Return of Private Foundation Form 990-PF 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. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. 2019 2020 For calendar year 2019 or tax year beginning APR and ending A Employer identification number Name of foundation 23-7430868 ELMA SCHMIDT SCHOLARSHIP FUND Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number PO BOX 1803 (620) 225-6100 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 67801 DODGE CITY, KS G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: 04 E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d), must be on cash basis.) 184,864. Analysis of Revenue and Expenses (d) Disbursements Part I (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income N/A Contributions, gifts, grants, etc., received Check I I the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4,989. 4,989 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 23,932 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 129,759. 23,932 Capital gain net income (from Part IV, line 2) Net short CORRES 9 Income modifications OSC - 02
Gross sales less returns
and allowances b Less Cost of good 150 2 3 2021 c Gross profit or (loss)-11 Other IncompGDEN, UTAH 28,921 28,921 Total Add lines 0 0 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 784 392. 392. **b** Accounting fees STMT 2 2,389 STMT 3 2,389 c Other professional fees 17 Interest APR 🥫 24 0 0. 18 Taxes STMT 4 19 Depreciation and depletion RECEIVED ENTHY ... 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses
24 Total operating
expenses Add
25 Contributions of 172 136 36. STMT 5 24 Total operating and administrative 3,369 2,917 428. expenses Add lines 13 through 23 15,865. 15,865 25 Contributions, gifts, grants paid 26 Total expenses and disbursements

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

16,293.

19,234

9,687

2,917

26,004.

N/A

_		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End c	f year		
Part II Balance Sheets Audate Scriedules and aniounts in the description column should be for end-of-year amounts only		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	1,278.	4,432.	4,432.		
	2	Savings and temporary cash investments					
	1	Accounts receivable					
		Less: allowance for doubtful accounts		• • •			
	4	Pledges receivable ▶		· · · · · · · · · · · · · · · · · · ·			
	'	Less: allowance for doubtful accounts					
	5	Grants receivable		<u>-</u>			
	1 -	Receivables due from officers, directors, trustees, and other	- 	 			
	ľ	disqualified persons					
	7						
	1	Other notes and loans receivable Less: allowance for doubtful accounts			****		
		· · · · · · · · · · · · · · · · · · ·		<u></u>			
Assets	_	Inventories for sale or use		····			
Ass	1	Prepaid expenses and deferred charges					
•)	Investments - U.S. and state government obligations					
	1	Investments - corporate stock					
	1	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis		•	-		
		Less accumulated depreciation					
	12	Investments - mortgage loans	107 152	122 606	100 430		
	13	Investments - other STMT 6	127,153.	133,686.	180,432.		
	14	Land, buildings, and equipment: basis		-	•		
		Less accumulated depreciation		<u>, </u>			
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers - see the	100 101	400 440	101.061		
		instructions. Also, see page 1, item I)	128,431.	138,118.	184,864.		
	17	Accounts payable and accrued expenses					
	18	Grants payable			,		
es	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
jab	21	Mortgages and other notes payable					
_	22	Other liabilities (describe)					
				_	'		
	23	Total liabilities (add lines 17 through 22)	0.	0.	<u>'</u>		
		Foundations that follow FASB ASC 958, check here			'		
es		and complete lines 24, 25, 29, and 30.					
Net Assets or Fund Balances	24	Net assets without donor restrictions			<u>,</u>		
3ala	25	Net assets with donor restrictions					
ğ		Foundations that do not follow FASB ASC 958, check here ▶ 🛣					
ᆵ		and complete lines 26 through 30					
5	26	Capital stock, trust principal, or current funds	170,201.	170,201.			
ets	27	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.			
\ss	28	Retained earnings, accumulated income, endowment, or other funds	-41,770.	-32,083 .	,•		
et/	29	Total net assets or fund balances	128,431.	138,118.	'		
Z							
_	30	Total liabilities and net assets/fund balances	128,431.	<u>138,118.</u>			
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	29				
-		st agree with end-of-year figure reported on prior year's return)		1	128,431.		
2	•	r amount from Part I, line 27a	•	2	9,687.		
		r increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	138,118.		
		eases not included in line 2 (itemize)		5	0.		
		I not assets or fund halances at end of year (line 4 minus line 5) - Part II on	lumn (h) line 29		138.118.		

