Form 990-PF

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.

| | | of the Treasury enue Service | ▶G | o to www.irs.gov/Forn | n990PF for instruction | ns and the | latest inf | ormation: 2006 | Open to Public | Inspection |
|------------------------------|-------------|-----------------------------------|------------------------|---|------------------------------|--|--------------|--|---|-------------|
| For | calend | dar year 2019 o | r tax year beg | nnin@7/01/19 , | and ending $06/3$ | 0/20 | | | | |
| Nan | ne of fou | undation | | | | | | oyer identification number | | |
| _ | | | | | internal Revenu | e Service | 3.7 | 1420000 | | |
| | | FAMILY | | LON delivered to street address) | Received US B | om/suite | B Telep | - 1439200 hone number (see instructio | ne) | |
| | | S INGRA | | · | 317 | oon/suite | | 7 - 888 - 14 95 | 113) | |
| | | , state or province, co | | | MOV 16 2 | 2000 | t | | - shook boss | |
| S: | PRI | NGFIELD | | MO 65804 | NOV 162 | עצט | C If exe | mption application is pending | у, спеск пеге | |
| G C | heck | all that apply | Initial ret | urn 🔲 Initial retu | urn of a former public | charity | D 1 Fc | reign organizations, check h | nere | • |
| | | | Final ret | urn 🔲 Amended | return Ogden, L | Γř | | reign organizations meeting | | |
| | | | Address | change : Name ch | ange | / l | 85 | % test, check here and attac | ch computation | • |
| н с | heck | type of organiza | tion X Sectio | n 501(c)(<u>3)</u> exempt priva | ite foundation | NI | | ate foundation status was te | rminated under | |
| | Section | n 4947(a)(1) nor | nexempt charite | ble trust Other taxat | | <u> </u> | sectio | n 507(b)(1)(A), check here | | P |
| I Fa | air mai | rket value of all a | assets at | J Accounting method | Cash X Acc | rual | | foundation is in a 60-month | | |
| | | ear (from Part II | | Other (specify) | | | under | section 507(b)(1)(B), check | here | |
| | e 16) | | <u>812,506</u> | (Part I, column (d), mus | st be on cash basis) | | <u></u> | | [(d) Dishira | |
| L Pa | art I | | | xpenses (The total of ay not necessarily equal | (a) Revenue and expenses per | (b) Net inv | | (c) Adjusted net | (d) Disbur for char | ıtable |
| | | | umn (a) (see instruc | | books | inco | me | income | purpo (cash bas | |
| | 1 | Contributions, giff | is, grants, etc., re | ceived (attach schedule) | 6,078,270 | | | | | |
| | 2 | Check ▶ if | the foundation is | not required to attach Sch | | | | | | |
| 1 | 3 | Interest on sav | ings and tempo | orary cash investments | 1,208 | | 68 | | ļ | |
| | 4 | Dividends and | interest from se | ecurities | 256,319 | 2: | 56,319 | | | |
| | 5a | Gross rents | | | | | | | | |
| ē | ь | Net rental inco | me or (loss) | | | | ** | | | |
| Ĕ | 6a | Net gain or (loss) from | m sale of assets not o | | 3,444,884 | | | | | |
| Revenue | b | Gross sales price for | | | | 2.4 | 4.4 00.4 | | | - |
| ď | 7 | Capital gain ne | • | Part IV, line 2) | | 3,4 | 44,884 | | | |
| | 8 | Net short-term | | | | | | . 0 | 1 | |
| | 9 | Income modific | | 1 | | (4) (| t compage of | and the presidently solver the contract | , , , , , , , , , , , , , , , , , , , | |
| | 10a | Gross sales less ret | | · | | | | | | |
| | b | Less Cost of g | | abadula) | | | | | <u> </u> | |
| | 11 | Gross profit or Other income (| | • | | | | | | |
| | 12 | Total. Add line | | e) | 9,780,681 | 3.7 | 01,271 | 0 | | |
| 0 | 13 | | | ectors, trustees, etc | 72,875 | † | | | <u> </u> | 72,785 |
| xpenses | 14 | Other employe | | | | | | | | • |
| ē | 15 | Pension plans, | | • | 7,832 | | | | | 7,832 |
| X | 16a | | | SEE STMT 1 | 1,900 | | | | | 1,900 |
| | ь | Accounting fee | | | 3,440 | | | | | 3,440 |
| ŧ | c | Other professions | al fees (attach sch | nedule) STMT 3 | 33,011 | | 33,011 | | | |
| it | 17 | Interest | | | | | | | | |
| Ë | 18 | Taxes (attach sch | nedule) (see instri | uctions) STMT 4 | 36,200 | | | | | |
| Ξ | 19 | Depreciation (atta | ach schedule) and | depletion | | | | | | |
| Ad | 20 | Occupancy | | | | | | | <u> </u> | |
| Þ | 21 | Travel, confere | | etings | 2,390 | | | | | 2,390 |
| Operating and Administrative | 22 | Printing and pu | | amer - | 10 000 | - | | | <u> </u> | 10 022 |
| ng | 23 | Other expenses (att | | STMT 5 | 18,023 | | | | <u> </u> | 18,023 |
| ati | 24 | • | _ | strative expenses. | 175,671 | 1 | 33,011 | | 1 . | 06,370 |
| Эег | 25 | Add lines 13 th | • | | 856,539 | | JJ, UII | | | 56,539 |
| Ö | 25 | Contributions, gifts, g | | ante Addisso 04 and 05 | 1,032,210 | | 33,011 | | | 62,909 |
| | 26 27 | Subtract line 2 | | ents. Add lines 24 and 25 | 1,032,210 | | , | <u> </u> | <u> </u> | , |
| | | | | ses and disbursements | 8,748,471 | | | | ' | |
| | a b | | | egative, enter -0-) | | | 68,260 | | | |
| | C | Adjusted net i | | = | | 1 3,0 | , | C | | |
| | | Aujusteu net i | | alive, enter -0-) | <u> </u> | | | ' | /Form 990 | DE |

