efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491124012211

OMB No. 1545-0052

2020

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

			20		J 40 04	2020	
		ndar year 2020, or tax year beginning 01-01-20	, an	na en	ding 12-31-	2020 entification number	
		INDITION IND			43-6931676	entification number	•
		street (or P.O. box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instruction	s)
1	4/4/ MI	SSION ROAD			(913) 402-0908	·	-,
		, state or province, country, and ZIP or foreign postal code PARK, KS 66224		-		application is pending	g, check here
G (1	neck al	I that apply: Initial return Initial return of a	former public charity		D 1 Foreign or	ganizations, check he	re
u Ci	ieck ai	Final return Amended return	Tormer public charity		2. Foreign or	ganizations meeting k here and attach cor	► LJ the 85%
		☐ Address change ☐ Name change			·	undation status was t	· -
	,	pe of organization: Section 501(c)(3) exempt private				n 507(b)(1)(A), checl	
			e private foundation Cash	_	E If the found	ation is in a 60-month	tamainatian —
of	year (f	rom Part II, col. (c), ►\$ 138,986,419 Other (specify) (Part I, column (d) must		aı		n 507(b)(1)(B), check	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	<u></u>			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) i	let investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	10,000,000				
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	50		50		
	4	Dividends and interest from securities	2,875,838		2,875,838		
	5a	Gross rents					
a \	b	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	9 19,817,865				
Revenue	6a b	Gross sales price for all assets on line 6a	19,617,863				
	_	99,065,975			19,817,865		
	7 8	Capital gain net income (from Part IV, line 2)			19,017,003	11,803,341	
	9	Income modifications				11,003,341	
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)	0				
	11	Other income (attach schedule)	0				
	12	Total. Add lines 1 through 11	32,693,753		22,693,753	11,803,341	
	13	Compensation of officers, directors, trustees, etc.					
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
sua	16a	Legal fees (attach schedule)	0				
χ	b	Accounting fees (attach schedule)	1,280				1,280
e E	С	Other professional fees (attach schedule)	0				
Ĕ	17	Interest					
Str.	18	Taxes (attach schedule) (see instructions)	79,671				
≣	19	Depreciation (attach schedule) and depletion	0				
Ð	20	Occupancy					
ַ ק	21	Travel, conferences, and meetings					
an	22	Printing and publications					
Operating and Administrative Expenses	23	Other expenses (attach schedule)	0	1			
ırat	24	Total operating and administrative expenses.			_		
ă	25	Add lines 13 through 23	80,951	-	0		1,280
_	25 26	Contributions, gifts, grants paid	4,164,500				4,164,500
		25	4,245,451		0		4,165,780
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	28,448,302				
	b	Net investment income (if negative, enter -0-)			22,693,753		
	С	Adjusted net income (if negative, enter -0-)				11,803,341	

Beginning of year

Page 2

End of year

120,510,501

120,510,501

120,510,501

2 3

4

5

6

28,448,302

120,510,501

120,510,501 Form **990-PF** (2020)

45,325

92,016,874

92,016,874

92,016,874

Form 990-PF (2020)

	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)		0	
	7	Other notes and loans receivable (attach schedule)			
S		Less: allowance for doubtful accounts ▶		0	
	8	Inventories for sale or use			
sel	9	Prepaid expenses and deferred charges			
AS	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	51,489,449	102,449,037	120,924,955
	С	Investments—corporate bonds (attach schedule)	32,750,491		
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		0	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		0	
	14	Land, buildings, and equipment: basis >			
		Less: accumulated depreciation (attach schedule) ▶		0	
	15	Other assets (describe ►)	0	0	0
	16	Total assets (to be completed by all filers—see the			

		Less: accumulated depreciation (attach schedule) ▶		0	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)		0	
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶		0	
	15	Other assets (describe)	0	0	0
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	92,016,874	120,510,501	138,986,419
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons		0	
Liabilities	21	Mortgages and other notes payable (attach schedule)		0	
_	22	Other liabilities (describe)	0	0	
	23	Total liabilities(add lines 17 through 22)		0	
S		Foundations that follow FASB ASC 958, check here			

Foundations that do not follow FASB ASC 958, check here ▶

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Capital stock, trust principal, or current funds . . .

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) .

and complete lines 26 through 30.

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) ▶

26 27

28

29

30

Part III

2

3

Liabilities Net Assets or Fund Balances Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29 and 30. 24 Net assets without donor restrictions . 25 Net assets with donor restrictions .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with endof-year figure reported on prior year's return) 92,016,874 1

Page **3**

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Table	e				
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a See Additional Data Table	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ov	vned by the foundation o	on 12/31/69	(I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col. (i) . (j), if any	col. (k), but not	h) gain minus less than -0-) or om col.(h))
a See Additional Data Table					
b					
c					
d					
e					
	•			•	
2 Capital gain net income 3 Net short-term capital g	or (net capital loss) gain or (loss) as defined in sections	If gain, also enter in P. If (loss), enter -0- in F		2	19,817,865
· -	rt I, line 8, column (c) (see instruct		}	3	11,803,341
Part V Qualification U	Jnder Section 4940(e) for R	educed Tax on Net	Investment In	come	
	LED ON DECEMBER 20, 2019				
1 Reserved	ELD ON DECEMBER 20, 2013	9 - DO NOT COMPLI	<u> </u>		
(a)	(b)	(c)		(d)	
Reserved	Reserved	Reserved		Reserved	
3 Danamurd				1	
			<u> </u>	1	
				<u> </u>	
4 Reserved			4	<u> </u>	
5 Reserved			5	<u>[</u>	
6 Reserved			6		
7 Reserved			7		
8 Reserved ,			8]	
, 					

