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990-PF

Department of the Treasury Internal Revenue Service

Submission Date - 2022-11-14

DLN: 93491318005462

OMB No. 1545-0047

2021

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2021, or tax year beginning 01-01-20	21 , aı	nd ending 12-31-	2021	
		indation FOUNDATION INC		A Employer ide	entification number	r
•				82-3782472		
		I street (or P.O. box number if mail is not delivered to street address) DOKWOOD RD	Room/suite	B Telephone nur	mber (see instructions	5)
-	ZI DIK	SOLVIOUS NO		(913) 522-6270		
		, state or province, country, and ZIP or foreign postal code LLS, KS 662081224	l	C If a communities a		
141133	ION THE			C if exemption a	application is pending	, check here
G Ch	eck al	I that apply:	ormer public charity	D 1. Foreign org	janizations, check her	re
		☐ Final return ☐ Amended return			ganizations meeting t k here and attach con	
		Address change Name change		·		
H Ch	eck ty	pe of organization: Section 501(c)(3) exempt private fo	oundation		ndation status was te n 507(b)(1)(A), check	
	Section		private foundation			
		rom Part II col (c)	🛂 Cash 🔲 Accrua	F If the founda under section	tion is in a 60-month n 507(b)(1)(B), check	
		\$ 999,516 Uther (specify) (Part I, column (d) must be	ne on cash hasis)			
			or cash basis.		1	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions).)	expenses per books	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach				
		schedule)	682,305			
	2	Check if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	41	41	41	
	4	Dividends and interest from securities				
	5a	Gross rents	11,456	11,456	11,456	
	b	Net rental income or (loss) 2,299				
iue	6a	Net gain or (loss) from sale of assets not on line 10	-59,731			
Revenue	b	Gross sales price for all assets on line 6a				
Re	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain			0	
	9	Income modifications				
	10a b	Gross sales less returns and allowances Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	634,071	11,497	11,497	
S	13	Compensation of officers, directors, trustees, etc.	0	0	0	0
ıse	14	Other employee salaries and wages	36,995	397	397	36,598
tbe	15	Pension plans, employee benefits				
E	16a	Legal fees (attach schedule)	2,584	0	0	2,584
tive	b	Accounting fees (attach schedule)	12,299	0	0	12,299
stra	c	Other professional fees (attach schedule)	3,500	0	0	3,500
Operating and Administrative Expenses	17	Interest				
dm	18	Taxes (attach schedule) (see instructions)	1,643	753	753	890
d A	19	Depreciation (attach schedule) and depletion				
an	20	Occupancy	560	0	0	560
ing	21	Travel, conferences, and meetings				
rat	22	Printing and publications	20.5:-	0.00	0.00	20.612
odc	23	Other expenses (attach schedule)	38,847	8,007	8,007	30,840
_	24	Total operating and administrative expenses.	96,428	9,157	9,157	87,271
	25	Add lines 13 through 23	96,428		9,157	87,271
						· ·
	26	Total expenses and disbursements. Add lines 24 and 25	96,428	9,157	9,157	87,271
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and disbursements	537,643			
	b	Net investment income (if negative, enter -0-)		2,340		
	С	Adjusted net income (if negative, enter -0-)			2,340	
_	_					

Form	990-PF (2021)			Page 4
Pa	rt V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)		
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	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations enter 4% (0.04)			
2	of Part I, line 12, col. (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
3	Add lines 1 and 2			33
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			33
6	Credits/Payments: 2021 estimated tax payments and 2020 overpayment credited to 2021			
a b	2021 estimated tax payments and 2020 overpayment credited to 2021 Exempt foreign organizations—tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 100			
d	Backup withholding erroneously withheld 6d 0			
7	Total credits and payments. Add lines 6a through 6d			100
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			67
11	Enter the amount of line 10 to be: Credited to 2022 estimated tax 67 Refunded 11			0
Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
b	it participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions	1a		No
	for the definition.	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \blacktriangleright \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			N-
4a	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		No No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
J	Pround bullet By language in the governing instrument, or			
	round bullet 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?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),	1_	.,	
8-3	and Part XIV. Enter the states to which the foundation reports or with which it is registered (see instructions)	7	Yes	
8a	KS KS			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		.,	
9	General (or designate) of each state as required by General Instruction G? If "No," attach explanation. Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	8b	Yes	
3	or 4942(j)(5) for calendar year 2021 or the taxable year beginning in 2021? See the instructions for Part XIII.			
	If "Yes," complete Part XIII	9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses.	10	Yes	

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?. .