| Fo | rm 990 | D-PF (2019) DARR FAMILY FOUNDATION | 37-14392 | 00 | |
|--------------------------|--------|--|--|--|---------------------------|
| _ | \ | Attached schedules and amounts in the description column | Beginning of year | End of | year |
| _! | Part I | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Т | 1 | Cash – non-interest-bearing | 61,685 | 4,870 | 4,870 |
| | 2 | Savings and temporary cash investments | | 158,706 | 158,706 |
| ł | 3 | Accounts receivable > | | | |
| | Ū | Less allowance for doubtful accounts ▶ | <u> </u> | | |
| | 4 | Pledges receivable ▶ | | | |
| | ~ | Less allowance for doubtful accounts | | | |
| ł | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | O | disqualified persons (attach schedule) (see | | | |
| - | | | i | | |
| 1 | 7 | Instructions) | | | · |
| | 7 | Other notes and loans receivable (att schedule) ► Less allowance for doubtful accounts ► 0 | an impairement of the second o | - A TOTAL CONTRACTOR (MARCHEST CONTRACTOR CO | Parameter and the second |
| | _ | | | | |
| ASSets | 8 | Inventories for sale or use | <u> </u> | 6,100 | 6,100 |
| SS | 9 | Prepaid expenses and deferred charges | <u>'</u> | 0,100 | 0,100 |
| ٩ | 10a | Investments – U.S. and state government obligations (attach schedule) | 4,151,869 | 10,265,331 | 10,265,331 |
| 1 | b | Investments – corporate stock (attach schedule) SEE STMT 6 Investments – corporate bonds (attach schedule) SEE STMT 7 | 2,888,370 | 3,377,499 | 3,377,499 |
| 1 | C | involutions borporate boride (attack contracte) | 2,888,370 | 3,311,433 | 3,311,433 |
| 1 | 11 | Investments – land, buildings, and equipment basis ▶ | paper and the same of the same | | |
| 1 | | Less accumulated depreciation (attach sch.) | | | <u> </u> |
| ĺ | 12 | Investments – mortgage loans | | | |
| | 13 | Investments – other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment basis | | | |
| 1 | | Less accumulated depreciation (attach sch) | 2 067 | | |
| | 15 | Other assets (describe ► SEE STATEMENT 8 | 3,867 | | |
| | 16 | Total assets (to be completed by all filers – see the | 7 105 701 | 12 012 506 | 12 012 506 |
| 4 | | instructions. Also, see page 1, item I) | 7,105,791 | 13,812,506 | 13,812,506 |
| | 17 | Accounts payable and accrued expenses | - | 34,872 400,000 | |
| ဖွ | 18 | Grants payable | <u> </u> | 400,000 | |
| apilities | 19 | Deferred revenue | | - | |
| ਙ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| 삠 | 21 | Mortgages and other notes payable (attach schedule) | , | | |
| _ | 22 | |) | 424 072 | |
| 4 | 23 | Total liabilities (add lines 17 through 22) | . 0 | 434,872 | |
| ဖွ | | Foundations that follow FASB ASC 958, check here | | | |
| Ses | | and complete lines 24, 25, 29, and 30. | 7,105,791 | 13 277 624 | |
| Net Assets or Fund Balan | 24 | Net assets without donor restrictions | 7,105,791 | 13,377,634 | |
| 8 | 25 | Net assets with donor restrictions | ¬ | | 1 |
| 밀 | | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. | J | | |
| 리 | | - | | | |
| 히 | 26 | Capital stock, trust principal, or current funds | | | <u> </u> |
| Ş | 27 | Paid-in or capital surplus, or land, bldg, and equipment fund | - | | |
| š | 28 | Retained earnings, accumulated income, endowment, or other funds | 7,105,791 | 13,377,634 | |
| ĕ | 29 | Total net assets or fund balances (see instructions) | 7,103,731 | 13,377,034 | |
| 힐 | 30 | Total liabilities and net assets/fund balances (see | 7,105,791 | 13,812,506 | |
| _ | D = | Instructions) | | 13,612,300 | |
| | Part | III Analysis of Changes in Net Assets or Fund Balance I net assets or fund balances at beginning of year – Part II, column (a), line 2 | | | <u> </u> |
| 1 | | | o (must agree with | | 7,105,791 |
| _ | | of-year figure reported on prior year's return) | | 2 | 8,748,471 |
| | | r amount from Part I, line 27a | | 3 | 1,546,869 |
| | | er increases not included in line 2 (itemize) SEE STATEMENT 9 | | 4 | 17,401,131 |
| | | lines 1, 2, and 3 | | 5 | 4,023,497 |
| | | reases not included in line 2 (itemize) > SEE STATEMENT 10 | umn (h) lina 20 | 6 | 13,377,634 |
| 0 | ıota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | umm (D), iiile 29 | | Form 990-PF (2019) |