Page **6**

Yes No

Pai	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required	(continue	d)
5a	During the	year did the foundation pay or incur any amount to:		
	(1) Carry	on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ vec	✓ N

	(2) Initidence the outcome of any s	peciii	public election (see sec	don 4933), or to carry					1 1	
	on, directly or indirectly, any vo	ter re	gistration drive?		· · 🔲 Yes	✓	No			
	(3) Provide a grant to an individual	for t	avel, study, or other sim	ilar purposes?	☐ Yes		No			
	(4) Provide a grant to an organizat	ion ot	her than a charitable, etc	, organization described			140			
	in section 4945(d)(4)(A)? See i	nstru	ctions		· · □ Yes	✓	No			
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	□ res	•	NO			
	educational purposes, or for the	prev	ention of cruelty to child	ren or animals?		~				
b	If any answer is "Yes" to 5a(1)-(5)	did a	nv of the transactions fa	il to qualify under the ex	ceptions described in	•	No			
	Regulations section 53.4945 or in a							5b		
	Organizations relying on a current r				_	_				
С	If the answer is "Yes" to question 5									
	tax because it maintained expendit			•						
	·				· · Yes	Ш	No			
_	If "Yes," attach the statement requi		-							
6 a	Did the foundation, during the year									
	a personal benefit contract?				⊔ Yes	✓	No			
b	Did the foundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?	•		6b	\longmapsto	No_
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	rsaction? Yes	✓	Nο			
b	If "Yes", did the foundation receive	any p	roceeds or have any net	income attributable to the	ne transaction?			7b		
8	Is the foundation subject to the sec	tion 4	960 tax on payment(s) o	of more than \$1,000,000	in remuneration or					
	excess parachute payment during t	he ye	ar?		· · 🗌 Yes	✓	No			
	Information About	Offic	ers Directors Trust	tees Foundation Ma		_		VEES		
Pai	and Contractors	J	cis, birectors, irus	iccs, i canadion in	inagers, mgm, rai	u L .	ρ.υ	,,		
	1: 11 60: 1: 1			1.1	:					
1	List all officers, directors, truste			•			1			
	(a) Name and address	'	 b) Title, and average hours per week 	(c) Compensation (If not paid, enter	(d) Contributions t employee benefit plans				ise acco	
	(4)		devoted to position	-0-)	deferred compensati		٥	ther al	llowance	es
DAVI	DEHAEMERS		CTOR	0		0				0
	MISSION RD	0.00								
	OOD, KS 66224									
	ARA DEHAEMERS	DIRE 0.00	CTOR	0		0	1			0
	MISSION RD DOD, KS 66224	0.00								
2	Compensation of five highest-pa	id en	nlovees (other than t	l hose included on line '	 —see instructions), I	f no	ne. e	nter "	NONE.	
	Compensation of five highest pa	id Cii	ipioyees (other than t		(d) Contributions t		iic, c	iicci	1101121	—
(a)	Name and address of each employee	paid	(b) Title, and average	() 6	employee benefit		(e)	Expens	se accou	unt.
• •	more than \$50,000		hours per week devoted to position	(c) Compensation	plans and deferred				owance	
			devoted to position		compensation					
NON										
						-+				
					+	+				
Tota	I number of other employees paid ov	er \$5	0,000		<u> </u>					0
							For	m 99 0	0-PF (2	2020)

Form 990-PF (2020)		Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relev organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
		_
*		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	-	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		

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

2

За 3h

4

5

4,165,780

4,165,780

Form 990-PF (2020)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the:

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

2

3

4

5

5,490,240

Form **990-PF** (2020)

Page 9

Form	99	0-PF	(2
Pa	rt	XII	I

990-PF (2	020)			
t XIII	Undistributed	Income	(see	instructions`

a From 2015. **b** From 2016.

e From 2019.

c From 2017. . . . d From 2018.

1 Distributable amount for 2020 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2020: a Enter amount for 2019 only.

f Total of lines 3a through e.

5 Excess distributions carryover applied to 2020.

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

same amount must be shown in column (a).)

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract 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 e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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) 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . **b** Excess from 2017. . c Excess from 2018. . . . d Excess from 2019. . . e Excess from 2020. . .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 4,165,780 a Applied to 2019, 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). **d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

Excess distributions carryover, if any, to 2020: 560 587 1.085.200

3,202,750

3.524.077

(a)

Corpus

4,848,537

4,165,780 5,490,240

3,524,077

3,524,077

(b)

Years prior to 2019

(c)

2019

For	m 990-PF (2020)					Page 10
F	Part XIV Private Operating Found	ations (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organization	ion is a private oper	ating foundation des	scribed in section $ {\sf f f ar L} $	☐ 4942(j)(3) or ☐] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
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					
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 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)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in					
c	Part X, line 6 for each year listed "Support" alternative test—enter:					
Č	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	Supplementary Information			foundation had	\$5,000 or more	in
1	assets at any time during th Information Regarding Foundation Man. List any managers of the foundation who have before the close of any tax year (but only if DAVID G BARBARA C DEHAEMERS	agers: re contributed more	than 2% of the tota	al contributions recei 0). (See section 507	ved by the foundatio 7(d)(2).)	n
b	List any managers of the foundation who own ownership of a partnership or other entity) of	n 10% or more of th of which the foundat	e stock of a corpora ion has a 10% or gi	ation (or an equally l reater interest.	arge portion of the	
2	Information Regarding Contribution, Gr					
	Check here ► ☑ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gra	ants, etc. to individu	le organizations and uals or organizations	does not accept under	
а	The name, address, and telephone number of	or email address of t	the person to whom	applications should	be addressed:	
b	The form in which applications should be sul	omitted and informa	tion and materials t	hey should include:		
C	Any submission deadlines:					
d	Any restrictions or limitations on awards, su factors:	ch as by geographic	al areas, charitable	fields, kinds of instit	cutions, or other	

