Return of Private Foundation

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

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i	For c	alendar year 2019 or tax year beginning	09	9/06 , 2019, and end	ding 06/30, 20 20
		of foundation <u>W.R. CO</u> RLEY CHARITABI			A Employer identification number
	C/0	SMB TRUST SERVICES			86-1385305
/		er and street (or P.O. box number if mail is not delivered to	street address)	Room/su	Ite B Telephone number (see instructions)
	100	00 E 32ND ST			(417) 623-3424
ō		town, state or province, country, and ZIP or foreign posta	Il code		
	•	,, ,,,,,,			C If exemption application is
	JOE	PLIN, MO 64804			pending, check here
ī		eck all that apply X Initial return	Initial return	of a former public cha	arity a
`	5 Oii	Final return	Amended re	•	D 1 Foreign organizations, check here 2 Foreign organizations meeting the
		Address change	Name chang		85% test, check here and attach
ī	ı Ch	eck type of organization X Section 501(computation ,
•	$\overline{}$		Other taxable pr	1 4	E If private foundation status was terminated
-		Section 4947(a)(1) nonexempt charitable trust	unting method X C		under section 507(b)(1)(A), check here .
'		1—		asn Accidai	F If the foundation is in a 60-month termination
		105 101	ther (specify)	ech hoose \	under section 507(b)(1)(B), check here .
			column (d), must be on c	asn basis)	(d) Disbursements
K	Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)			
	2	Check X if the foundation is not required to attach Sch B			
	3	Interest on savings and temporary cash investments.	3.	3.	<u> </u>
	4	Dividends and interest from securities	2,612.	2,612.	·
	5a	Gross rents	· · · · · · · · · · · · · · · · · · ·		
	b	Net rental income or (loss)		·-·	RECEIVED
9	6 a	Net gain or (loss) from sale of assets not on line 10	151.		
2022	E 6	Gross sales price for all 4,500.	<u> </u>		
20	7	Capital gain net income (from Part IV, line 2) .		151.	APR 1 6 2021
≈ ⁿ	8 2	Net short-term capital gain			S A R 1 2021
8	9	Income modifications			OGDEN UT
$\frac{1}{2}$	10 a	Gross sales less returns and allowances			OODEILE
MAR	b	Less Cost of goods sold .			
	c	Gross profit or (loss) (attach schedule)			
Щ	11	Other income (attach schedule)			
Ź.	12	Total. Add lines 1 through 11	2,766.		<u>- </u>
SANNED	13	Compensation of officers, directors, trustees, etc	1,851.	926.	92
	14	Other employee salaries and wages			
2	15	Pension plans, employee benefits			
\$	2 16a	Legal fees (attach schedule)	400.		400
П	р	Accounting fees (attach schedule)	280.		280
	c	Other professional fees (attach schedule)			
7	17	Interest			
<u>.</u>	18	Taxes (attach schedule) (see instructions)			
	19	Depreciation (attach schedule) and depletion.			
5	20	Occupancy			
7	21	Travel, conferences, and meetings			<u> </u>
SC Operating and Administrative Expenses	22	Printing and publications			
۶	23	Other expenses (attach schedule)			
	24	Total operating and administrative expenses.			
ğ	[Add lines 13 through 23	2,531.	926.	1,600
ć	25	Contributions, gifts, grants paid			
	26	Total expenses and disbursements Add lines 24 and 25	2,531.	926.	0. 1,606
-	27	Subtract line 26 from line 12			
		Excess of revenue over expenses and disbursements	235.		
		Net investment income (if negative, enter -0-)		1,840.	
		Adjusted net income (if negative enter -0-).			