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|--|--|---------------------|--|--|---|
| Part IV Capital Gains a | and Losses for Tax on Investm | ent Income | 1 | | |
| | the kind(s) of property sold (for example, real estate, irehouse, or common stock, 200 shs MLC Co) | · | (b) How acquired P – Purchase D – Donation | (c) Date ac (mo , day | |
| 1a CHARLES SCHWAB | | | P | | |
| b CHARLES SCHWAB | | | P | | |
| c CAPITAL GAIN D | <u> ISTRIBUTIONS</u> | | | | |
| _d | | | <u> </u> | | |
| _e | | · <u>·</u> | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | or other basis pense of sale | (| (h) Gain or (loss) ((e) plus (f) minus (g)) |
| a 14,381,177 | | | 11,015,719 | | 3,365,458 |
| ь 469,995 | | | 478,081 | | -8,086 |
| c 87,512 | | | | _ | 87,512 |
| d | | | | | |
| е | | | | | |
| Complete only for assets show | ing gain in column (h) and owned by the | foundation on 1 | 2/31/69 | (I) G | Bains (Col. (h) gain minus |
| (ı) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ess of col (i) | col (l | k), but not less than -0-) or Losses (from col. (h)) |
| a | | -:- <u>-</u> - | | • | 3,365,458 |
| a | | | | | -8,086 |
| c | | - | | | 87,512 |
| d | | | | | |
| е | | <u> </u> | | | |
| Capital gain net income or (net) | capital loss) If gain, also enter in | | | | 2 444 004 |
| • | if (loss), enter -0- in i | _ | | _2 | 3,444,884 |
| | oss) as defined in sections 1222(5) and | _ | | | |
| _ | 8, column (c) See instructions If (loss), | enter -0- in | | | |
| Part I, line 8 Part V Qualification U | Inder Section 4940(e) for Redu | ood Toward | Nat Invastrant I | 3 | |
| | ite foundations subject to the section 494 | | | IOOIIIC | |
| • | · | to(a) tax off field | investment income j | | |
| If section 4940(d)(2) applies, leave | this part blank | | | | |
| Was the foundation liable for the se | ection 4942 tax on the distributable amou | unt of any year in | the base period? | | Yes 🗓 No |
| If "Yes," the foundation doesn't qua | ulify under section 4940(e) Do not comp | lete this part | | | |
| 1 Enter the appropriate amount in | n each column for each year, see the ins | structions before | making any entries | | |
| (a) | (b) | | (c) | | (d) |
| Base period years Calendar year (or tax year beginning ii | A discount of the same of the same | Net val | ue of noncharitable-use asse | ts | Distribution ratio (col (b) divided by col (c)) |
| 2018 | 482, | 446 | 8,557,2 | 253 | 0.056379 |
| 2017 | 393, | 824 | 9,087,6 | 504 | 0.043336 |
| 2016 | 263, | | 8,385,7 | 729 | 0.031376 |
| 2015 | 231, | | 7,940,5 | | 0.029201 |
| 2014 | 289, | | 8,548,5 | | 0.033828 |
| | | 1 | | | |
| 2 Total of line 1, column (d) | | | | 2 | 0.194120 |
| | e 5-year base period – divide the total oi | n line 2 by 5.0 o | r hv | | 0.23.220 |
| - | ation has been in existence if less than 5 | | . 5, | 3 | 0.038824 |
| the number of years the lounds | Mon has been in existence in less than s | yours | | <u> </u> | J.03002. |
| 4 Enter the net value of noncharu | table-use assets for 2019 from Part X, III | ne 5 | | 4 | 11,222,898 |
| - Enter the net value of honorall | able-use assets for 2019 from Fart X, in | 16 3 | | - | 11,222,000 |
| E. Multimbulino 4 husbino 2 | | | | 5 | 435,718 |
| 5 Multiply line 4 by line 3 | | | | 3_ | 433,710 |
| & Enter 19/ of pat investment ince | ome (19) of Bort Line (27h) | | | ء ا | 36 693 |
| 6 Enter 1% of net investment inco | ome (1% of Part I, line 270) | | | 6 | 36,683 |
| 7 Add lines Ford C | | | | - | 472 401 |
| 7 Add lines 5 and 6 | | | | 7 | 472,401 |
| 9 Enter quelibres distributions for | om Dort VII. line 4 | | | | 562,909 |
| 8 Enter qualifying distributions fro | om Part XII, line 4 Ian line 7, check the box in Part VI, line 1 | Ih and complete | that part using a 10/ | tay rate. Se | |
| Part VI instructions | an me 7, check the box in Fait VI, line | and complete | mat part using a 1 /6 | ian iale St | 20 1116 |
| i ait vi monucliono | | | | | |

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| Form | 990-PF (2019) DARR FAMILY FOUNDATION 37-1439200 | | | Page 4 | |
|------|---|------------|----------------|-------------------------|--|
| Pa | rt VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | 1948 – see | : instru | ctions) | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | , | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | 36 | ,683 | |
| | here ► X and enter 1% of Part I, line 27b | | | | |
| С | 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 | 3 | 36 | 683 | |
| 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 | 36 | 683 | |
| 6 | Credits/Payments | | | | |
| а | 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 3,864 | | | | |
| b | Exempt foreign organizations – tax withheld at source | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) | | | | |
| d | Backup withholding erroneously withheld 6d 6 | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | 7 | | 8,864 | |
| 8 | Enter any penalty for underpayment of estimated tax. Check her_ if Form 2220 is attached | 8 | | 010 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | 32 | 2,819 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | |
| 11_ | Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Refunded ▶ | 11 | | | |
| | art VII-A ! Statements Regarding Activities | | T | /a- Na | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | | es No X | |
| _ | participate or intervene in any political campaign? | | 1a | _ | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | 1,5 | x | |
| | instructions for the definition | | 1b | ^ | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | 1 | | |
| | published or distributed by the foundation in connection with the activities | | 1c - | | |
| C | Did the foundation file Form 1120-POL for this year? | | ''- | | |
| a | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ | | | | |
| _ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | _ | | | |
| е | on foundation managers > \$ | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | |
| - | 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 | $\overline{\mathbf{x}}$ | |
| 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? | N/A | 4b | | |
| 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 | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | |
| | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | _ _ | |
| | conflict with the state law remain in the governing instrument? | | | 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), an | d Part XV | 7 | x | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions MO | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | | |
| | (or designate) of each state as required by General Instruction G? 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) or | | | ^^ | |
| | 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes," | | | | |
| | complete Part XIV | | 9 | <u> </u> | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | | |
| | names and addresses STMT | 11 | | <u>x</u> | |
| | | F | orm 990 | -PF (2019) | |

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|---------|--|----------|-------------|------|--|
| Pa | art VII-A: Statements Regarding Activities (continued) | | | | |
| | | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | 1 | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | | 11 | | <u> </u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | | |
| | person had advisory privileges? If "Yes," attach statement. See instructions | | 12 | | <u> </u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | 13 | X | |
| | Website address ► DARRFF.ORG | | | | |
| 14 | The books are in care of ▶ HEATHER ZOROMSKI Telephone no ▶ | 417-8 | 88- | 149 | 5 |
| | 2870 S INGRAM MILL RD, STE D | | | | |
| | Located at ▶ SPRINGFIELD MO ZIP+4 ▶ | 65804 | <u>.</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 | 15 | | | |
| 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 | | _X_ |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | | | | - 1 |
| | the foreign country ▶ | | | | i |
| Pa | art 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? | X No | | | 1 |
| | (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? Yes | X No | | | - 1 |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 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)? | X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | | } |
| | foundation agreed to make a grant to or to employ the official for a period after | == | | | |
| | termination of government service, if terminating within 90 days) | X No | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | /- | | | لــــا |
| | Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | N/A | 1b | | <u> </u> |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | 37/3 | <u> </u> | | |
| | were not corrected before the first day of the tax year beginning in 2019? | N/A | 1c | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | | , , |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | | |
| а | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines | ₹ | | | |
| | 6d and 6e) for tax year(s) beginning before 2019? Yes | X No | | | |
| | If "Yes," list the years > 20 , 20 , 20 , 20 | | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | N/A | 2b | | |
| _ | all years listed, answer "No" and attach statement – see instructions) | H/ A | 20 | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | | [|
| 0- | ▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | | |
| 3a | | X No | | | |
| _ | at any time during the year? If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or | 110 | | | |
| Ь | 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 | | 1 | | |
| | 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 | | х |
| 4a b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | | 1 |
| U | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? | | 4b | | X |
| | Commission Personal restriction from the formation and the first and the formation and the first and | Fo | | 0-PF | (2019) |