Form 990-PF (2020)	-			Page 11
Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid	d During the Year or Appr	oved for Futur	re Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year		<u> </u>		
See Additional Data Table		'	<u> </u>	l !
Total			▶ 3a	4,164,500
b Approved for future payment				
	 	++		
Total			▶ 3h	

Form **990-PF** (2020)

Par	t XVI	Analysis of Income-Producing	Activities				
Enter	gross	amounts unless otherwise indicated.		usiness income		n 512, 513, or 514	(e) Related or exempt function income
1 Pr	ogram	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
							
		nd contracts from government agencies ship dues and assessments.					
3 I		on savings and temporary cash			14	50	
		ds and interest from securities			14	2,875,838	
		inanced property.					
		bt-financed property					
		vestment income					
	Gain or nventor	(loss) from sales of assets other than			14	19,817,865	
		me or (loss) from special events:					
10 G 11 G	iross pi Other re	rofit or (loss) from sales of inventory evenue: a					
12 9	Subtota	I. Add columns (b), (d), and (e)				22,693,753 . 3	22,693,753
(5	See wo	rksheet in line 13 instructions to verify calcu	lations.)				
Par	t XAT	-B Relationship of Activities to th	ie Accompilsi	nment of Exem	ipt Purposes		
	e No. ▼	Explain below how each activity for which the accomplishment of the foundation's ex instructions.)					

orr	n 990-PF	` '									Pa	ge 13
P	art XVII	Information Re Exempt Organi		ansf	fers To a	nd Transacti	ons and	Relatio	nships With None	charitable		
		ganization directly or in than section 501(c)(3)								n 501	Yes	No
а	Transfers	from the reporting foun	dation to a no	oncha	ritable exe	mpt organizatio	n of:					
	(1) Cash	Cash								1a(1)		No
	(2) Othe	rassets								. 1a(2)		No
	Other trar											
		s of assets to a nonchar	•	-						. 1b(1)		No
		hases of assets from a r								. 1b(2)		No
		al of facilities, equipmen	-							. 1b(3)		No No
	` '	bursement arrangemen s or loan guarantees.								1b(4) 1b(5)		No
	• •	rmance of services or m								1b(6)		No
		f facilities, equipment, n			-					``		No
	of the goo	wer to any of the above ods, other assets, or ser nsaction or sharing arra	vices given by	the	reporting f	oundation. If the	e foundatio	n receive	ed less than fair marke	et value		
(a)	Line No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	(d) Des	cription of	transfers, transactions, a	and sharing arra	ngemen	nts
	Is the fou	ndation directly or indire	L ectly affiliated	with.	. or related	l to, one or more	tax-exem	pt organ	izations			
		in section 501(c) (other	•		•	•			_	s 🗹 No		
		complete the following s		(/ (- / / - · · ·							
	,	(a) Name of organization			(b) Type of organizat	ion		(c) Description o	of relationship		
C:.	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co							sed on all infor	matio	n of
Sig He	re	*****				2021-05-04		*****		May the IRS di return with the prepa		
		Signature of officer or trustee			Date		7	itle		below (see instr.)	Yes [□No
	<u> </u>	Print/Type preparer's	name	Prepa	arer's Sign	ature	Date		Check if self-	TIN		
									employed ▶ ✓	P01241	.272	
Pa		W Rodger Marsh Jr	-									
	eparer e Only		odger Marsh (CPA					Fi	irm's EIN ▶		
_		Firm's address ► 11	011 King Stre						Pł	hone no. (913) 469-	6500
		ı ,										

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (d) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation ISHARES TR 20 YR TR BD ETF TLT D 2019-04-09 2020-03-03 ISHARES TR 20 YR TR BD ETF TLT D 2019-04-11 2020-03-03 ISHARES TR 20 YR TR BD ETF TLT D 2019-04-12 2020-03-05 ISHARES TR 20 YR TR BD ETF TLT D 2019-09-13 2020-03-05 ISHARES TR 20 YR TR BD ETF TLT D 2019-10-10 2020-03-05 ISHARES TR 20 YR TR BD ETF TLT D 2019-11-05 2020-03-05 ISHARES TR 20 YR TR BD ETF TLT D 2019-11-05 2020-03-25 2019-11-05 ISHARES TR 20 YR TR BD ETF TLT D 2020-03-27 2019-12-19 ISHARES TR 20 YR TR BD ETF TLT D 2020-03-27 Ρ 2020-04-06 2020-12-23 PROSHARES TR SHORT S&P 500 NE SH Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 0 9,449,792 7,440,889 2,008,903 0 6,299,861 4,947,000 1,352,861 3,937,413 0 3,069,826 867,587 3,149,930 0 2,738,997 410,933 5,549,878 0 4,973,932 575,946 3,174,930 0 2,744,600 430,330 0 4,150,033 3,425,800 724,233 1,659,963 0 1,369,000 290,963 2,489,945 0 2,040,450 449,495 5,474,879 0 7,253,245 -1,778,366 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 0 0 0 2,008,903 0 0 0 1,352,861 0 0 0 867,587 0 0 0 410,933 0 0 0 575,946 0 0 0 430,330 0 0 0 724,233 0 0 0 290,963 0 0 0 449,495 0 0 -1,778,366

