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

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

FOI	calen	idar year 2019 or tax year beginning		, and ending		
Na	ime of	foundation			A Employer identification	n number
_(	'AT	HERINE E ALLIN FOUNDATIO	ON		48-1224316	
Nu	mber a	nd street (or P O box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
_ 2	290	2 W 67TH TERRACE			(913) 236-	8082
	-	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	pending, check here
	HA	WNEE MISSION, KS 66208				
G	Check	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return		2. Foreign organizations me	eeting the 85% test.
		Address change	Name change		Foreign organizations me check here and attach co	omputation
н_	_	type of organization: X Section 501(c)(3) ex		L	E If private foundation sta	
<u> </u>		action 4947(a)(1) nonexempt charitable trust	Other taxable private foundating method: X Cash		under section 507(b)(1	~ ~
		arket value of all assets at end of year   J Accounting Arket II, col. (c), line 16)	ther (specify)	Accrual	F If the foundation is in a	
		251,046. (Part I, colur		<u>s )</u>	under section 507(b)(1	)(B), check here
_	art I		T		(a) Advicted not	(d) Disbursements
٠	<u> • 1</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	25,000.		N/A	(Same Seed Only)
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	40.	40.		STATEMENT 1
	4	Dividends and interest from securities	6,324.	6,321.		STATEMENT 2
_	5a	Gross rents				
2021	Ь	Net rental income or (loss)				
$\nabla$	6a	Net gain or (loss) from sale of assets not on line 10	157.			
. 1 2 y	Ь	Gross sales price for all assets on line 6a 16,043.				
	7	Capital gain net income (from Part IV. line 2)	FIVER	157.	•	
	8	Net short-term capital gail	EIVE			
	9	Income modifications	181			, , , , , , , , , , , , , , , , , , , ,
	10a	Gross sales less returns and allowances	1 4 2020 1001			
Ž	b	Less Cost of goods sold	اعالمس.			<u></u>
SCANNED	c	Gross profit or (loss)	DEN, UT			
ું ડ્ર		1				
ഗ	12	Total. Add lines 1 through 11	31,521.	6,518.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	_	Pension plans, employee benefits		···		
Š	16a	Legal fees Accounting fees STMT 3	1,425.	0.		1,425.
Ş		Other professional fees	1,423.			1,423.
ú	17 17	Interest				<u> </u>
,	18	Taxes STMT 4	136.	62.	<u></u>	0.
4	19	Depreciation and depletion	130.	02.		,
,	20	Occupancy	-			
3	17 18 19 21 22 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25	Travel, conferences, and meetings				
Ì	22	Printing and publications	1	<del></del>		
č	23	Other expenses			<del></del>	
<u> </u>	24	Total operating and administrative	<u> </u>			
Š	120	expenses. Add lines 13 through 23	1,561.	62.		1,425.
ċ	25	Contributions, gifts, grants paid	10,500.		-	1,425. 10,500.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	12,061.	62.		11,925.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	19,460.	*	11111 - 1 -	
	b	Net investment income (If negative, enter -0-)		6,456.		
	c	Adjusted net income (If negative, enter -0-)			N/A	*

<u></u>	art I	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
5	art i	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
ا )ب	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	97,580.	25,931.	25,931.
	l .	Accounts receivable ►			
		Less: allowance for doubtful accounts 🛌			
		Pledges receivable			
	1	Less: allowance for doubtful accounts			
	I -	Grants receivable			<del></del>
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and toans receivable	· · · · · · · · · · · · · · · · · · ·		
		Less: allowance for doubtful accounts			· · · · · · · · · · · · · · · · · · ·
ets	1 -	Inventories for sale or use			·
Assets		Prepaid expenses and deferred charges			<del></del>
•		Investments - U.S. and state government obligations Investments - corporate stock STMT 5	120,004.	211,113.	225,115.
		The state of the s	120,004.	211,113.	223,113.
	i	Investments - corporate bonds Investments - land, buildings, and equipment basis			
	11				
	40	Less accumulated depreciation  Investments - mortgage loans			
	l	Investments - other			<del></del> _
	' •	Land, buildings, and equipment: basis			
	'	Less accumulated depreciation		······································	
	15	Other assets (describe )			
	1	Total assets (to be completed by all filers - see the			<del></del>
	'	instructions. Also, see page 1, item I)	217,584.	237,044.	251,046.
_	17	Accounts payable and accrued expenses	165.	165.	1
	l .	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			
=	22	Other liabilities (describe )			
	1				j
_	23	Total liabilities (add lines 17 through 22)	165.	165.	
	1	Foundations that follow FASB ASC 958, check here			
ės	l	and complete lines 24, 25, 29, and 30.			
auc	24	Net assets without donor restrictions			
Bal	25	Net assets with donor restrictions			
þ	1	Foundations that do not follow FASB ASC 958, check here			
or Fund Balances	26	and complete lines 26 through 30.  Capital stock, trust principal, or current funds	217,419.	236,879.	
S	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	<u></u>
set	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Net Assets	29	Total net assets or fund balances	217,419.	236,879.	
Š		,		22070731	
	30	Total liabilities and net assets/fund balances	217,584.	237,044.	
F	art	Analysis of Changes in Net Assets or Fund Ba	alances		
		net assets or fund balances at beginning of year - Part II, column (a), line	20		
'		t agree with end-of-year figure reported on prior year's return)	LJ		217,419.
2		amount from Part I, line 27a		2	19,460.
		Increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3	<del></del>	4	236,879.
		eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	236,879.
					5 000 DE (0040)