| Form | 1 990-PF (2019) DARR FAMILY FOUNDATION | 37-1 | 439200 | | | Pa | ge 6 |
|-------|--|------------------------------------|-----------------------------|--|--|---------------------|-------------|
| | art VII-B Statements Regarding Activities for Which Forn | n 4720 May B | e Required (d | continued) | | | |
| 5a | During the year did the foundation pay or incur any amount to | | | | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | | res 🗓 No | - 1 | | |
| | (2) Influence the outcome of any specific public election (see section 4955), | or to carry on, | | | - 1 | | |
| | directly or indirectly, any voter registration drive? | | | res 🏋 No | İ | | |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes | | | ∕es X No | | | |
| | (4) Provide a grant to an organization other than a charitable, etc., organization | on described in | | | | | |
| | section 4945(d)(4)(A)? See instructions | | | Yes 🔀 No | | | |
| | (5) Provide for any purpose other than religious, charitable, scientific, literary | , or educational | ـ | . 📻 | | | |
| | purposes, or for the prevention of cruelty to children or animals? | | | res 🗓 No | | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify u | | | NT / 7 | | | |
| | in Regulations section 53 4945 or in a current notice regarding disaster assis | | ctions | N/A | 5b | | |
| _ | Organizations relying on a current notice regarding disaster assistance, chec | | | – – | | | |
| С | If the answer is "Yes" to question 5a(4), does the foundation claim exemption | from the tax | NI/A T | res _ No | | | |
| | because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d) | | N/A | res _ No | 1 | | |
| 6- | • • • | nav premiume | | | | | |
| 6a | Did the foundation, during the year, receive any funds, directly or indirectly, to on a personal benefit contract? | pay premiums | L., • | Yes ဩ No | | | |
| b | Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit of | | | 6b | | x |
| | If "Yes" to 6b, file Form 8870 | personal bonome | | ľ | | | |
| 7a | At any time during the tax year, was the foundation a party to a prohibited tax | shelter transaction | on? | Yes X No | | | |
| b | If "Yes," did the foundation receive any proceeds or have any net income attr | | | N/A | 7b | | |
| 8 | Is the foundation subject to the section 4960 tax on payment(s) of more than | | _ | ` | | | |
| | remuneration or excess parachute payment(s) during the year? | | | <u> </u> | | | |
| Pa | art VIII Information About Officers, Directors, Trustees, I | Foundation M | anagers, Hig | hly Paid Emp | oloye | es, | |
| | and Contractors | | | | | | |
| 1 1 | list all officers, directors, trustees, and foundation managers and their co | ompensation. Se | e instructions. | | | | |
| | | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit | (a) Evo | ense ac | ecount |
| | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | plans and deferred | | r allowa | |
| | | develop to permon | | compensation | <u> </u> | | |
| SE | EE STATEMENT 12 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | <u> </u> | | | |
| | | ŀ | | | | | |
| | | | - | | | | |
| | | ł | | | | | |
| | Compensation of five highest-paid employees (other than those include | ed on line 1 – see | instructions). I | f none, enter | | | |
| - | "NONE." | | ,· | ., | | | |
| | | (b) Title, and average | | (d) Contributions to | | | |
| | (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | employee benefit plans and deferred | | ense ad r allowa | |
| | | devoted to position | | compensation | 0,,,,0 | , | |
| N | ONE | | | | | | |
| | | | | | | | |
| | | ļ. | | | | | |
| | | | | - | <u> </u> | | |
| | | } | | | | | |
| | | | | | | | |
| | | - | | | | | |
| | | 1 | | | | | |
| | | } | | | | | |
| Tota | at number of other employees paid over \$50,000 | l | | • | _ | | 0 |
| . 516 | an individual di dirita dirita dalla di di dedigada | · | | Fo | m 99 | 0-PF | |

| Form 990-PF (2019) DARR FAMILY FOUNDATION | 37-1439200 | Page 7 |
|--|--------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued) | oundation Managers, Highly Paid | Employees, |
| 3 Five highest-paid independent contractors for professional services. See | instructions. If none, enter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | - |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | , |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform | nation such as the number of | Evanage |
| organizations and other beneficianes served, conferences convened, research papers produced, etc | | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| Δ | | |
| • | | |
| | | |
| Part IX-B Summary of Program-Related Investments (see i | nstructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar | nd 2 | Amount |
| 1 N/A | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions | | |
| 3 | | |
| | | |
| Total. Add lines 1 through 3 | • | |

Form **990-PF** (2019)

| Form | 990-PF (2019) DARR FAMILY FOUNDATION | 37-1439200 | | Page 8 |
|------|---|--|----------|-----------------------|
| | rt X Minimum Investment Return (All domestic founda | tions must complete this part. F | oreign | foundations, |
| | see instructions.) | | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying o | ut charitable, etc, | | |
| | purposes | | | |
| а | Average monthly fair market value of securities | | 1a | 11,364,222 |
| b | Average of monthly cash balances | | 1b | 29,583 |
| С | Fair market value of all other assets (see instructions) | | 1c | |
| d | Total (add lines 1a, b, and c) | | 1d | 11,393,805 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | | |
| | 1c (attach detailed explanation) | | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | |
| 3 | Subtract line 2 from line 1d | | 3 | 11,393,805 |
| 4 | Cash deemed held for charitable activities Enter 11/2% of line 3 (for greate | er amount, see | | |
| | instructions) | | 4 | 170,907 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter | r here and on Part V, line 4 | 5 | 170,907 11,222,898 |
| 6 | Minimum investment return. Enter 5% of line 5 | | 6 | 561,145 |
| Pa | irt XI Distributable Amount (see instructions) (Section 4 | 942(1)(3) and (j)(5) private oper | ating fo | |
| | and certain foreign organizations, check here I | | Ŭ | |
| 1 | Minimum investment return from Part X, line 6 | | 1 | 561,145 |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | 2a 36,68 | 3 | |
| b | Income tax for 2019. (This does not include the tax from Part VI) | 2b | 7 1 | |
| C | Add lines 2a and 2b | | 2c | 36,683 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | | 3 | 36,683 524,462 |
| 4 | Recoveries of amounts treated as qualifying distributions | | 4 | |
| 5 | Add lines 3 and 4 | | 5 | 524,462 |
| 6 | Deduction from distributable amount (see instructions) | | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here | and on Part XIII, | | |
| | line 1 | | 7 | 524,462 |
| Pá | art XII Qualifying Distributions (see instructions) | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable | e, etc., purposes | | - |
| а | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | | 1a | 562,909 |
| b | Program-related investments – total from Part IX-B | | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying of | out charitable, etc., | | |
| | purposes | | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | | |
| 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 Par | rt V, line 8, and Part XIII, line 4 | 4 | 562,909 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax | | | |
| - | Enter 1% of Part I, line 27b See instructions | | 5 | 36,683 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 6 | 526,226 |
| - | Note: The amount on line 6 will be used in Part V, column (b), in subsequ | ent years when calculating whether the | founda | |
| | qualified for the coation 4040(a) radication of tay in those years | | | |