Fo	rm 990	O-PF(2019) W R CORLEY CHARITABL	E TRUST		86-138	35305	Page 2
P	art I	Balance Sheets Attached schedules and amounts in the	Beginning of year	Ε	nd of year		
_	<u> </u>	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c)	Fair Marke	et Value
-	'1			1	7.		17
		Cash - non-interest-bearing		4,20)3.		4,203
	2	Savings and temporary cash investments			_		 _
	3	Accounts receivable >					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ►			• -		-
		Less allowance for doubtful accounts ▶	<u> </u>				
	5	Grants receivable	·-	<u>-</u>			
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)	y v yarden		-		-
		Less allowance for doubtful accounts ▶	-				
ţ	8	Inventories for sale or use					
ssets	9	Prepaid expenses and deferred charges					
ĕ	10a	Investments - U S and state government obligations (attach schedule)					
	Ь	Investments - corporate stock (attach schedule)		43,59			61,325
		Investments - corporate bonds (attach schedule)	-	64,82	23.		69,559
	11	Investments - land, buildings,					1
		Less accumulated depreciation			.		
		(attach schedule)		_			
	12 13	Investments - mortgage loans				· · · · · · · · · · · · · · · · · · ·	
	14	The distribution of the state o	-				
		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				-	~
		(attach schedule)	· -				
	15	Other assets (describe ►)					
	16	Total assets (to be completed by all filers - see the	0.	112,63	13	1	35,104
_		instructions Also, see page 1, item l)		112,03	,,,,		33,104
	17	Accounts payable and accrued expenses					
	18	Grants payable	-	-			<u> </u>
ies	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)	0.		0.		
es		Foundations that follow FASB ASC 958, check here					
õ		and complete lines 24, 25, 29, and 30.			Ì		
<u>a</u>	24	Net assets without donor restrictions					
Ba	24 25 26	Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·					
ᅙ		Foundations that do not follow FASB ASC 958, check here			ļ	-	,
Ę		and complete lines 26 through 30					
Ä	26	Capital stock, trust principal, or current funds					
S	27	Paid-in or capital surplus, or land, bldg, and equipment fund				•	•
Assets	28	Retained earnings, accumulated income, endowment, or other funds		112,63	33.		
S	29	Total net assets or fund balances (see instructions)	0.	112,63	33.		
7	30	Total liabilities and net assets/fund balances (see		<u></u>			
Net	30	·	0.	112,63	3.		
-		Analysis of Changes in Net Assets or Fund Bala					
		al net assets or fund balances at beginning of year - Part		must agree with			
7					.		0
_		-of-year figure reported on prior year's return)		i	2		235
		Enter amount from Part I, line 27a					$\frac{235}{12,398}$
		er increases not included in line 2 (itemize) ▶ ATCH 1			3		12,633
		I lines 1, 2, and 3		· <i>•</i> · · · · · · · ⊢	4		12,033
5	Dec	creases not included in line 2 (itemize)			5		12,633
_	T-4.	al not access or fund belonger at and of year /line 4 minus	Jing 6) Dart II column /	ו פתוו וח	6	J	14.033.

Dartily Comital Cain	o and I asses for Tay on Inv	rootmant Income	<u></u>		raye e
	s and Losses for Tax on Inv		(b) How acquired P - Purchase	I	
 (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) 				(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a SEE PART IV SCH			D - Donation		, ,,,,,,,,
	SDOFF		-		
<u>b</u>					
<u> </u>			 		
<u>d</u>					
e	T	4.20-4			- <u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
<u>a</u>					
b					
d	***				
<u>e</u>					
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from co	
a			 -		
			<u> </u>		<u>-</u>
			 		
				<u> </u>	
<u>e</u>			_		
	(If a	ain, also enter in Part I, line 7			
Capital gain net income	A OT (DAT CADITAL IOSE)	loss), enter -0- in Part I, line 7	2		151.
3 Net short-term capital	gain or (loss) as defined in sections	• • •		- -	
	Part I, line 8, column (c) See ins				
_		•	3		0.
		duced Tax on Net Investment I	ncome		
		e section 4940(a) tax on net investr		me \ '	
(1 of optional use by domest	ic private roundations subject to th	le section 4940(a) tax on het investi	TICHE INCO	110)	
If posture 4040(d)(2) combine	NO	r AVAILABLE FOR INITIAL '	YEAR RE	THIRNS	
If section 4940(d)(2) applies	, leave this part blank	I AVAIDADDE TON INTITAD	10/11/ [/[310KNS	
Was the foundation liable for	r the section 4942 tay on the distril	outable amount of any year in the ba	ase nerior	12	Yes No
	sn't qualify under section 4940(e)		ase period	٠. ــــ] 1es 1to
		ear, see the instructions before maki	ng any en	tries	
(a)		(c)	ing arry cri	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2018				(COI (D) divided by	COI (C))
2017					
2016					 -
2015					
					<u> </u>
2014		· · · · · · · · · · · · · · · · · · ·			
O Taket of the death	(4)		,		
	(d)		2		
-	tio for the 5-year base period - divid	•			
the number of years the	e foundation has been in existence	ıf less than 5 years	3		
4 Enter the net value of r	noncharitable-use assets for 2019 f	from Part X, line 5	4		
5 Multiply line 4 by line 3	J		5		
6 Enter 1% of net investr	nent income (1% of Part I. line 27b)		6		<u>-</u>
7 Add lines 5 and 6			7		
8 Enter qualifying distribu	itions from Part XII line 4		8		
If line 8 is equal to or	utions from Part XII, line 4 greater than line 7, check the box	in Part VI, line 1b, and complete t		using a 1% tax	rate See the
Part VI instructions					

