt Org	•	insfers to a	nd Trans	sactions	and Re	elationships Wi	th Nonchari	table		
1	Did th	<del> </del>	<del></del>	engage in ar	nv of the fo	ollowing w	ith any ot	her organization d	escribed		Yes	No
•		-	er than section 501		-	_	-	_				
		ızatıons?		, .	ŕ			•				
а	-		orting foundation	to a noncharit	table exen	npt organi	zation of					
	(1) Ca	•	J							1a(1)		Х
		her assets								1a(2)		Х
b		transactions										1
	(1) Sa	ales of assets to	a noncharitable ex	xempt organiz	ation					1b(1)		Х
			ets from a nonchar	-		tion				1b(2)		Х
	(3) Re	ental of facilities,	equipment, or oth	er assets						1b(3)		Х
	(4) R	eimbursement ar	rrangements							1b(4)		X
	(5) Lo	ans or loan gua	rantees							1b(5)		X
	(6) Pe	erformance of se	rvices or members	ship or fundra	ising solic	atations				1b(6)		Х
С	Sharıı	ng of facilities, ed	quipment, mailing	lists, other as	sets, or pa	aid employ	/ees			1c		Х
d								hould always show				
								ndation received les				
(-)		b) Amount involved	<del></del>	onchantable exer		· · · · · · · · · · · · · · · · · · ·	<u>-</u>	ods, other assets, or			20000	
(a) Line	ino (	b) Amount involved	(c) Name of n	onchantable exer	npi organiza		(a) Des	cription of transfers, tra	iisaciioris, ariu siii	anny anai	igemen	
										<del></del>		
					··········							
		<del></del>		•					-	•		
		-										
					•							
2a b	descr	ibed in section 5	ctly or indirectly aff 01(c) (other than stantion following schedule	section 501(c)				exempt organization	ons	Yes	ΧN	0
		(a) Name of organ			(b) Type of o	rganization		(c) D	escription of relation	nship		
									<del></del>			
	Unger	penalties of perjury, I dec	clare that I have examined the ion of pregarer (other than to	is return, including ac	ccompanying si	chedules and si	atements, and	to the best of my knowledge	e and belief, it is true,			
Sign	correct	, and complete Declarati	ion of pregater tother than ta	axpayer) is based oil	_	25				RS discuss reparer sho		
Here	<u> </u>	- Jarry.	V varek		7.50/5		ESIDENT		See instru		Yes	
	Sign	ature of officer or trus			ate)	Title		Date	<b></b>	PTIN		
Paid		Print/Type preparer		Pregrater !	s signatur	111-4	T. I	ar/18/www.	Check if	l .	2004	
D=====		KEVIN' MITCH	IELSON	<i> </i>	m ×	vuu	ww-		self-employed	P01270	1337	

(620) 231-4650

Firm's EIN ► 48-0990233

Phone no

Part VII-A, Line 8b (990-PF) - Copy of Form 990-PF to Attorney General									
FILED ANNUAL REPORT WITH KANSAS SECRETARY OF STATE									
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### THROCKMORTON-RISER FOUNDATION, INC. EIN 48-1103316 2019

# Schedule 990-PF

#### Part XV

# Grants and Contributions Paid During the Year or Approved for Future Payment

a)	Paid During the Year	Relationship	<u>Purpose</u>	<u>Amount</u>
	Melissa A. Kropf 1986 Xeric Road NE Westphalia, Kansas 66039	None	College Scholarship	1,500.00
	Eliza J. Sibley 819 West 7th Street Garnett, Kansas 66032	None	College Scholarship	1,500.00
	Bailee R. Wilson 1 Links Drive Garnett, Kansas 66032	None	College Scholarship	1,500.00
	Colton Strickler 10527 SW Louisiana Road Colony, Kansas 66015	None	College Scholarship	3,000.00
	Evan W. Godderz 22195 SW 300 Rd Westphalia, Kansas 66039	None	College Scholarship	3,000.00
	Maci Rockers 27513 NW 2350 Road Greely, Kansas 66033	None	College Scholarship .	3,000.00
	Zane Phelps 3368 Lone Star Road Osawatomie, Kansas 66064	None	College Scholarship	3,000.00
	McKenzi Huettenmueller 312 North Cleveland P.O. Box 65 Garnett, Kansas 66032	None	College Scholarship	3,000.00