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Form 990-PF (2019) ELMA SCHMIDT SCHOLARSHIP FUND

Form **990-PF** (2019)

8

16,293.

See the Part VI instructions.

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.

	990-PF (2019) 'ELMA SCHMIDT SCHOLARSHIP FUND	23-	74308	68		Page 4	Ī
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 ·	· see in	stru	ctio	าร)	_
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					`	t
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1.		_			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			2	60.	
	of Part I, line 27b						7
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.	<u>.</u>
3	Add lines 1 and 2	3			2	60.	_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4				0.	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2	60.	_
6	Credits/Payments:						_
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0	•					
b	Exempt foreign organizations - tax withheld at source 6b 0	•					,
C	Tax paid with application for extension of time to file (Form 8868) 6c 0						
d	Backup withholding erroneously withheld 6d 0	•			- 1		,
7	Total credits and payments. Add lines 6a through 6d	7		-		0.	_
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				0.	_
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			2	60.	-
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	11					_
Pa	rt VII-A Statements Regarding Activities						_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	ie in	L		Yes	No	_
	any political campaign?		Ĺ	1a		X	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the def	inition	L	1b		X	_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		İ	ŀ			
	distributed by the foundation in connection with the activities.			ŀ			
C	Did the foundation file Form 1120-POL for this year?		L	1c		X	_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0	<u>•</u>					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation						
	managers. ► \$O.						
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					1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		_X_	_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		L	4a		<u> </u>	_
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b			_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	5		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 with the state of	te law		-			
	remain in the governing instrument?		L	6	Х		-
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		L	7	Х		_
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.						
	KS						
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? If "No," attach explanation		L	8b	_X		-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	lendar		.			1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		L	9		<u>X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		<u> </u>	-
			Form	990	-PF	(2019)	i

i . i .

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Х

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Schedule C, to determine if the foundation had excess business holdings in 2019.)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Form 990-PF (2019) ELMA SCHMIDT SCHOLARSHIF Part VII-B Statements Regarding Activities for Which	FUND Form 4720 May Be F	Required (continu	23-74308	68	Page 6
5a During the year, did the foundation pay or incur any amount to:	<u></u>			Yes	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗓 No	10.	- 1
(2) Influence the outcome of any specific public election (see section 4955); o	or to carry on, directly or indire		es X No	İ	
any voter registration drive?	.0		es X No		;
(3) Provide a grant to an individual for travel, study, or other similar purposes		TE	S LAJ NO	-	, ;
(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? See instructions	iii described iii section	,	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or adjugational nurnoses, or f		13 (22) 110		
the prevention of cruelty to children or animals?	, or concational purposes, or i		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described i		3 22 100		` 1
section 53.4945 or in a current notice regarding disaster assistance? See instr		ii riogulations	N/A	5b	-
Organizations relying on a current notice regarding disaster assistance, check					<u> </u>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?		//A □ Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					}
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay oremiums on				
a personal benefit contract?	pay promisent on	☐ Ye	es 🗶 No	1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the foundation.	personal benefit contract?			6ь і	√ x '
If "Yes" to 6b, file Form 8870.					†
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	es 🗓 No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	<u> </u>
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		r	,		 ,
excess parachute payment(s) during the year?	• • • • • • • • • • • • • • • • • • • •		es 🗶 No		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/		
List all officers, directors, trustees, and foundation managers and to	their compensation.				
(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	accour	opense nt, other vances
PATTY HUCKABY	PRESIDENT				
PO BOX 1803]				
DODGE CITY, KS 67801	1.00	0.	0.		0.
AMANDA NUFER	SECRETARY/TRE	ASURER			
PO BOX 1803]				
DODGE CITY, KS 67801	1.00	0.	0.		0.
LINDA CUMMINGS	VICE-PRESIDEN	T			
PO BOX 1803]	,			
DODGE CITY, KS 67801	1.00	0.	0.		0.
1	<u> </u>				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) E)	40.000.0
(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	accour allow	kpense nt, other vances
NONE]				
	1]			
	4				
/	-				
		L			
Total number of other employees paid over \$50,000			Earm	990-PI	0 F (2010)