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d							
List and describe the (a) 2-story brick warehou	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)				
ENTERPRISE PRODS PARTNER	S LP		Р	2020-03-18	2020-03-31		
ENTERPRISE PRODS PARTNER	S LP		Р	2020-03-23	2020-03-31		
ENTERPRISE PRODS PARTNER	S LP		Р	2020-03-27	2020-04-06		
TALLGRASS ENERGY LP			Р	2020-03-10	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-11	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-12	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-13	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-16	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-18	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-23	2020-04-20		
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h			
(e) Gross sales price	Depreciation allowed (f) (or allowable)		er other basis opense of sale	Gain or (loss) (h) (e) plus (f) minus (g)			
700,485	0		520,500	179,985			
350,242	0		321,250	28,992			
1,524,968	0		1,398,996		125,972		
2,618,410	0		2,145,972		472,438		
9,922,541	0		7,830,961		2,091,580		
2,245,000	0		1,602,750	642,250			
1,959,840	0		1,412,160	547,680			
224,500	0		136,100		88,400		
22,450	0		12,510	9,940			
4,490	0		2,638		1,852		
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns i - I			
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus It less than -0-) or		
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69		ss of col. (i) ol. (j), if any		from col.(h))		
0	0		0		179,985		
0	0		0	28,992			
0	0		0		125,972		
0	0	0		472,438			
0	0	0		2,091,580			
0	0	0		642,250			
0	0	0			547,680		
0	0		0		88,400		
0	0		0		9,940		
0	0		0		1,852		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d							
	List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(d) Date sold (mo., day, yr.)		
TALLGRASS ENERGY LP			Р	2020-03-26	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-03-30	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-04-03	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-04-06	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-04-09	2020-04-20		
TALLGRASS ENERGY LP			Р	2020-04-14	2020-04-20		
ISHARES PHLX SEMICONDUC	TOR ETF		D	2019-05-14	2020-09-08		
ISHARES PHLX SEMICONDUC	TOR ETF		D	2019-05-20	2020-09-08		
ISHARES PHLX SEMICONDUC	TOR ETF		D	2019-05-23	2020-09-08		
ISHARES PHLX SEMICONDUC	TOR ETF		D	2019-05-23	2020-09-08		
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns e - h			
(e) Gross sales price	Depreciation allowed (f) (or allowable)		r other basis pense of sale	,			
1,122,500	0		842,500		280,000		
224,500	0		169,900	54,600			
2,216,286	0		1,662,290		553,996		
682,367	0		523,505		158,862		
3,367,499	0		2,723,591	643,908			
4,490,000	0		3,899,999	590,001			
7,351,088	0		4,918,750	2,432,338			
7,351,088	0		4,625,250	2,725,838			
7,301,100	0		4,464,186	2,836,914			
49,998	0		30,564		19,434		
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment I	ncome - Colum	ns i - I			
Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69		(h) gain minus t less than -0-) or		
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69		ss of col. (i) ol. (j), if any		rom col.(h))		
0	0		0		280,000		
0	0		0		54,600		
0	0		0		553,996		
0	0		0	0 158,862			
0	0		0	0 643,9			
0	0		0 590		590,001		
0	0		0 2,		2,432,338		
0	0		0		2,725,838		
0	0		0		2,836,914		
0	0		0		19,434		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BOYS HOPE & GIRLS HOPE KANSAS CITY 12307 STATE LINE ROAD KANSAS CITY, MO 64145		501(C)(3)	UNRESTRICTED	5,000
ROCKHURST HIGH SCHOOL 9301 STATE LINE ROAD KANSAS CITY, MO 64114		501(C)(3)	UNRESTRICTED \$25KHURTADO SCHOLARS \$25K	50,000
ST TERESAS ACADEMY5600 MAIN ST		501(3)(c)	UNRESTRICTED	25,000

4,164,500

▶ 3a

KANSAS CITY, MO 64113

Recipient If recipient is an individual, show any relationship to status of status of reconstribution Purpose of grant or contribution Amount

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CRISTO REY HIGH SCHOOL - KC 211 W LINWOOD KANSAS CITY, MO 64111		501(C)(3)	UNRESTRICTED	20,000
VITAE CARING FOUNDATION 1731 SOUTHRIDGE JEFFERSON CITY, MO 65109		501(C)(3)	GENERAL DONATIONS	25,000
HOLY FAM SCH OF FAITH 11300 W 103RD ST OVERLAND PARK, KS 66214		501(C)(3)	GENERAL DONATIONS	25,000

▶ 3a

4,164,500

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

recipient

▶ 3a

4,164,500

any foundation manager

Name and address (home or business)

SEATTLE, WA 98112

Hame and address (nome or business)	or substantial contributor			
a Paid during the year				
CATHOLIC EDUCATION FDN 7726 HEDGE LANE TERRACE SHAWNEE, KS 66216		501(3)(c)	GENERAL DONATION	250,000
VETS HELPING HEROS 7374 WOODMONT CT BOCA RATON, FL 33434		501(C)(3)	GENERAL DONATION	10,000
IGNATIAN SPIRTUALITY CENTER		501(C)(3)	GENERAL DONATION	5,000