_	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			-,
ıa,	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•		37 .
-	here X and enter 1% of Part I, line 27b			
_	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			
·	Part I, line 12, col (b)		-	- '
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2	-		37.
A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
-	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			37.
6	Credits/Payments			
-	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
a	Exempt foreign organizations - tax withheld at source			,
b	Tax paid with application for extension of time to file (Form 8868) 6c			
C	Tax paid with application for extension of time to like (Ferri cocc),			
d -	Backup withholding erroneously withheld	-		0.
7	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached			
8	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			37.
9	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			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
та		1a	163	X
_	participate or intervene in any political campaign?			
D		1 _b	l	l x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
		!	l	
	published or distributed by the foundation in connection with the activities	1c		x -
	Did the foundation file Form 1120-POL for this year?	''		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$!	l	
		1 !	l	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	!	l	
_	on foundation managers	2	-	- _X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		i	
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	3		X
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		X
_	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-	
	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		Х	
	conflict with the state law remain in the governing instrument?	6	X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			1
				1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		X	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(J)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"			x
	complete Part XIV	9		$\vdash $
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х

Par	t 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			
• •	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions		11		Х
12		1			
•-	person had advisory privileges? If "Yes." attach statement See instructions,		12		Х
13		lion?	13	Х	
1.5	Website address ► N/A				
14	The books are in care of ► SMB_TRUST_SERVICES Telephone no ► 417-	623-	342	1	
14	Located at ▶1000 E 32ND ST JOPLIN, MO ZIP+4 ▶ 6480	4	_		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			▶	\Box
13	and enter the amount of tax-exempt interest received or accrued during the year				_
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other au			Yes	No
10	over a bank, securities, or other financial account in a foreign country?		16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name				
	the foreign country				
Par	t 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
10	During the year, did the foundation (either directly or indirectly)	Ī			
ıa		No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	No			
	Giografii de personi	No			
	i i tv l	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	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				
		No			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	ın l			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	Ī			
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	that			
·	were not corrected before the first day of the tax year beginning in 2019?		1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a pr				
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1			
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?	No			
	If "Yes," list the years				
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				
	all years listed, answer "No" and attach statement - see instructions)		2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	>				l
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				
		No			ĺ
h	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation				ĺ
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the laps				
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if			_	
	foundation had excess business holdings in 2019)		3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpo		4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize				
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20		4b		Х
				<u> </u>	

Pa	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	juired (con	tınued)			
5a	During the year, did the foundation pay or incur any am	ount to					Yes	No
•	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	on 4945(e))?	. Yes	X No			
	(2) Influence the outcome of any specific public el	ection (see section	4955), or to carry o	n,				,
	directly or indirectly, any voter registration drive?				X No			
	(3) Provide a grant to an individual for travel, study, or				X No			1
	(4) Provide a grant to an organization other than a							i
	section 4945(d)(4)(A)? See instructions				X No			!
	(5) Provide for any purpose other than religious, c						i	;
	purposes, or for the prevention of cruelty to children		-		X No			ì
b	If any answer is "Yes" to 5a(1)-(5), did any of the			_	scribed in	1_	1	. :
	Regulations section 53 4945 or in a current notice rega					5b		
	Organizations relying on a current notice regarding disa					7		
С	If the answer is "Yes" to question 5a(4), does the					-		}
	because it maintained expenditure responsibility for the		•		No			ŧ
	If "Yes," attach the statement required by Regulations s	_			<u> </u>			1
6a	Did the foundation, during the year, receive any ful		ectly, to pay premiur	ns				ı
	on a personal benefit contract?				X No			
b	Did the foundation, during the year, pay premiums, dire					6b		X
	If "Yes" to 6b, file Form 8870		•				Ì	
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?.	. Yes	X No			
b	If "Yes," did the foundation receive any proceeds or ha					7 b		
8	Is the foundation subject to the section 4960 tax on pa	yment(s) of more that	n \$1,000,000 in		_			
	remuneration or excess parachute payment(s) during the	e year?		. Yes	X No			
Pai	t VIII Information About Officers, Directo	rs, Trustees, Fo	Indation Manager	s, Highly P	aid Emplo	yees,		
1	and Contractors List all officers, directors, trustees, and foundat	ion managers and	their compensation	See instruc	tions			
		(b) Title, and average	(c) Compensation	(d) Contribu	tions to	e) Expens	e accou	nt,
	(a) Name and address				tions to efit plans (e) Expens other all		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
ATC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribu employee ben	tions to efit plans (
ATC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
ĀTCI	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
ATCI	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
ATCI	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
ATC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			s
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben and deferred co	tions to efit plans mpensation 0 .	other alle	owances	0 .
ATCI	(a) Name and address 1 2 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben and deferred co	tions to efit plans mpensation 0 .	other alle	owances	0 .
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribuemployee ben and deferred co	instructions to effit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-)	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other alle	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position (other than those)	(c) Compensation (if not paid, enter -0-) 1,851.	(d) Contribuemployee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 1,851.	e 1 - see (d) Contribu employee ben and deferred co	instructions tions to efit plans mpensation 0.	other all	one, e	0.
(a)	(a) Name and address 1 2 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(other than those hours per week devoted to position) (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-) 1,851. se included on line (c) Compensation	(d) Contribuemployee ben and deferred co	instructions (). (instructions instructions tions to benefit eferred attion	other all	one, e	0.