Form 990-PF (2019) 'ELMA SCHMIDT SCHOLARSHIP FUND	23-74	130868 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	. 11	
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infornumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the	Expenses
1 N/A		
21/ 22		
,		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2.	Amount
1 N/A		
2		
All although a shaked as a sha		
All other program-related investments. See instructions.		
3		
· ·		
<u>-</u>		
Total, Add lines 1 through 3	•	0.
A CONTRACTOR OF THE CONTRACTOR		Form 990-PF (2019)

923561 12-17-19

Form 990-PF (2019)

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, s	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	207,580.
	Average of monthly cash balances	1b	207,580. 3,611.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	211,191.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	211,191.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,168.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	208,023.
6_	Minimum investment return Enter 5% of line 5	6	10,401.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	10,401.
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	260.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,141.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,141.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,141.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	16,293.
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:	ŀ	
а	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	16,293.
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	260.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,033.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies 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, line 7				10,141.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			9,953.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 16,293.				
a Applied to 2018, but not more than line 2a			9,953.	
b Applied to undistributed income of prior			•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				6,340.
e Remaining amount distributed out of corpus	0.			
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	0.			
b Prior years' undistributed income. Subtract				
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		0.		
assessed		U •		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract	 	-	0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				3,801.
7 Amounts treated as distributions out of				3,001.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
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	0.	r		
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				
	<u></u> 1			

Part XIV Private Operating F	bundations (see ins			N/A	- /430868 Page 10
1 a If the foundation has received a ruling o				247.11	
foundation, and the ruling is effective fo	1				
b Check box to indicate whether the found	•		in section	4942(j)(3) or [4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax xear		Prior 3 years	<u> </u>	
income from Part I or the minimum	(a) 20 19	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for	(2/3)	(4)	(-7		(4) 1111
each year listed b 85% of line 2a			-		-
	<u> </u>	\ 			
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not	<u> </u>				
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	L			1 105 000	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n nad \$5,000 o	r more in assets
		uctions.)			
 Information Regarding Foundation a List any managers of the foundation wh 	_	than 20/ of the total con-	tributions received by th	io foundation hefore th	a close of any tay
year (but only if they have contributed r			i ibulions received by ii	ie iouridation before ti	ic close of any tax
NONE	, , ,				
b List any managers of the foundation wh			(or an equally large por	tion of the ownership	of a partnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE	<u>.</u>				
2 Information Regarding Contribut					
Check here if the foundation of the foundation makes gifts, grants, etc.,	,		•		requests for funds. If
a The name, address, and telephone num	der or email address of the	ie person to whom appii	cations should be addre	:55eu.	
SEE STATEMENT 7					
b The form in which applications should t	ne submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as hy geographic	al areas, charitable fields	kinds of institutions of	r other factors:	
a rang room on on annuations on award	o, ocon as of goograpino		,		

, i.

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient a Paid during the year RACHELLE ARANDA NONE N/A EDUCATIONAL 10842 WEST PARK STREET DODGE CITY KS 67801 1,845. HALIE HARRINGTON NONE N/A EDUCATIONAL 416 EAST FRONT STREET 3,110. MINNEOLA KS 67865 EMMALY SLATTERY NONE N/A EDUCATIONAL 10844 106 ROAD DODGE CITY KS 67801 3,380. KATHERINE GREENLEAF NONE N/A EDUCATIONAL 114 CRESTVIEW DRIVE DODGE CITY KS 67801 4,105. JANET SMITH NONE N/A EDUCATIONAL 18502 U ROAD CIMARRON KS 67835 290. SEE CONTINUATION SHEET(S) Total ▶ 3a 15 865 b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activitie