Paid During the Year	Relationship	<u>Purpose</u>	Amount
Laurel Godderz 22195 Southwest 300 Road Colony, Kansas 66015	None	College Scholarship	3,000.00
Karlee Hammond 227 County Rd. Colony, Kansas 66015	None	College Scholarship	3,000.00
Adam Kropf 1986 Xeric Rd. Westphalia, Kansas 66093	None	College Scholarship	3,000.00
Katie Lybarger 21517 NW 1650 Rd. Garnett, Kansas 66032	None	College Scholarship	3,000.00
Jasmine White 32809 NE Norton Rd. Garnett, Kansas 66032	None	College Scholarship	3,000.00
Makayla Jones 612 East 5th Street Colony, Kansas 66015	None	College Scholarship	3,000.00
Austin Hendrix 611 East 5th Street Colony, Kansas 66015	None	College Scholarship	3,000.00
Katelyn Phelps 33668 Lone Star Road Osawatomie, Kansas 66064	None	College Scholarship	3,000.00
Gabrielle Spring 313 Madison Avenue Garnett, Kansas 66032	None	College Scholarship .	3,000.00
Shylie Scheckel 29824 NW Jackson Road Garnett, Kansas 66032	None	College Scholarship	3,000.00
Isaiah Levy c/o Janay Blome Anderson County High Schoo 1100 W. Highway 31 Garnett, Kansas 66032	None	College Scholarship	3,000.00

Paid During the Year	Relations	hip Purpose	Amount
Caleb Stephens 26780 SE 500 <sup>th</sup> Road Kincaid, Kansas 66039	None	College Scholarship	1,500.00
Jenna C. Schmitt 21808 NW Highway 31 Garnett, Kansas 66032	None	College Scholarship	1,500.00
Corey Brown 618 East 4th Avenue Garnett, Kansas 66032	None	College Scholarship	1,500.00
Paige Rupp 7 Links Drive Garnett, Kansas 66032	None	College Scholarship	1,500.00
William M. Mechnig 325 East Monroe Garnett, Kansas 66032	None	College Scholarship	1,500.00
Camryn Strickler 10527 SW Louisiana Road Colony, Kansas 66015	None	College Scholarship	1,500.00
Crest High School P.O. Box 325 Colony, Kansas 66015	None	Vocational Trades Programs	6,708.28
Crest High School P.O. Box 325 Colony, Kansas 66015	None	Softball Field Project	14,000.00
Hope and Love of the Laity Fund P.O. Box 236 Garnett, Kansas 66032	None	New Hall Building St. Boniface Catholic Church Scipio, Kansas	25,000.00
Garnett USD 365 Project Lead the Way P.O. Box 328 Garnet, Kansas 66032	None	E-Sports Technology Project	29,046.76
Garnet Senior Citizens Association, Inc. 128 W 5 <sup>th</sup> Avenue Garnett, Kansas 66032	None	Senior Center Renovation	15,000.00
		Total	\$ <u>151,255.04</u>

b)	Approved for future payment	Relationship	<u>Purpose</u>	Amount
	Colton Strickler (address above)	None	College Scholarship	1,500.00
	Evan W. Godderz (address above)	None	College Scholarship	1,500.00
	Maci Rockers (address above)	None	College Scholarship	1,500.00
	Zane Phelps (address above)	None	College Scholarship	1,500.00
	Laurel Godderz (address above)	None	College Scholarship	3,000.00
	Karlee Hammond (address above)	None	College Scholarship	3,000.00
	Adam Kropf (address above)	None	College Scholarship	3,000.00
	Katie Lybarger (address above)	None	College Scholarship	3,000.00
	Jasmine White (address above)	None	College Scholarship	3,000.00
	Makayla Jones (address above)	None	College Scholarship	3,000.00
	Austin Hendrix (address above)	None	College Scholarship	3,000.00
	Katelyn Phelps (address above)	None	College Scholarship	3,000.00
	Gabrielle Spring (address above)	None	College Scholarship	3,000.00
	Isaiah Levy (address above)	None	College Scholarship	3,000.00
	Jenna C. Schmitt (address above)	None	College Scholarship	3,000.00
	Corey Brown (address above)	None	College Scholarship	3,000.00

Approved for future payment	Relationship	Purpose	Amount
Paige Rupp (address above)	None	College Scholarship	3,000.00
William M. Mechnig (address above)	None	College Scholarship	3,000.00
Camryn Strickler (address above)	None	College Scholarship	3,000.00
Brookelyn Schettler 305 North Olive Street Garnett, Kansas 66032	None	College Scholarship	1,500.00
Nick Lybarger 21517 NW 1650 Road Garnett, Kansas 66032	None	College Scholarship	1,500.00
Becky Kropf 1986 Xeric Road Westphalia, Kansas 66093	None	College Scholarship	1,500.00
Joseph Feuerborn 33012 North Highway 59 Richmond, Kansas 66080	None	College Scholarship	1,500.00
Elka Billings 13755 SW Missouri Road Kincaid, Kansas 66039	None	College Scholarship	1,500.00
Gregory Hardwick 10868 SW Delaware Road Colony, Kansas 66015	None	College Scholarship	1,500.00
•		Total	\$ <u>60,000.00</u>

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