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Form **990-PF** (2019)

10,755.

11,925.

Add lines 5 and 6

Form	990-PF (2019) CATHERINE E ALLIN FOUNDATION		18-12	2 <u>4</u> 316		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	40(e), or 49	<del>18 - se</del> e	instruc	tion	s)
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 instruction	ns)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	<b>)</b>	1			65.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col.	(b) ) [				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	ļ.	2	<del></del>		0.
-	Add lines 1 and 2		3			65.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		-	65.
	Credits/Payments:	ا ہ				
	2019 estimated tax payments and 2018 overpayment credited to 2019  6a	0.				Į
	Exempt foreign organizations - tax withheld at source  6b	0.	ł			
	Tax paid with application for extension of time to file (Form 8868)  6c  6c	0.	ŀ			1
	Backup withholding erroneously withheld  Table and an error Addition Catherine Col					<u> </u>
	Total credits and payments. Add lines 6a through 6d		7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_ }	8			65.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>.</b>	9	<del></del>		0.5.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Refunded	10			<del></del> .
	Enter the amount of line 10 to be: Credited to 2020 estimated tax  Int VII-A   Statements Regarding Activities	netulided 1	111			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participates	ate or intervene i	n		Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instruction	ns for the definit	ion	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ned or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fo	undation				
	managers. ► \$0.					
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 i	ncorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	<u> </u>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		/-	4a	<u> </u>	X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	ļ	<b></b>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	ļ	X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	ct with the state I	aw			<u> </u>
_	remain in the governing instrument?			6	X	<del>                                     </del>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), an	d Part XV		7	X	<del>                                     </del>
				ŀ		1 (
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			_		1 1
	KS			_		
		signate)		-		
	KS	signate)		  8b	X	
b	KS  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or dec		dar	  8b	x	
b	KS  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or desort each state as required by General Instruction G? If "No," attach explanation		dar	8b 9	X	X

Pa	rt VII-A   Statements Regarding Activities <sub>(continued)</sub>			
			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		х
40		<b>-</b> ''-	-	
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	_ X	Ц
	Website address ► N/A			
14	The books are in care of ► CATHERINE E. ALLIN-BRADSHAW  Telephone no. ► 913-23		082	
	Located at ► 2902 W. 67TH TERRACE,, SHAWNEE MISSION, KS ZIP+4 ►66	<u> 208</u>		
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	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			ĺ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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)?			ŀ
	(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 X No			
	- · · · · · · · · · · · · · · · · · · ·			
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		<del></del> -
	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			اببا
	before the first day of the tax year beginning in 2019?	1c		<u>X</u>
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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			İ
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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.) N/A	2b		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				li
	during the year?			
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 Form 4720,			]
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		X
		m 990	)_DE	(2010)