Enter gross	s amounts unless otherwise indicated.		ed business income	(C) Exclu-	ded by section 512, 513, or 514	(e)
4 D		(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
•	n service revenue:	code		Code	, , , , ,	
		•	-			
_				┼		-
		ı				
<u> </u>	· ~			 -	· · - · - ·	<u>-</u> -
e —				+		<u> </u>
7	and contracts from government agencies	-				
-	rship dues and assessments			 		
	on savings and temporary cash					
investr					,	
	ds and interest from securities			14	4,989.	
	tal income or (loss) from real estate:					
	t-financed property			┧──		
	debt-financed property					 -
	tal income or (loss) from personal					
propert					,	
	y vestment income			 		`
	(loss) from sales of assets other					
than inv				14	1,009.	22,923.
	ome or (loss) from special events				,	
	profit or (loss) from sales of inventory			1		
11 Other re						
a						
b						
е						
12 Subtota	ıl. Add columns (b), (d), and (e)		0.		5,998.	22,923.
13 Total A	Add line 12, columns (b), (d), and (e)				13	22,923. 28,921.
(See works	sheet in line 13 instructions to verify calculations.)				<u> </u>	
Part X	VI-B Relationship of Activities	to the Acc	omplishment of Ex	kemp	t Purposes	
Line No	Explain below how each activity for which inc			A contrib	outed importantly to the accom	plishment of
	the foundation's exempt purposes (other than					
8	THE GAINS WERE USED TO	FUND S	CHOLARSHIPS	PAI	D TO THE CAND	IDATES.
					• • •	
			:			
			<u> </u>		<u> </u>	·
					······································	
-	-		<u> </u>			<u></u>
	-					
			W.L.			· -

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Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2019)
Part XVII In

1	Did the org	ganization directly or indir	ectly engage in any i	of the followin	g with any other organizatio	n described in sect	ion 501(c)		Yes	No
					to political organizations?					
a	-	from the reporting founda								
	(1) Cash							1a(1)		X
	(2) Other	assets						1a(2)		X
b	Other trans	sactions:								
	(1) Sales	of assets to a noncharitat	ble exempt organizat	ion				1b(1)		<u>X</u>
	(2) Purch	ases of assets from a nor	ncharitable exempt o	rganization				1b(2)		
	(3) Renta	l of facilities, equipment, o	or other assets					1b(3)		<u>X</u>
	(4) Reimb	oursement arrangements						1b(4)		<u>X</u>
	(5) Loans	or loan guarantees						1b(5)		<u>X</u>
	(6) Perfor	rmance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		<u>X</u>
	-	facilities, equipment, mai						1c	l	<u>X</u>
d	If the answ	ver to any of the above is	"Yes," complete the f	ollowing sche	dule. Column (b) should alw	ays show the fair r	narket value of the goods	, other asse	ts,	
		• • •			ed less than fair market valu	e in any transactior	or sharing arrangement,	show in		
) the value of the goods, o		_						
(a) L	іпе по	(b) Amount involved	(c) Name of		exempt organization	(d) Description	n of transfers, transactions, an	d sharing arra	ingeme	nts
				N/A	<u></u>					
							,			
				_						
			<u></u>							
-										
	-					-				
						-				
			<u> </u>							
2a					or more tax-exempt organiz	ations described	1		77	٦.,,
		501(c) (other than section		ction 52/7			l	Yes	LA	1 ио
b	If "Yes," co	omplete the following sche			(b) Type of organization	·-	(c) Description of relation	ehin		
		(a) Name of org	anization		(b) Type of organization		(c) Description of relation	istiip		
		N/A					 -			
				_						
							· · · · · · · · · · · · · · · · · · ·			
		_ 								
	Linder	nenalties of nerwy. I declare	that I have examined thi	s return, includin	g accompanying schedules and	statements, and to the	best of my knowledge			
Si					n taxpayer) is based on all inform		er has any knowledge	May the IRS di eturn with the	prepare	er
	ere	Patter 1	Labore		x 3/15/2021	PRESI		Nown below?	See in:	7 I
		nature of officer or trustee	- we know		Date	Title	JEN I	LAX TES		1110
	Joigi	Print/Type preparer's na		Preparter's s		Date	Check I if PTIN	ı		
		PAMELA S.			1/ ////////	13/1	self- employed			
Pa	aid	CPA	итпимо,	Janu	UN /1115 (8)	115/20a		00595!	521	
	eparer	Firm's name ► SMO	<u>/</u> אוא גם		PA'S T.T.C	, , ,	Firm's EIN ▶ 48 – 1			X X X X X X X X No
	se Only	THIN S HAIRE - SMO	ידיד מ סעדווו	TING, C	IR O, DUC		Timisem P 40"	22100		
_,	y	Firm's address ▶ 24	10 CENTER	Τ. ΔΥΕ			_			
			DGE CITY,		801		Phone no. 620-2	225-63	100	
			DGE CITI	110 07				Form 990		(2019)
									-	,