VETS HELPING HEROS 7374 WOODMONT CT BOCA RATON, FL 33434	501(C)(3)	GENERAL DONATION	10,0
IGNATIAN SPIRTUALITY CENTER 732 18TH AVENUE	501(C)(3)	GENERAL DONATION	5,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
HAPPY BOTTOMS303 W 79TH ST KANSAS CITY, MO 64114		501(C)(3)	UNRESTRICTED	75,000

MOUNT ST SCHOLASTICA 801 SOUTH 8TH ST ATCHISON, KS 66002	501(C)(3)	UNRESTRICTED	75,000

ATCHISON, KS 66002			
GIVING THE BASICS 3150 MERCIER SUITE 270-D2	501(C)(3)	GENERAL DONATION	75,000

111 CH115 CH1			
GIVING THE BASICS 3150 MERCIER SUITE 270-D2 KANSAS CITY, MO 64111	501(C)(3)	GENERAL DONATION	75,000

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

, ,	or substantial contributor			
a Paid during the year				
CONCANNON SCHOLARSHIP FUND		501(C)(3)	GENERAL DONATION	10,000

KANSAS CITY, MO 64141			
NATIVITY HOUSE OF KCPO BOX 4124 KANSAS CITY, KS 66104	501(C)(3)	GENERAL DONATION	55,000

NATIVITY HOUSE OF KCPO BOX 4124 KANSAS CITY, KS 66104	501(C)(3)	GENERAL DONATION	55,000
BISHOP WARD HIGHSCHOOL 708 N 18TH ST	501(C)(3)	SCHOLARSHIP FUND	125,000

KANSAS CITY, KS 66104			
BISHOP WARD HIGHSCHOOL 708 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	SCHOLARSHIP FUND	125,000

Total .

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

بالمطريط فالمطاع متمال أمانك مطمعا يرمأ بالماسا

	or substantial contributor			
a Paid during the year				
HOMES FROM THE HEART		501(C)(3)	FOOD PACKAGES & HAITI	65,000

LEAWOOD, KS 66211		HOMES	
DONNELLY COLLEGE608 N 18TH ST	501(C)(3)	GENERAL DONATION	25,000

DONNELLY COLLEGE608 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	GENERAL DONATION	25,000
VILLA ST FRANCIS16600 W 126TH ST	501(C)(3)	UNRESTRICTED	75.000

KANSAS CITY, KS 66102			
VILLA ST FRANCIS16600 W 126TH ST OLATHE, KS 66062	501(C)(3)	UNRESTRICTED	75,000

VILLA ST FRANCIS16600 W 126TH ST OLATHE, KS 66062	501(C)(3)	UNRESTRICTED	75,000

VILLA SI FRANCISIOOOO W 1201H SI	1 201(C)(3)	ONKESTRICTED	/5,
OLATHE, KS 66062			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

4,164,500

any foundation manager

Name and address (home or business)	or substantial contributor	resipient		
a Paid during the year				
COMM FND OF GUNNISON VALLEY PO BOX 7057 GUNNISON, CO 81230		501(C)(3)	UNRESTRICTED	10,000
ARCHDIOCESE OF KC IN KANSAS 12615 PARALLEL PARKWAY KANSAS CITY, KS 66109		501(C)(3)	Prairie StarOne Faith	350,000
ICARE OF NORTHEAST KS 8121 W 129TH ST OVERLAND PARK, KS 66213		501(C)(3)	PROGRAM DIR.	50,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year			
QUEEN OF ALL SAINTS PARISH 400 W GEORGIA AVENUE GUNNISON, CO 81230	501(C)(3)	GENERAL CONTRIBUTION	30,000
CATHOLIC CHARITIES OF NE KS	501(C)(3)	EMERGENCY &GENERAL	375,000

CATHOLIC CHARITIES OF NE KS 9720 W 87TH ST OVERLAND PARK, KS 66212	501(C)(3)	EMERGENCY &GENERAL DONATION	375,000

OVERLAND PARK, KS 66212		DONATION	
ST MARK CENTER2008 E 12TH ST KANSAS CITY, MO 64127	501(C)(3)	GENERAL DONATION	50,000

4,164,500

■ 3a

ST MARK CENTER2008 E 12TH ST KANSAS CITY, MO 64127		501(C)(3)	GENERAL DONATION	50,0
	•		•	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

·	or substantial contributor			
a Paid during the year				
AMETHYST PLACE2735 TROOST-A		501(C)(3)	GENERAL DONATION	100,000

KANSAS CITY, MO 64109			
ADRIAN OPTIMIST CLUBPO BOX 322 ADRIAN, MO 64720	501(C)(3)	SCHOLARSHIP	

ADRIAN OF TM131 CLOBFO BOX 322 ADRIAN, MO 64720	301(C)(3)	SCHOLARSHIP	33,000
ST MICHAEL THE ARCHANGEL 14201 NALL AVENUE	501(C)(3)	GENERAL DONATION	250,000

25 000

151(1)117110 01720			
ST MICHAEL THE ARCHANGEL 14201 NALL AVENUE LEAWOOD, KS 66223	501(C)(3)	GENERAL DONATION	250,00

ST MICHAEL THE ARCHANGEL 14201 NALL AVENUE LEAWOOD, KS 66223	50	01(C)(3)	GENERAL DONATION	250,000
--	----	----------	------------------	---------