Page 6

Par	t VII-B	Statements Regarding Activities for Which	n Form 4/20 May Be R	equired <sub>(contin</sub>	ued)		
5a .[	During the	year, did the foundation pay or incur any amount to:				Yes N	10
(	1) Carry	on propaganda, or otherwise attempt to influence legislation (sec	ction 4945(e))?	Y	es 🗶 No 🚶		
. (	(2) Influer	nce the outcome of any specific public election (see section 4955	5); or to carry on, directly or indire				<u>,</u> 34
	-	oter registration drive?			es 🔀 No 📙	: 1 3,49	20
•	. ,	de a grant to an individual for travel, study, or other similar purpo		Y	es 🗶 No 🔓		,,1
(		de a grânt to an organization other than a charitable, etc., organization	ation described in section	F7	्चा.		
		d)(4)(A)? See instructions			es 🗶 No 🖟		
(		de for any purpose other than religious, charitable, scientific, liter	ary, or educational purposes, or t		es X No		
<b>.</b>		evention of cruelty to children or animals? wer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify	under the exceptions described		es [21] NO		
	-	.4945 or in a current notice regarding disaster assistance? See in		in negulations	N/A	5b	التعند
		ons relying on a current notice regarding disaster assistance, che			<b>▶</b> □		~ 1
	•	ver is "Yes" to question 5a(4), does the foundation claim exemption		ined			
		e responsibility for the grant?		- /	es 🔲 No		17
	-	tach the statement required by Regulations section 53.4945-5(d).					4
6a (	Did the fou	indation, during the year, receive any funds, directly or indirectly	, to pay premiums on				
ä	a personal	benefit contract?		Y	es 🗓 No 📗		أنا
<b>b</b> (	Did the fou	indation, during the year, pay premiums, directly or indirectly, or	n a personal benefit contract?		_	6b 2	ζ_
		6b, file Form 8870.					
	-	e during the tax year, was the foundation a party to a prohibited t		Y	es X No		ે ફો
	•	d the foundation receive any proceeds or have any net income at			N/A	7b 2001	5004
		idation subject to the section 4960 tax on payment(s) of more the	an \$1,000,000 in remuneration or		(TE)		\
	excess par t VIII	achute payment(s) during the year? Information About Officers, Directors, Tru	estace Foundation Mar		es X No		<u>.563</u>
Ľ	VIII 4	Paid Employees, and Contractors	istees, roundation Mai	lagers, migniy			
l Li:	st all offi	cers, directors, trustees, and foundation managers an	d their compensation.	•			
			(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expens	ie_
		(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	account, oth allowance	ier S
ľĄľ	HERI	NE E. ALLIN	TRUSTEE		,		_
	2 W.	67TH TERRACE					
1IS	SION	, KS 66208	5.00	0.	0.	C	<u>.</u>
	,	<u> </u>			<del> :</del>	<b>-</b>	
		<u> </u>					
•	-	<u> </u>		1	'		
					<u> </u>	<del>                                     </del>	—
				1			
			$\dashv$				
2 C	ompensa	ation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."			_
		me and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth allowance	ie ner
	(a) Na	inte and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowance	S
	N	ONE					
		· -					_
		· · · · · · · · · · · · · · · · · · ·	·				
				ļ		ļ	
			<del></del>			ć	
		<del> </del>		<del> </del>		<del>                                     </del>	—
				-	<del> </del>	<del>                                     </del>	_
		<u> </u>	·				
[Otal	I numher o	of other employees paid over \$50,000	1		<u> </u>		0
· vud	· HUITIDGE (	or other distributions baile over woodood			Forn	n <b>990-PF</b> (20	<u> </u>

923561 12-17-19

Form **990-PF** (2019)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations, see instructi	ons.)
ī	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 1	68,481.
b	Average of monthly cash balances	1b	61,756.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d 2	230,237.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 2	230,237.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,454.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	226,783.
6	Minimum investment return. Enter 5% of line 5	6	11,339.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations, check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	11,339.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	65.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,274.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,274.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,274.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	11,925.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
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	11,925.
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	5	65.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,860.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for the section	

Form **990-PF** (2019)

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,	,	·		44.054
line 7			<del></del>	11,274.
2 Undistributed income, if any, as of the end of 2019			_	l
a Enter amount for 2018 only			0.	
b Total for prior years:				
,,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				l
<b>b</b> From 2015 1,111.				
c From 2016 2,384.		İ		
d From 2017 3,355.				
e From 2018				
f Total of lines 3a through e	6,850.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 11,925.				
a Applied to 2018, but not more than line 2a			0.	ļ
b Applied to undistributed income of prior				]
		0.		
years (Election required - see instructions)		<u> </u>		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			11,274.
d Applied to 2019 distributable amount	CE1			11,2/4.
e Remaining amount distributed out of corpus	651.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	7,501.			
b Prior years' undistributed income. Subtract				1
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract			<u> </u>	<u> </u>
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2020				J
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	<u>,</u>			
may be required - see instructions)	0.			·
8 Excess distributions carryover from 2014	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	7,501.	<del>, ,, , , , , , , , , , , , , , , , , ,</del>		
10 Analysis of line 9:				
a Excess from 2015 1,111. b Excess from 2016 2,384.				
b Excess from 2016 2,384.				]
c Excess from 2017 3,355.				
d Excess from 2018				
e Excess from 2019 651.				