3 Grants and Contributions Paid During the	on Vaca (Continuation)			
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
, , , , , , , , , , , , , , , , , , , ,	or substantial contributor	recipient		
LIZABETH BURGESS	NONE	N/A	EDUCATIONAL	,
.00 COTTONWOOD				
MINNEOLA, KS 67865				33
SUSANA DYCK	NONE	N/A	EDUCATIONAL	
12 SUNNYSIDE AVENUE	NONE	N/A	EDUCATIONAL	
MONTEZUMA KS 67867				. 34
IONIEZONA, KS 07007				,
KIMBERLY GONZALEZ	NONE	N/A	EDUCATIONAL	
302 CHERRY STREET				
DODGE CITY, KS 67801			1	32
AMANDA ZAYAS	NONE	N/A	EDUCATIONAL	
L702 AVENUE H				
DODGE CITY KS 67801		1		37
AMBER NILHAS	NONE	N/A	EDUCATIONAL	_
905 MARSHA LANE				
DODGE CITY, KS 67801	χ	1		1,77
			,	
			-	
	-			
1				
				•
•				
,				
			1	
			`	
Total from continuation sheets			1	3,13

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1
SOURCE GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
LPL FINANCIAL 5,998	1,00	9. 4,989.	4,989.	
TO PART I, LINE 4 5,998	1,00	9. 4,989.	4,989.	
FORM 990-PF	ACCOUNTI	NG FEES	Sī	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEE	784.	392.		. 392.
TO FORM 990-PF, PG 1, LN 16B	784.	392.		392.
FORM 990-PF (OTHER PROFES	SIONAL FEES	ST	'ATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY FEES	2,389.	2,389.		0.
TO FORM 990-PF, PG 1, LN 16C	2,389.	2,389.		0.
ORM 990-PF TAXES		ES	ST	'ATEMENT 4
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED NET INCOME	(D) CHARITABLE
DESCRIPTION	PER BOOKS	MENT INCOME	NEI INCOME	PURPOSES
DESCRIPTION EXCISE TAX	PER BOOKS	0.	————	PURPOSES 0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(D) CHARITABLE PURPOSES	
BOX RENT BONDING INSURANCE	72. 100.		36. 00.	36. 0.	
TO FORM 990-PF, PG 1, LN 23	172.	1	36.	36.	
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6	
DESCRIPTION	VALUATION METHOD		BOOK VALUE	FAIR MARKET VALUE	
LPL FINANCIAL	COST		133,686.	180,432.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13	_	133,686.	180,432.	

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PATTY HUCKABY PO BOX 1803 DODGE CITY, KS 67801

TELEPHONE NUMBER

(620) 227-8803

RECEIVED IN CORRES IRS - OSC - 02

MAR 2 3 2021

OGDEN, UTAH

FORM AND CONTENT OF APPLICATIONS

APPLICATION FORMS REQUIRE BIOGRAPHICAL DATA INCLUDING NAME, ADDRESS, TELEPHONE NUMBER, SOCIAL SECURITY NUMBER, DATE OF BIRTH, CURRENT EMPLOYER NAME AND ADDRESS, YEARS OF EMPLOYMENT, MARITAL STATUS, NUMBER OF YEARS MARRIED, AND SPOUSE'S NAME AND OCCUPATION. EDUCATIONAL DATA IS ALSO REQUIRED. THIS INCLUDES THE NAME AND ADDRESS OF THE INSTITUTION TO BE ATTENDED AND THE DATE CLASSES BEGIN.

ANY SUBMISSION DEADLINES

APRIL 1 FOR FALL SEMESTER; NOVEMBER 1 FOR SPRING SEMESTER

RESTRICTIONS AND LIMITATIONS ON AWARDS

QUALIFIED STUDENT MUST: A) BE A CITIZEN OF THE UNITED STATES, B) BE A WOMAN FROM SOUTHWESTERN KANSAS, C) HAVE GRADUATED FROM AN ACCREDITED HIGH SCHOOL OR HAVE GED EQUIVALENT, D) BE ENROLLED IN AT LEAST SIX CREDIT HOURS PER SEMESTER OR IN A QUALIFIED VOCATIONAL-TECHNICAL PROGRAM, E) DOCUMENT FINANCIAL NEED.