Recipient If recipient is an individual, show any relationship to status of status of reconstribution Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of contribution Amount

raciniant

▶ 3a

4,164,500

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
OLATHE PREGNANCY CLINIC 1313 E SANTA FE OLATHE, KS 66061		501(C)(3)	UNRESTRICTED	10,000
WYANDOTTE PREGNANCY CLINIC 3021 N 54TH ST KANSAS CITY, KS 66104		501(C)(3)	UNRESTRICTED	10,000
ADVICE & AID PREGNANCY 10901 GRANADA LANE 100 OVERLAND PARK, KS 66211		501(C)(3)	UNRESTRICTED	10,000

Recipient If recipient is an individual, show any relationship to any foundation manager recipient

Recipient If recipient is an individual, show any relationship to any foundation manager recipient

Recipient If recipient is an individual, show any relationship to any foundation manager recipient

or substantial contributor

1631 CRESCENT ROAD LAWRENCE, KS 66044

CENTER

Total .

a Paid during the year			
ALEXANDRA'S HOUSEPO BOX 10034 KANSAS CITY, MO 64111	501(C)(3)	GENERAL DONATION	3,000
KANSANS FOR LIFE7808 FOSTER ST OVERLAND PARK, KS 66204	501(C)(3)	GENERAL DONATION	10,000
ST LAWRENCE CATHOLIC CAMPUS	501(C)(3)	GENERAL DONATION	35,000

4,164,500

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ST MICHAEL THE ARCHANGEL		501(C)(3)	HONDURAS MISSION	7,000

14201 NALL AVENUE LEAWOOD, KS 66223	501(C)(3)	HONDURAS MISSION	

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

14201 NALL AVENUE LEAWOOD, KS 66223			
BRIGHT FUTURES FUND20 W 9TH ST	501(C)(3)	UNRESTRICTED	6,000

BRIGHT FUTURES FUND20 W 9TH ST KANSAS CITY, MO 64105	501(C)(3)	UNRESTRICTED	6,000
ST RENEDICT'S ARREV1020 N 2ND ST	501(C)(3)	LINRESTRICTED	20,000

KANSAS CITY, MO 64105			
ST BENEDICT'S ABBEY1020 N 2ND ST ATCHISON, KS 66002	501(C)(3)	UNRESTRICTED	20,000

ST BENEDICT'S ABBEY1020 N 2ND ST ATCHISON, KS 66002	501(C)(3)	UNRESTRICTED	20,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CONCEPTION ABBEY		501(C)(3)	BROTHERS LIVING	200,000

CONCEPTION, MO 64433			
BENEDICTINES OF MARY QUEEN OF APOSTLES PO BOX 303	501(C)(3)	UNRESTRICTED	30,000

APOSTLES PO BOX 303 GROVER, MO 64454	501(C)(3)	UNRESTRICTED	30,000
LITTLE BROTHERS OF THE LAMB	501(C)(3)	UNRESTRICTED	10,000

PO BOX 303 GROVER, MO 64454			
LITTLE BROTHERS OF THE LAMB 921 HOMER AVENUE	501(C)(3)	UNRESTRICTED	10,000

LITTLE BROTHERS OF THE LAMB 921 HOMER AVENUE KANSAS CITY, KS 66101	501(C)(3)	UNRESTRICTED	10,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

recipient

▶ 3a

4,164,500

any foundation manager

Name and address (home or business)

MT CRESTED BUTTE, CO 81225

a Paid during the year			
LITTLE SISTERS OF THE LAMB 36 SOUTH BOEKE ST KANSAS CITY, KS 66101	501(C)(3)	UNRESTRICTED	10,000
SISTER SERVANTS OF MARY 800 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	UNRESTRICTED	10,000

RANSAS CITT, RS 00101			
SISTER SERVANTS OF MARY 800 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	UNRESTRICTED	10,000
ADAPTIVE SPORTS CENTER 19 EMMONS ROAD	501(C)(3)	UNRESTRICTED	10,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient

	or substantial continuation			
a Paid during the year				
EMBRACE8900 STATE LINE ROAD LEAWOOD, KS 66206		501(C)(3)	UNRESTRICTED	20,000

EAWOOD, KS 66206			
IALO1600 GENESSEE 200 IANSAS CITY, MO 64102	501(C)(3)	GENERAL DONATION	

or substantial contributor

Name and address (home or business)

Total .

HALO1600 GENESSEE 200 KANSAS CITY, MO 64102	501(C)(3)	GENERAL DONATION	1,000
COVENANT HOUSE TEXAS	501(C)(3)	SLEEP OUT	2,500

501(C)(3)	SLEEP OUT	2,500
	501(C)(3)	501(C)(3) SLEEP OUT

COVENANT HOUSE TEXAS	501(C)(3)	SLEEP OUT	
1111 LOVETT BLVD			
HOUSTON, TX 77006			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recinient

l	Name and address (home or business)	or substantial contributor	recipient		
I	a Paid during the year				
I	COTTA HAVE HODE16340 DEABRORN		E01(C)(2)	BESTRICTED CHILD CHI DEWS	30,000

STILWELL, KS 66085	501(C)(3)	RESTRICTEDCHURCH PEWS	20,000
GOTTA HAVE HOPE16340 DEARBORN	501(C)(3)	GENERAL DONATION	200,000

GOTTA HAVE HOPE16340 DEARBORN STILWELL, KS 66085	501(C)(3)	GENERAL DONATION	200,000
DIDDE CATHOLIC CAMPUS	501(C)(3)	UNRESTRICTED	35,000