923581 12-17-19

Form **990-PF** (2019)

	NE E ALLIN				24316 Page 10
Part XIV Private Operating Fo	· · · · · · · · · · · · · · · · · · ·		-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for	•	•	▶ ∟		
<b>b</b> Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		<u> </u>
income from Part I or the minimum	(a) 2019	<b>(b)</b> 2018	(c) 2017	(4) 2016	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a				<i>/</i>	
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.			<i>y</i>		
Subtract line 2d from line 2c			1		
3 Complete 3a, b, or c for the			<u> </u>	+	
alternative test relied upon:					
a "Assets" alternative test - enter:		/			
(1) Value of all assets		<del>                                     </del>	-		
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)  b "Endowment" alternative test - enter		<del>-/</del>	<del>                                     </del>		ļ
2/3 of minimum investment return		/			
shown in Part X, line 6, for each year		/			
listed	/				<del> </del>
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)				ļ	
(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	L				
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cont	ributions received by the	e foundation before the clos	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
CATHERINE E. ALLIN					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation	or an equally large port	on of the ownership of a pa	artnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► X If the foundation of	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone number	per or email address of th	e person to whom applic	ations should be addres	ssed:	
		,			
b The form in which applications should b	e submitted and informat	tion and materials they s	nould include:		
··					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields.	kınds of institutions, or	other factors:	
_	22 3		,		

Form **990-PF** (2019)

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Aillount	code	Amount	Tunction income
â					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			_		
			14	40.	
investments			14		
4 Dividends and interest from securities	<del></del>		14	0,324.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			ļ		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	157.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			<del>                                     </del>		1
b			-		
C			<u> </u>		
d					
e				6 504	
12 Subtotal. Add columns (b), (d), and (e)		0.		6,521.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	6,521.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than b	y providing fu	nds for such purposes).			
		-			
				-	
	• •				
					<del></del>
		<del></del>		. <u>.                                   </u>	
923621 12-17-19					Form <b>990-PF</b> (2019)

		KINE E ALLIN FO		48-12.			ige 13
Part 2	Information Re Exempt Organ		and Transactions an	d Relationships With Noncha	ritable		
<b>1</b> Did	the organization directly or ind	rectly engage in any of the follow	ring with any other organization	n described in section 501(c)		Yes	No
otl	her than section 501(c)(3) orga	nizations) or in section 527, relatir	ng to political organizations?				ļ
		lation to a noncharitable exempt o	organization of:				
(1)	Cash				1a(1)		X
	Other assets				1a(2)		X
	ner transactions:						
٠,	Sales of assets to a noncharita	· -			1b(1)		X
٠,		oncharitable exempt organization			1b(2)		X
٠.	Rental of facilities, equipment,				1b(3)		X
	Reimbursement arrangements	j			1b(4)		X
٠,	Loans or loan guarantees	embership or fundraising solicitati	ione		1b(5)		X
٠,		ailing lists, other assets, or paid ei			1b(6) 1c		X
	•	• .	•	vays show the fair market value of the goods		ote	
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	• •	e in any transaction or sharing arrangement,	-	, ,	
		other assets, or services received		, many management	O		
(a) Line n	o (b) Amount involved	(c) Name of noncharitab	ole exempt organization	(d) Description of transfers, transactions, an	d sharing агга	ngemen	its
		N/A					
	<del> </del>						
	<del> </del>						
	-						
							-
2a Ist	he foundation directly or indirec	ctly affiliated with, or related to, or	ne or more tax-exempt organiz	ations described			
ın s	section 501(c) (other than section	on 501(c)(3)) or in section 527?			Yes	X	] No
<u>b</u> If "	Yes," complete the following sch	nedule.					
	(a) Name of or	ganization	(b) Type of organization	(c) Description of relation	nship		
	N/A						
			<b>.</b>				
	Under panalties of partitional statements	That I have examined this rotum, including	ng accompanyang schodules and ste	itements, and to the best of my knowledge			
Sign Here	and belief it is true, correct, and cor			on of which preparer has any knowledge	May the IRS direturn with the shown below?	prepare	er
	Signature of officer or truste	e	Date	Title			
	Print/Type preparer's n	ame Preparer's	signature	Date Check if PTII	V		
Paid	MICHELLE E	BROWN (Mich	10110 L Brown	7/8/20 self- employed	00225	262	
Prepa Use (	arer Firm's name ► CBI		The state of the s	Firm's EIN ► 34-			
	Firm's address ► 70	00 WEST 47TH STE	-				
	KA	NSAS CITY, MO 6	54112	Phone no. 816 - 9	<del>945-5</del> !	<u> 500</u>	