Daga	- 4
raue	- 4

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
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 numb	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 THE W	R CORLEY CHARITABLE TRUST SERVES AS A VEHICLE TO	-
SUPPO	RT VARIOUS CHARITABLE ORGANIZATIONS THROUGH THE	
DISTR	IBUTIONS OF NET INCOME AND PRINCIPAL ANNUALLY.	1,606.
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pro	ogram-related investments. See instructions	
3		
NONE		
	<u> </u>	
Total. Add I	ines 1 through 3	

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	129,348.
b			4,440.
c			
d	Total (add lines 1a, b, and c)		133,788.
e			
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	7 2	
3	Subtract line 2 from line 1d		133,788.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)		2,007.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	131,781.
6	Minimum investment return. Enter 5% of line 5	6	5,398.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	5,398.
2 a	_		
b		7	
c	• • • • • • • • • • • • • • • • • • • •	7 2c	37.
3	Distributable amount before adjustments Subtract line 2c from line 1		5,361.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		5,361.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1,	1 1	5,361.
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	=		1,606.
þ	gram to be a more many and man		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes,	2	
3	Amounts set aside for specific charitable projects that satisfy the	-	
а	, /p		
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	1,606.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions		18.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		1,588.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	alculating w	hether the foundation

Page 9

Pa	rt XIII Undistributed Income (see instr	uctions)	<u></u>	<u> </u>	
		(a)	(b)	(c)	(d) 2019
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	1
	line 7		<u> </u>		5,361.
2	Undistributed income, if any, as of the end of 2019				
	Enter amount for 2018 only			<u> </u>	<u> </u>
b	Total for prior years $20\underline{17}$, $20\underline{16}$, $20\underline{15}$			· · · · · · · · · · · · · · · · · · ·	1
3	Excess distributions carryover, if any, to 2019				
а	From 2014				İ
b	From 2015				
С	From 2016				
	From 2017				
е	From 2018				
f	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$1,606.				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				1,606.
	Applied to 2019 distributable amount			_ .	1,000.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2019				
Ŭ	(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				}
c	line 4b from line 2b				,
Ĭ	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		****		
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2020				3,755.
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)				•
	Excess distributions carryover from 2014 not				
8	applied on line 5 or line 7 (see instructions)				
۵	Excess distributions carryover to 2020.			-	
9	Subtract lines 7 and 8 from line 6a	0.			,
10	Analysis of line 9			_	
	Excess from 2015				
	Excess from 2016				
	Excess from 2017]
	Excess from 2018		i		[
	Excess from 2019				
					5 990-PF (2019)

Part XV Supplementary Information (continued)								
3 · Grants and Contributions Paid Duri Recipient Name and address (home or business)	ing the Year or App	roved for	Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	- Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution					
a Paid during the year								
Total			▶ 3a					
b Approved for future payment								
b Approved for fature payment								
Total			▶ 3h					

Part XVI-A Analysis of Income-			1		(a)
Entet gross amounts unless otherwise indicate	(a) Business code	ed business income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue	Business code		Exclusion code	Amount	(See instructions)
a	_				
b	<u> </u>		-		
c					
d	_			-	<u> </u>
e	_				
f		·			
g Fees and contracts from government ager		· · · · · · · · · · · · · · · · · · ·			
2 Membership dues and assessments			14	3.	·-
3 Interest on savings and temporary cash investme	1 1	-	14	2,612.	
4 Dividends and interest from securities	1 1		· · ·		· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate					
a Debt-financed propertyb Not debt-financed property					
6 Net rental income or (loss) from personal prop	1 1				
7 Other investment income	·				
8 Gain or (loss) from sales of assets other than inv	1 1		18	151.	
9 Net income or (loss) from special events	1 1				
10 Gross profit or (loss) from sales of inventor					
11 Other revenue a	·				1 .4.7
b	1 1				*****
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		·		2,766.	2,766.
Line No. Explain below how each a accomplishment of the four					
	-				