STILWELL, KS 66085			
DIDDE CATHOLIC CAMPUS 1415 MERCHANT	501(C)(3)	UNRESTRICTED	35,000
EMPORIA, KS 66801			

Total	 	▶ 3a	4,164,500
DIDDE CATHOLIC CAMPUS 1415 MERCHANT EMPORIA, KS 66801	501(C)(3)	UNRESTRICTED	35,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

	or substantial contributor			
a Paid during the year				
THE LEARNING CLUB 2203 PARALLEL AVENUE KANSAS CITY, KS 66104		501(C)(3)	UNRESTRICTED	10,000
HORSES & HEROES INC 22052 W 66TH ST 207		501(C)(3)	UNRESTRICTED	5,000

22052 W 66TH ST 207 SHAWNEE, KS 66226	301(0)(3)	OWNEDWICE	3,000
ANGELS OF GRACE FAMILY SERVICE CTR 1220 TROUP AVE	501(C)(3)	CARPET	15,000

SHAWINEL, KS 00220			i .
ANGELS OF GRACE FAMILY SERVICE CTR	501(C)(3)	CARPET	15,000
1220 TROUP AVE KANSAS CITY, KS 66104			

За

ANGELS OF GRACE FAMILY SERVICE	501(C)(3)	CARPET	15,00
CTR 1220 TROUP AVE			
KANSAS CITY, KS 66104			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

▶ 3a

4,164,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

KANSAS CITY, KS 66103

	or substantial contributor			
a Paid during the year				
HOLY FAMILY SCHOOL OF FAITH 13240 CRAIG STREET OVERLAND PARK, KS 66213		501(C)(3)	GENERAL DONATION	450,000
AUGUSTINE INSTITUTE 6160 S SYRACUSE WAY GREENWOOD VILLAGE, CO 80111		501(C)(3)	GENERAL DONATION	100,000
JUNIOR ACHIEVEMENT OF GREATER KC 2842 W 47TH AVE		501(C)(3)	PLAY FOR JA	10,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
UNITED INNER CITY SERVICES 3827 TROOST AVE KANSAS CITY, MO 64109	501(C)(3)	GENERAL DONATION	125,000

ANGELS OF GRACE FAMILY SERVICE CTR	501(C)(3)	GENERAL DONATION	5,000
1220 TROUP AVE KANSAS CITY, KS 66104			

1220 TROUP AVE KANSAS CITY, KS 66104			
NEIGHBORHOOD LEGAL SUPPORT 815 W 53RD TER	501(C)(3)	GENERAL DONATION	75,000

KANSAS CITY, KS 66104			
NEIGHBORHOOD LEGAL SUPPORT 815 W 53RD TER KANSAS CITY, MO 64112	501(C)(3)	GENERAL DONATION	75,000

NEIGHBORHOOD LEGAL SUPPORT 815 W 53RD TER KANSAS CITY, MO 64112	501(C)(3)	GENERAL DONATION	75,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
HABITAT FOR HUMANITY OF KC 1423 E LINWOOD BLVD KANSAS CITY MO 64109	501(C)(3)	LYKINS NEIGHBOR	40,000

KANSAS CITY, MO 64109			
HEALING HOUSE4505 ST JOHN AVE KANSAS CITY, MO 64123	501(C)(3)	GENERAL DONATION	10,000

KANSAS CITY, MO 64123	301(0)(3)	GENERAL DONATION	10,000
DONNELLY COLLEGE608 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	TRANSFORMATION	250,000

,			
DONNELLY COLLEGE608 N 18TH ST KANSAS CITY, KS 66102	501(C)(3)	TRANSFORMATION	250,000

DONNELLY COLLEGEOUS IN 181H ST	[501(C)(3)	TRANSFORMATION	250,0
KANSAS CITY, KS 66102			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

recipient

▶ 3a

4,164,500

any foundation manager

Name and address (home or business)

KANSAS CITY, MO 64145

·	or substantial contributor			
a Paid during the year				
FIRE FOUNDATION 20 WEST 9TH STREET KANSAS CITY, MO 64105		501(C)(3)	GENERAL DONATION	25,000
APOSTLES OF THE INTERIOR LIFE 10300 CODY STREET OVERLAND PARK, KS 66214		501(C)(3)	GENERAL DONATION	10,000

APOSTLES OF THE INTERIOR LIFE 10300 CODY STREET OVERLAND PARK, KS 66214	501(C)(3)	GENERAL DONATION	10,000
AVILA UNIVERSITY 11901 WORNALL ROAD	501(C)(3)	STUDENT EMERGENCY FUND	10,000

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution any foundation manager recipient

or substantial contributor.

a Paid during the year			
DART CENTER9401 BISCAYNE BLVD MIAMI SHORES, FL 33138	501(C)(3)	JOCO/WYCO COALTIONS	60,000

112,1112 51161126712 65256			
TOPEKA JUMP3033 SW MACVICAR AVE TOPEKA, KS 66611	501(C)(3)	PREDATORY LENDING PROGRAM	60,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491124012211 TY 2020 Accounting Fees Schedule						
	Name: THE EIN: 43-6		Y CHARITABLE TRUST			
Category	Amount	Net Investme Income	nt Adjusted Net Income	Disbursements for Charitable Purposes		

W. RODGER MARSH TAX PREP

TY 2020 Gain/Loss from Sale of Other Assets Schedule

Name: THE DEHAEMERS FAMILY CHARITABLE TRUST

inoi iii beiike

EIN: 43-6931676

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Gain Loss Sale Other Assets Schedu