Form 990-PF (2019)

| <u>-orn</u> | 1990-PF (2019) DARR FAMILY FOUNDATION | | <u> 37-14392</u> | 00 | Page 9 |
|-------------|---|--------|---------------------|--------|--|
| Pa | art XIII Undistributed Income (see instructions |) | | | |
| | | (a) | (b) | (c) | (d) |
| 1 | Distributable amount for 2019 from Part XI, | Corpus | Years prior to 2018 | 2018 | 2019 |
| | line 7 | | | | 524,462 |
| 2 | Undistributed income, if any, as of the end of 2019 | | | | |
| | Enter amount for 2018 only | | | 77,325 | |
| | Total for prior years 20 , 20 , 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2019 | | | | |
| | From 2014 | | | | |
| | From 2015 | | | | |
| | From 2016 | |] | j | |
| | From 2017 | | | | |
| | From 2018 | | | | |
| | | | <u> </u> | | |
| 4 | Total of lines 3a through e | | | | · · · · · · · · · · · · · · · · · · · |
| • | Qualifying distributions for 2019 from Part XII, line 4 \$ 562,909 | | | | 1 |
| _ | | | | 77,325 | |
| | Applied to 2018, but not more than line 2a | | | 11,323 | |
| D | Applied to undistributed income of prior years | | | | |
| _ | (Election required – see instructions) | | <u> </u> | | - |
| C | Treated as distributions out of corpus (Election | | | | |
| _ | required – see instructions) | | | | 405 504 |
| | Applied to 2019 distributable amount | | | | 485,584 |
| | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2019 | | | | |
| | (If an amount appears in column (d), the same | | | | |
| _ | amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | | | | |
| | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | | | |
| C | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | , | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount – see instructions | | | | |
| е | Undistributed income for 2018 Subtract line | | | | • |
| | 4a from line 2a Taxable amount - see | | | | |
| | instructions | | | | <u>. </u> |
| f | Undistributed income for 2019 Subtract lines | | | | |
| | 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2020 | | | | 38,878 |
| 7 | Amounts treated as distributions out of corpus | | | | |
| | to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| | required—see instructions) | | ļ | | |
| 8 | Excess distributions carryover from 2014 not | | | | j |
| | applied on line 5 or line 7 (see instructions) | | | | |
| 9 | Excess distributions carryover to 2020. | | | | |
| | Subtract lines 7 and 8 from line 6a | | | | <u> </u> |
| 10 | Analysis of line 9 | | | | |
| а | Excess from 2015 | | | | |
| b | Excess from 2016 | | , | | |
| С | Excess from 2017 | | | | İ |
| d | Excess from 2018 | | | | |
| _ | Evenes from 2010 | | 1 | | |

| • | AND DIND DINTIN | | | 27 1420 | 200 | / 2000 11 |
|--------|---|-------------------------|--------------------------|---------------------------|--------------------------|----------------|
| | n 990-PF (2019) DARR FAMILY art XIV Private Operating Fo | FOUNDATION | N instructions and | 37-1439 | | Page 1 |
| 1a | If the foundation has received a ruling o | | | | | |
| ıa | foundation, and the ruling is effective for | | | perating | | |
| ь | Check box to indicate whether the found | | | escribed in section | 4942(J)(3) or 1 494 | 42(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | T |
| | income from Part I or the minimum | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| | investment return from Part X for | | | | | |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | 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 | · <u></u> | | | | |
| е | Qualifying distributions made directly | | | | | |
| | for active conduct of exempt activities | | | | | |
| | Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | A . | | |
| | alternative test relied upon | | / | | | |
| а | "Assets" alternative test – enter | | | | | |
| | (1) Value of all assets | | | | | - |
| | (2) Value of assets qualifying under | | | | | |
| _ | section 4942(j)(3)(B)(i) "Endowment" alternative test – enter 2/3 | | | | | |
| b | of minimum investment return shown in | • | / | | | |
| | Part X, line 6, for each year listed | | / | | | |
| С | "Support" alternative test – enter | | 1 | | | |
| · | (1) Total support other than gross | | y | | | |
| | 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 | / | | | | <u> </u> |
| _ | (4) Gross investment income | <u>/</u> | A- Abi | · if the formulati | on had 65 000 or | mara in acceta |
| P | art XV Supplementary Infor | | | it the foundati | on nad \$5,000 or | more in assets |
| | any time during the y Information Regarding Foundation M | | ictions.j | | | |
| 1 a | List any managers of the foundation wh | | more than 2% of the | total contributions re | reived by the foundation | nn. |
| а | before the close of any tax year (but on | | | | | // 1 |
| | SEE STATEMENT 13 | ly il tiley have contin | odiod more man pe, | ,00, (000 000.0 | ·· (=)(=) / | |
| | List any managers of the foundation wh | o own 10% or more | of the stock of a corp | oration (or an equal | ly large portion of the | |
| _ | ownership of a partnership or other enti | | | | , , | |
| | N/A | | | | | |
| 2 | Information Regarding Contribution, | Grant, Gift, Loan, | Scholarship, etc., P | rograms: | | |
| | Check here ▶ if the foundation only | y makes contributior | ns to preselected cha | ritable organizations | and does not accept | |
| | unsolicited requests for funds. If the four | ndation makes gifts | , grants, etc , to indiv | iduals or organizatio | ns under other condition | ons, |
| | complete items 2a, b, c, and d See inst | | | | | |
| а | The name, address, and telephone nun | | s of the person to wh | nom applications sho | ould be addressed | |
| | WEBSITE ONLY 417-88 | | = 0.04 | | | |
| | WEBSITE ONLY SPRING | | | | | |
| b | The form in which applications should be | e submitted and info | ormation and materia | is they should includ | e | |
| | SEE STATEMENT 14 | | | | | |
| С | Any submission deadlines | | | | | |
| | SEE STATEMENT 15 | s cuch so by sees | nhical areas, charita | hle fields, kinds of in | etitutione or other | |
| đ | • | s, such as by geogra | pilicai areas, criarita | ole lielus, kiilus oi III | amunons, or other | |
| | factors SEE STATEMENT 16 | | | | | |
| | ~~~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | |

Form 990-PF (2019) DARR FAMILY FOUNDATION

| Part XV Supplementary Information 3 Grants and Contributions Paid Durin | | for Future Paym | ent | |
|---|--|----------------------|----------------------------------|------------------|
| 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 | | |
| a Paid during the year BIG BROTHERS BIG SISTERS 3372 W BATTLEFIELD RD SPRINGFIELD MO 65807 | OF THE OZA NONE | PC | CHARITABLE | 18,660 |
| BOYS & GIRLS CLUB OF SPRI 1410 N FREMONT AVE SPRINGFIELD MO 65802 | NGFIELD NONE | PC | CHARITABLE | 10,000 |
| CARE TO LEARN 1740 S GLENSTONE AVE, ST SPRINGFIELD MO 65804 | ENONE | PC | CHARITABLE | 20,000 |
| CHILDREN'S SMILE CENTER 601 N 21ST ST OZARK MO 65721 | NONE | PC | CHARITABLE | 14,217 |
| COMMUNITY FOUNDATION OF T 425 E TRAFFICWAY ST SPRINGFIELD MO 65806 | HE OZARKS NONE | PC | CHARITABLE | 25,000 |
| COMMUNITY PARTNERSHIP OF 330 N JEFFERSON AVE SPRINGFIELD MO 65806 | THE OZARKS NONE | PC | CHARITABLE | 100,000 |
| COUNCIL OF CHURCHES OF TH PO BOX 3947 SPRINGFIELD MO 65808 | E OZARKS NONE | PC | CHARITABLE | 15,437 |
| DISCOVERY CENTER OF SPRIN 438 E ST LOUIS ST SPRINGFIELD MO 65806 | GFIELD NONE | PC | CHARITABLE | 7,500 |
| DREW LEWIS FOUNDATION 1126 N BROADWAY AVE SPRINGFIELD MO 65802 | NONE | PC | CHARITABLE | 16,040 |
| EVERTON PTSA 211 SCHOOL STREET EVERTON MO 65646 | NONE | PC | CHARITABLE ▶ 3a | 2,000 456,539 |
| b Approved for future payment FOUNDATION FOR SPRINGFIEL 1131 N BOONVILLE AVE SPRINGFIELD MO 65802 | D PUBLIC S NONE | PC | CHARITABLE | 400,000 |
| | | | | |
| Total | | | > 3b | 400,000 |

Form 990-PF (2019) DARR FAMILY FOUNDATION

| Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any toundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year FOUNDATION FOR SPRINGFIELD PUBLIC S PC NONE 1131 N BOONVILLE AVE CHARITABLE 116,920 SPRINGFIELD MO 65802 HARMONY HOUSE PC 3404 E RIDGEVIEW ST NONE CHARITABLE 5,000 SPRINGFIELD MO 65804 LEAST OF THESE, INC. NONE PC1720 W JAMES RIVER RD CHARITABLE 2,515 OZARK MO 65721 LIFE360 COMMUNITY SERVICES PC 1126 N BROADWAY NONE SPRINGFIELD MO 65802 CHARITABLE 8,000 LOST & FOUND GRIEF CENTER NONE PC 1555 S GLENSTONE AVE CHARITABLE 3,000 SPRINGFIELD MO 65804 MISSOURI STATE UNIVERSITY FOUNDATIO PCNONE 300 S JEFFERSON AVE 5,000 CHARITABLE SPRINGFIELD MO 65801 OZARKS FOOD HARVEST PC PO BOX 5746 NONE CHARITABLE 20,000 SPRINGFIELD MO 65801 OZARKS LITERACY COUNCIL PCNONE 397 E CENTRAL ST CHARITABLE 18,500 SPRINGFIELD MO 65802 PRESBYTERIAN CHILDREN'S HOME & SERV PC 1220 N LINDBERGH BLVD NONE CHARITABLE 10,000 ST LOUIS MO 63132 RONALD MCDONALD HOUSE CHARITIES PC NONE 949 E PRIMROSE ST CHARITABLE 4,500 SPRINGFIELD MO 65807 ▶ 3a Total **b** Approved for future payment N/A Total ▶ 3b

Form 990-PF (2019) DARR FAMILY FOUNDATION

| Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to Amount status of any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SMCOG PC 110 PARK CENTRAL SOUARE NONE CHARITABLE 1,000 SPRINGFIELD MO 65806 SPRINGFIELD-GREENE CO PUBLIC LIBRAR 4653 S CAMPBELL AVE NONE PC CHARITABLE 3,800 SPRINGFIELD MO 65810 VICTORY ACADEMY PC 437 N MAIN ST NONE CHARITABLE 4,250 SEYMOUR MO 65746 VISION REHABILITATION CENTER PC1661 W ELFINDALE ST NONE 9,000 SPRINGFIELD MO 65807 CHARITABLE WATERSHED COMMITTEE - THE OZARKS PC 2400 E VALLEY WATER MILL NONE CHARITABLE 10,000 SPRINGFIELD MO 65803 WOMEN IN NEED INC. PC NONE PO BOX 4626 CHARITABLE 6,200 SPRINGFIELD MO 65808 ▶ 3a Total **b** Approved for future payment N/A ▶ 3b **Total**

Preparer's signature

65804

Phone no

TREASURER

Date

Form 990-PF (2019)