Part XVII	Information Regarding	Transfers to	and	Transactions	and	Relationships	With	Noncharitable	Exemp
	Organizations								

1 • 1	Did th	e organization direct	tly or indirectly	engage in	any of the follo	owing with an	y other orga	anization	described		Yes	No
1	in se	ction 501(c) (other	than section	501(c)(3)	organizations)	or in secti	on 527, re	elating t	o political			
(organi	zations?										
a ·	Transf	ers from the reportin	ng foundation to	a nonchar	itable exempt o	organization of						_
		sh								1a(1)		Х
		her assets										X
		transactions										
		les of assets to a no	ncharitable ever	mnt organiz	ation					15/1)		Х
		rchases of assets fro										Х
										- 1		X
		ntal of facilities, equi	•									X
		imbursement arrange										<u>X</u>
		ans or loan guarantee										
		rformance of service		•	_							X
		g of facilities, equipm	_									X
d I	f the	answer to any of th	ie above is "Ye	s," comple	te the followin	g schedule (Column (b) :	should a	lways show	the f	air m	arket
١	∕alue ∈	of the goods, other	assets, or servi	ices given b	by the reportin	g foundation	If the found	dation re	ceived less	than f	faır m	arket
\	value	in any transaction or	sharing arrang	gement, sh	ow in column	(d) the value	of the good	s, other	assets, or se	ervices	rece	eived
(a) Lin	e no	(b) Amount involved	(c) Name of r	noncharitable e	exempt organization	(d) Des	cription of trans	fers, transa	ctions, and shar	ng arra	ngemer	nts
		N/A				N/A						
				 ,	·							
			-			-						
												
			-					-	**			
	-			-								
	-											
	-+	- -	 									
				-								
			<u> </u>									
								_			_	
									-			
2a	s the	foundation directly	or indirectly aff	filiated with	or related to	one or more	e tax-exemp	t organiz	zations			
		ped in section 501(c)	-					_		Ye	s X	No
		," complete the follow		3.1011 00 1(0)	(0), 0, 000					~		
	1 103	(a) Name of organization	7	(h)	Type of organization	on.		(c) Descrip	tion of relations			
		(a) Harris or or gameans			, , , po o. o.ga			(0,000		<u>""F</u>		
					<u> </u>			 -				
						-						
				-	_				 -			
	1											
	Correc	penalties of perury I decla and complete theclaration of			including accompany on all information of v			to the best	of my knowledge	and be	ellet, it i	s true,
Sign		LULA	MEDI	, , .			. ^		May the IRS	discuss	this i	eturn
_			YUM	_ V	4-8-2021	_ <u> </u>	VP41	2	with the prep			
Here	Sign	nature of officer or trustee	1	Date		Title		_	See instructions	X	Yes	No
		Print/Type preparer's nar	me	Preparer	s signature		Date	Ch	eck If P	TIN	_	
Paid		JESS MYERS			(land	Mues	04/01/20	_		0126	6656	5
Prepa	arer		D, LLP		- And	0	-\ <u>-</u>	Firm's EIN				
Jse (BOX 1824									
(J.11.y		PLIN, MO			619	02-1824	Dhace	417-62	4-10	65	
			LUIIV, MO		· · · · · · · · · · · · · · · · · · ·	040	02 1024	Phone no		990		2015
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ORM 990-PF W R CORLEY CHARITABLE TRUST 86-1385309
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

•		NS AND LOSSES FOR TAX ON INVEST					Date	Date sold
Kind of Property		Description				S D	acquired	Date solu
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL CAPIT	AL GAIN DIST				261.	
			ADED SECURIT PE: SECURITI			P	VAR	06/30/2019
4,500.		4,610.					-110.	
TOTAL GAIN(LO	SS)				•••••		151.	
	ı							

ATTACHMENT 1

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

AMOUNT DESCRIPTION 111,414. SECURITIES TRANSFER 874. CASH TRANSFER 110. LOSS ON SALE 112,398. TOTAL

ATTACHMENT 2

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

W R CORLEY CHARITABLE TRUST

1201(
V 19-7.7F
8:35:37 AM
1/19/2021
0384QF K921

•		
EXPENSE ACCT AND OTHER ALLOWANCES	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	0.
COMPENSATION	1,851.	1,851.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	SMB TRUST SERVICES 1000 E 32ND ST JOPLIN, MO 64804	