Name	Date	How	Date	Purchaser	Gross Sales	Basis	Basis	Sales	Total (net)	Accumulated
	A cquired	Acquired	Sold	Name	Price		Met hod	Expenses		Depreciation
ISHARES TR 20 YR TR BD ETF		Donated			39,861,744	32,750,491			7,111,253	
PROSHARES TR SHORT S&P 500 NE		Purchased			5,474,879	7,253,245			-1,778,366	
ENTERPRISE PRODS PARTNERS LP		Purchased			2,575,693	2,240,746			334,947	
TALLGRASS ENERGY LP		Purchased	2020-04		29,100,386	22,964,878			6,135,508	
ISHARES PHLX SEMICONDUCTOR ETF		Donated	2020-09		22,053,273	14,038,750		0	8,014,523	

DLN: 934911240122

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491124012211

TY 2020 Investments Corporate Stock Schedule

Name: THE DEHAEMERS FAMILY CHARITABLE TRUST

ETN: 43-6031676

EIN: 43-6931676 Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
AIR PRODUCTS & CHEMICALS	262,768	956,270
AT&T INC	8,932,734	8,771,800
AVANOS MED INC	6,372	11,470
JOHNSON & JOHNSON	134,166	314,760
KIMBERLY CLARK	148,174	269,660
KINDER MORGAN INC	287,596	191,380
PROCTER & GAMBLE	2,982,046	4,104,630
THE SOUTHERN COMPANY	343,504	460,725
ALTRIA GROUP INC	3,182,216	3,075,000
BRISTOL-MYERS SQUIBB CO	11,840,007	15,507,500
DOW INC	6,467,132	11,100,000
EXXON MOBIL	6,415,873	5,152,500
JPMORGAN CHASE & CO	7,302,749	10,165,600
JOHNSON & JOHNSON	7,762,715	8,970,660
NEWELL BRANDS INC	1,211,501	1,592,250
зм со	7,420,000	8,739,500
VERIZON COMUNICATIONS	5,960,854	5,875,000
WALMART INC	7,526,281	10,811,250
INVESCO EXCH TRADED FD TR II S&P 500 HDL	5,541,255	5,637,000
PROHSARES TR SHORT S&P 500	6,127,000	5,391,000
SELECT SECTOR SPDR TRUST AMEX FINANCIAL	3,490,194	4,422,000
UTILITIES SELECT SECTOR SPDR FUND	9,103,900	9,405,000

efile GRAPHIC print - DO NOT PROCESS	DLN: 93491124012211				
TY 2020 Other Increases Schedule					
Name: THE DEHAEMERS FA	AMILY CHARITABLE TRUST				
EIN: 43-6931676					
Other Increases Schedule					
Description	Amount				
Description Book/tax timing differences	Amount 325				
•					
Book/tax timing differences	325				

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data -	- [DLN	N: 93491124012211
TY 2020 Taxes Sched	ule				
	Name	THE DEHAEN	MERS FAMILY CHA	DITABLE TRUST	
				KITADLL TROST	
	ETM:	43-6931676			
Taxes Schedule					1
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX		79,671			

efile GRAPHIC print - DO	NOT PROCESS As File	ed Data -			DLN: 93491124012211	
Schedule B		Schedule of C	ontributors		OMB No. 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Attach to Form 990, 9 Nww.irs.gov/Form990		ion.	2020	
Name of the organization THE DEHAEMERS FAMILY O	HARITABLE TRUST			Employer	identification number	
Organization type (chec	cone):			43-693167	<u>'6</u>	
	,					
Filers of:	Section:					
Form 990 or 990-EZ						
	4947(a)(1) nonexe	empt charitable trust	not treated as a priv	ate foundation		
	☐ 527 political organ	nization				
Form 990-PF	✓ 501(c)(3) exempt	private foundation				
4947(a)(1) nonexempt charitable trust treated as a private foundation						
	☐ 501(c)(3) taxable	private foundation				
	ion filing Form 990, 990-EZ property) from any one cont					
Special Rules						
under sections 50 received from any	n described in section 501(9(a)(1) and 170(b)(1)(A)(vi) one contributor, during the 1h, or (ii) Form 990-EZ, lin	, that checked Sched year, total contribution	dule A (Form 990 or sons of the greater of	990-EZ), Part II, line 1	3, 16a, or 16b, and that	
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
during the year, c If this box is chec purpose. Don't co	n described in section 501(ontributions exclusively for raced, enter here the total complete any of the parts unle e, etc., contributions totalin	religious, charitable, our intributions that were less the General Rule	etc., purposes, but n received during the y applies to this orga	o such contributions to ear for an e <i>xclusively</i> nization because it rec	otaled more than \$1,000. religious, charitable, etc., ceived <i>nonexclusively</i>	
990-EZ, or 990-PF), but it	that isn't covered by the Gomust answer "No" on Part t I, line 2, to certify that it do	IV, line 2, of its Forn	n 990; or check the b	ox on line H of its For		
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-	t Notice, see the Instructions PF.	Cat.	No. 30613X	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2020)	

Employer identification number 43-6931676

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additi	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID BARBARA DEHAEMERS 14747 MISSION ROAD OVERLAND PARK, KS 66224	\$ 10,000,000	Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	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.)
(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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
		Calcadula D /Fa	000 000 E7 000 DE\ (0000)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2020)		Page 4
	rganization EMERS FAMILY CHARITABLE TRUST		Employer identification number 43-6931676
Part III	than \$1,000 for the year from any one contributo	or. Complete columns (a) of exclusively religious, outions.) ► \$	cribed in section 501(c)(7), (8), or (10) that total more through (e) and the following line entry. For charitable, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
		<u> </u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and ZIP 4	_	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee
		_	Schedule B (Form 990, 990-EZ, or 990-PF) (2020)