417-882-4300

Check

Paid

Preparei

Use Only

Signature of officer or trustee
Print/Type preparer's name

Firm's name

Firm's address ▶

BARBARA J. HOUSER, CPA

KPM CPAS,

PC

1445 E REPUBLIC RD

SPRINGFIELD, MO

Schedule B

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

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

Employer identification number

| DARR FAMILY | FOUNDATION | 37-1439200 | | | | | | |
|--|--|---|--|--|--|--|--|--|
| Organization type (check | cone) | | | | | | | |
| Filers of: | Section: | | | | | | | |
| Form 990 or 990-EZ 501(c)() (enter number) organization | | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foun | ndation | | | | | | |
| | 527 political organization | | | | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | ion | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | | |
| | | | | | | | | |
| | n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule an | nd a Special Rule See | | | | | | |
| General Rule | | | | | | | | |
| | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution or property) from any one contributor. Complete Parts I and II. See instruction contributions. | | | | | | | |
| Special Rules | | | | | | | | |
| regulations under 13, 16a, or 16b, a | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/5 sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 and that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 | 0 or 990-EZ), Part II, line s of the greater of (1) | | | | | | |
| contributor, during | 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III | | | | | | | |
| contributor, during contributions total during the year fo | 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. | | | | | | | |
| 990-EZ, or 990-PF), but i | that isn't covered by the General Rule and/or the Special Rules doesn't file to the transfer of the transfer o | ine H of its Form 990-EZ or on its | | | | | | |

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

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Page 2

Name of organization
DARR FAMILY FOUNDATION

Employer identification number 37 - 1439200

| Part | Contributors (see instructions). Use | duplicate copies of | Part I if additional space i | s needed. |
|------------|---|---------------------|------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 1 | TOM & MARSHA SLAIGHT 4361 EAST BERKELEY ST SPRINGFIELD MO | 65809 | \$ 5,076,790 | Person X Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 2 | ERIN DANASTASIO 2065 S CAVE CREEK LN SPRINGFIELD MO | 65809 | \$ 500,836 | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| 3 | TYLER HELLWEG 3934 E EAGLESCLIFFE DR | 65809 | \$ 500,639 | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| NO. | Name, address, and En 1 | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | | (c) Total contributions | (d) Type of contribution |
| | | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | , | (c) Total contributions | (d) Type of contribution |
| | | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

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

Name of organization

DARR FAMILY FOUNDATION

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Employer identification number 37 - 1439200

| a) No. from Part I | (b) Description of noncash property given | • | (c) FMV (or estimate) (See instructions) | (d) Date received |
|---------------------------|--|----|---|----------------------|
| 1 | SECURITIES | | | |
| • | | \$ | 3,688,555 | 12/12/19 |
| a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | SECURITIES | | | |
| | | \$ | 295,887 | 12/30/19 |
| a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 1 | SECURITIES | | | |
| _ | | \$ | 1,022,348 | 12/30/19 |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 2 | SECURITIES | | | |
| | | \$ | 500,836 | 12/26/19 |
| (a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (See instructions) | (d) Date received |
| 3 | SECURITIES | | | |
| | | \$ | 500,639 | 12/26/19 |
| a) No. from Part I | (b) Description of noncash property given | | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | | |
| | | \$ | | |

| 00415400 Darr Family Foundation 37-1439200 FYE: 6/30/2020 | Federal (| Federal Statements | | 11/9/2020 8:54 AM Page 1 |
|---|---|--|-----------------|-----------------------------|
| SI | Statement 1 - Form 990-PF | - Form 990-PF, Part I, Line 16a - Legal Fees | al Fees | |
| Description INDIRECT LEGAL FEES TOTAL | Total \$ 1,900 \$ 1,900 | Investment | Adjusted Net | Charitable Purpose \$ 1,900 |
| State | Statement 2 - Form 990-PF, P | Part I, Line 16b - Accounting Fees | nting Fees | |
| Description INDIRECT ACCOUNTING FEES TOTAL | * Total \$ 3,440 \$ \$ 3,440 | Net Investment | Adjusted Net | Charitable Purpose \$ 3,440 |
| Stateme | Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees | I, Line 16c - Other Prof | essional Fees | |
| Description INVESTMENT FEES TOTAL | Fotal \$ 33,011 \$ 33,011 | Net Investment \$ 33,011 \$ | Adjusted Net | Charitable Purpose |
| | Statement 4 - Form 990 | - Form 990-PF, Part I, Line 18 - Taxes | axes | |
| Description | Total | Net Investment | Adjusted Net | Charitable Purpose |
| EXCISE TAX TOTAL | \$ 36,200 \$ 36,200 | w w | \$\psi_0 | \$ \$ |
| | | | | |
| | | | | |
| | | | | 1-4 |

| , , | | | | | | | | <u>-</u> | · |
|---|--|-----------------------|---|--|--|---|--|----------|-------|
| 11/9/2020 8:54 AM Page 2 | | Charitable Purpose | \$ 1,493 6,013 6,013 248 268 . 9,962 . 9,962 | | Fair Market Value \$ 3,809,896 6,455,435 \$ 10,265,331 | | Fair Market Value \$ 3,377,499 | | . 2-9 |
| | enses | Adjusted Net | 0 | k Investments | Basis of Valuation MARKET MARKET | I Investments | Basis of Valuation | | |
| ements | 990-PF, Part I, Line 23 - Other Expenses | Net Investment | · · · · · · · · · · · · · · · · · · · | 10b - Corporate Stock | End of Year \$ 3,809,896 6,455,435 \$ 10,265,331 | 10c - Corporate Bonc | End of Year \$ 3,377,499 \$ 3,377,499 | | |
| Federal Statements | Form 990-PF, Part | Total | 1,493 6,013 6,013 248 268 9,962 39 18,023 | - Form 990-PF, Part II, Line 10b - Corporate Stock Investments | Beginning of Year \$ 4,151,869 | Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments | Beginning of Year \$ 2,888,370 \$ | | |
| 00415400 Darr Family Foundation 37-1439200 FYE: 6/30/2020 | Statement 5 - Form | Description | EXPENSES DUES AND SUBSCRIPTIONS INSURANCE MISCELLANEOUS OFFICE SUPPLIES IT & WEBSITE MARKETING & ADVERTISING TOTAL | Statement 6 - Form | SCHWAB #0109 - EQUITY FUNDS SCHWAB #0109 - EXCHANGE TRADED FUNDS TOTAL | Statement 7 - Form | Description SCHWAB #0109 - BOND FUNDS TOTAL | | |

00415400 Darr Family Foundation

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Federal Statements

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Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

| Description | eginning of Year | End of Year | Fair Market Value |
|--------------------------|---------------------|--------------------|--------------------------|
| RECOVERABLE EXCISE TAXES | \$ 3,867 | \$ | \$ |
| TOTAL | \$ 3,867 | \$ 0 | \$ 0 |

Statement 9 - Form 990-PF, Part III, Line 3 - Other Increases

| | | | Description | | Α | mount |
|------------|------|----|-------------|-----|---|-------------------|
| UNREALIZED | GAIN | ON | INVESTMENTS | \$ | 1 | <u>.,</u> 546,869 |
| TOTAL | | | | \$_ | 1 | .,546,869 |