Phone no. 816-945-5500 Form **990-PF** (2019)

## Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

2019

Name of the organization Employer identification number CATHERINE E ALLIN FOUNDATION 48-1224316 Organization type (check one) Filers of: Section: 7 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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 990-PF, Part I, line 2, to

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

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

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

Name of organization

Employer identification number

CATHEDINE	D	ATT.TM	FOUNDATION
CWILDKIND	Ŀ	ALLITIN	LOONDATION

48-1224316

CAINE	KINE E ADDIN FOUNDATION	40	-1224310
Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$25,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.

Name of organization

Employer identification number

## CATHERINE E ALLIN FOUNDATION

48-1224316

	INE E ALLIN FOUNDATION		-1224316
art II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(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
<del></del>		<b>\$</b>	
(a) No. from Part I	· (b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  s	

Name of organization

Employer identification number

ATHER	RINE E ALLIN FOUNDATION			48-1224316		
Part III	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	through (e) and the following line entricharitable, etc., contributions of \$1,000 or li	v For organizations	hat total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription 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) Desc	cription of how gift is held		
-	(e) Transfer of gift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
_	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of tra	nsferor to transferee		

	ST ON SAVI	NGS AND T	EMPOR	ARY CA	SH IN	VESTMENTS	STATEMENT 1	
SOURCE			(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) F ADJUSTED NET INCOME	
TD AMERITRADE MONEY	•	40.						
TOTAL TO PART I, LINE 3							40.	
FORM 990-PF	DIVIDEND	S AND INT	EREST	FROM	SECUR	ITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A REVE PER B	NUE	(B) NET INVES MENT INCO		
TD AMERITRADE	6,528	•	204.	6	,324.	6,32	1.	
TO PART I, LINE 4	6,528	•	204. 6,324		,324.	6,32	1.	
FORM 990-PF		ACCOUN	TING	FEES			STATEMENT 3	
		(A) EXPENSES		(B) I INVE		(C) ADJUSTED		
	_	EXPENSES PER BOOK	S ME				CHARITABLE E PURPOSES	
		EXPENSES	S ME	r inve		ADJUSTED	CHARITABLE	
		EXPENSES PER BOOK	S MEI 5.	r inve	OME .	ADJUSTED	CHARITABLE E PURPOSES	
ACCOUNTING SERVICES TO FORM 990-PF, PG		EXPENSES PER BOOK 1,42 1,42	S MEI 5.	r inve	OME 0.	ADJUSTED	CHARITABLE PURPOSES 1,425.	
ACCOUNTING SERVICES TO FORM 990-PF, PG FORM 990-PF		EXPENSES PER BOOK 1,42 1,42	S MEI  5.  5.  AXES	r inve	OME 0. 0.	ADJUSTED	CHARITABLE PURPOSES  1,425.  1,425.  STATEMENT 4  (D) CHARITABLE	
DESCRIPTION  ACCOUNTING SERVICES TO FORM 990-PF, PG  FORM 990-PF  DESCRIPTION  EXCISE TAX FOREIGN TAX		EXPENSES PER BOOK  1,42  1,42  T.  (A) EXPENSES PER BOOK	S MEI  5.  5.  AXES	I INVE	OME 0. 0.	ADJUSTED NET INCOM  (C) ADJUSTED	CHARITABLE PURPOSES  1,425.  1,425.  STATEMENT 4  (D) CHARITABLE	

FORM 990-PF CORPORATE STOCK		STATEMENT 5
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	211,113.	225,115.
TOTAL TO FORM 990-PF, PART II, LINE 10B	211,113.	225,115.