Statement 10 - Form 990-PF, Part III, Line 5 - Other Decreases

| | | <u>Des</u> | cription | | Amount |
|------------|-----------|------------|-------------|-----|------------|
| UNREALIZED | GAIN/LOSS | ОИ | INVESTMENTS | \$_ | 4,023,497 |
| TOTAL | | | | \$_ | 4,023,497 |

| 00415400 Darr Family Foundation 37-1439200 FYE: 6/30/2020 | ındation | Federal Statements | tatement | S | | 11/9/2020 8:54 AM Page 4 |
|---|--|----------------------|-----------------------|--|------------------|-----------------------------|
| | Statement 11 - Fo | rm 990-PF, Part VII- | A, Line 10 - | Statement 11 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors | utors | |
| Name | | | | | | |
| | | Address | | City | City, State, Zip | |
| TOM & MARSHA SLAIGHT | 4361 EAST BERKELEY | LEY ST | SPRIN | SPRINGFIELD MO 65809 | | |
| EKIN DANASIASIO | 2065 S CAVE CREEK | SEK LN | SPRIN | SPRINGFIELD MO 65809 | | |
| TIPEN DEPLANED | 3934 E EAGLESCLIFFE | IFFE DR | SPRIN | SPRINGFIELD MO 65898 | | |
| | Statement 12 - Form 990-PF, Part VIII, | | Line 1 - List of Etc. | - List of Officers, Directors, Trustees, | Trustees, | |
| Name and Address | _ | Title | Average Hours | Compensation | Benefits | Expenses |
| ERIN N DANASTASIO 2870 S INGRAM MILL RD, SPRINGFIELD MO 65804 | STE D | PRESIDENT | 1.00 | 0 | 0 | 0 |
| TARA L CHITWOOD 2870 S INGRAM MILL RD, SPRINGFIELD MO 65804 | STE D | VICE PRESIDE | 1.00 | 0 | 0 | 0 |
| KATE HELLWEG 2870 S INGRAM MILL RD, SPRINGFIELD MO 65804 | STE D | SECRETARY | 1.00 | 0 | 0 | 0 |
| TIMOTHY L CHITWOOD 2870 S INGRAM MILL RD, SP,RINGFIELD MO 65804 | STE D | TREASURER | 1.00 | 0 | 0 | 0 |
| THOMAS L SLAIGHT 2870 S INGRAM MILL RD, SPRINGFIELD MO 65804 | STE D | DIRECTOR | 1.00 | 0 | 0 | 0 |
| ZACHARY D SLAIGHT 2870 S INGRAM MILL RD, SPRINGFIELD MO 65804 | STE D | DIRECTOR | 1.00 | 0 | 0 | |
| | | | | | | 11-12 |

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|--|--------------------------|--------------------|---|------------|-----------------------------|
| FYE: 6/30/2020 | | | | | |
| Statement 12 - Form 990-PF, Part | ı 990-PF, Part VIII, Liı | ne 1 - List of | Will, Line 1 - List of Officers, Directors, Trustees, | _Trustees, | |
| | Etc. (cc | Etc. (continued) | | | |
| Name and Address | Title | Average Hours | Compensation | Benefits | Expenses |
| MARSHA D SLAIGHT 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | DIRECTOR | 1.00 | 0 | 0 | 0 |
| SHERLY D HELLWEG 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | DIRECTOR | 1.00 | 0 | 0 | 0 |
| KURT D HELLWEG 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | DIRECTOR | 1.00 | 0 | 0 | 0 |
| TYLER D HELLWEG 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | DIRECTOR | 1.00 | 0 | 0 | 0 |
| CODY DANASTASIO 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | DIRECTOR | 1.00 | 0 | 0 | 0 |
| HEATHER ZOROMSKI 2870 S INGRAM MILL RD, STE D SPRINGFIELD MO 65804 | EXECUTIVE DI | 40.00 | 72,875 | 2,729 | 0 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | : | | . 12 |

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Statement 13 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

| Name of Manager | Amount |
|-------------------|--------|
| THOMAS L SLAIGHT | \$ |
| MARSHA D SLAIGHT | |
| SHERYL D HELLWEG | |
| KURT D HELLWEG | |
| ERIN N DANASTASIO | |
| ZACHARY D SLAIGHT | |
| TARA L CHITWOOD | |
| TYLER D HELLWEG | |
| TOTAL | \$ 0 |

Statement 14 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

THE DARR FAMILY FOUNDAITON ONLY ACCEPTS GRANT REQUESTS ONLINE AT WWW.DARRFF.ORG. NO CONCEPT LETTER IS REQUIRED. INTERESTED CHARITABLE ORGANIZATIONS MAY ACCESS THE WEBSITE FOR FURTHER INFORMATION AND DETAILED INSTRUCTIONS REGARDING APPLICATION SUBMISSION INCLUDING DEADLINES AND GEOGRAPHICAL AREA SERVED. THE DARR FAMILY FOUNDATION CONSIDERS REQUESTS FROM NON-PROFIT AGENCIES OPERATING AND/OR PROVIDING SERVICES IN THE ESTABLISHED GEOGRAPHICAL SERVICE AREA THAT ALIGN WITH THE FOUNDATION'S MISSION, TO EMPOWER AT-RISK YOUTH TO OVERCOME BARRIERS TO OPPORTUNITY. ORGANIZATION SELECTED FOR A GRANT AWARD WILL BE NOTIFIED IN WRITING AND/OR ELECTRONICALLY.

Statement 15 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

APPLICATION DEADLINES ARE MARCH 15TH AND SEPTEMBER 15TH ANNUALLY BY 5PM. NO LATE PROPOSALS WILL BE ACCEPTED.

Statement 16 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

ORGANIZATIONS/APPLICATIONS THAT WILL NOT BE CONSIDERED INCLUDE: THOSE FROM FOR-PROFIT ORGANIZATIONS, PROJECTS OUTSIDE OF THE DARR FAMILY FOUNDATION MISSION, ORGANIZATIONS THAT DISCRIMINATE ON THE BASIS OF GENDER, RACE, RELIGION, ETHNIC ORIGIN OR SEXUAL ORIENTATION, POLITICAL CAMPAIGNS, SPECIAL EVENT FUNDING, AND LOAN PAYMENT/DEBT REDUCTION. OTHER EXCLUSIONS MAY APPLY AT THE DISCRETION OF THE FOUNDATION.