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Pa	rt VI-B Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	oay o	incur any amount to:				Yes	No
	(1) Carry on propaganda, or otherw	ise at	tempt to influence legisla	tion (section 4945(e))?.		5a(1)		No
	(2) Influence the outcome of any sp	ecific	public election (see secti	ion 4955); or to carry				
	on, directly or indirectly, any vo	ter re	gistration drive?			5a(2)		No
	(3) Provide a grant to an individual	for tra	avel, study, or other simil	ar purposes?		5a(3)		No
	(4) Provide a grant to an organization	on oth	er than a charitable, etc.	, organization described				
	in section 4945(d)(4)(A)? See in:	struct	ions			5a(4)		No
	(5) Provide for any purpose other th	an re	ligious, charitable, scient	ific, literary, or				
	educational purposes, or for the					5a(5)		No
b	If any answer is "Yes" to 5a(1)-(5), d	lid an	y of the transactions fail	to qualify under the exce	ptions described in			
	Regulations section 53.4945 or in a	curre	- nt notice regarding disast	er assistance? See instru	Ictions	. 5b		
С	Organizations relying on a current n	otice	regarding disaster assista	ance check				
d	If the answer is "Yes" to question 5a	(4), d	oes the foundation claim	exemption from the				
	tax because it maintained expenditure responsibility for the grant?......................							
	If "Yes," attach the statement requir	ed by	Regulations section 53.4	1945-5(d).				
6a	Did the foundation, during the year,	-	_		ms on			
	a personal benefit contract?							No
b	 							No
_	If "Yes" to 6b, file Form 8870.							110
7a								No
	If "Yes", did the foundation receive a					7a 7b		<u> </u>
8	Is the foundation subject to the sect		•			7.2		
	excess parachute payment during the		· ·	111010 111011 \$1,000,000 11	Tremaneration of	8		No
				. in implication was	nagers, Highly Paid Em			
1	and Contractors List all officers, directors, truste	es, f	oundation managers a	nd their compensation	. See instructions			
	(a) Name and address	-	b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe		
PATRIC	CIA REECE		CTOR, PRESIDENT, TREAS	0	0			0
	BROOKWOOD RD	5.00						
	ON HILLS, KS 66208	DIDE	CTOR, VICE PRESIDENT					
	REECE BROOKWOOD RD	1.00	JIOK, VICE PRESIDENT	C	0			0
	ON HILLS, KS 66208							
2	Compensation of five highest-pa	id er	nployees (other than t	hose included on line	L—see instructions). If non	e, enter '	'NONE	."
(a) l	Name and address of each employee more than \$50,000	devoted to position		employee benefit	(e) Expense other all			
NONE								
				†	+			
					+			
Total	number of other employees paid over	er \$50	0.000-	<u> </u>	 			0
		υ, ψυ	.,			Form 9 9	On-DE	
						1011111 33	- U-F F	(4041)

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Part VII Information About Officers, Directors, Trustees, Found and Contractors (continued)	lation Managers, Highly Paid E	imployees,
3 Five highest-paid independent contractors for professional services (se	ee instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
otal number of others receiving over \$50,000 for professional services		
art VIII-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year. Include relevant stat	tistical information such as the number of	Expenses
ganizations and other beneficiaries served, conferences convened, research papers produced, etc.		Lxperises
1 TO PROMOTE EDUCATION AND COMMUNITY AND TO SERVE AS A CULTURAL RESOL SCIENCES, ARTS, NATURAL SCIENCE AND HISTORY.	URCE FOR THE HUMANITIES,	96,428
2		30,120
<u> </u>		
2		
<u> </u>		
<u> </u>		
<u> </u>		
North VIII D. Commonwood Dunguram Dolotted Investments (see instruct	tions)	
Part VIII-B Summary of Program-Related Investments (see instruct	,	A
Describe the two largest program-related investments made by the foundation during the tax years.	ar on lines 1 and 2.	Amount
1		-
		1
2		
		1
All other program-related investments. See instructions.		
3		
-		1
		1
otal. Add lines 1 through 3		•
		Form 990-PF (202

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ons, se	e instructions.)
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	0
b	Average of monthly cash balances	1b	76,708
С	Fair market value of all other assets (see instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	76,708
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	0
3	Subtract line 2 from line 1d	3	76,708
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	1,151
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	75,557
6	Minimum investment return. Enter 5% (0.05) of line 5	6	3,778
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certa	ain foreign organizations
Fal	check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2021 from Part V, line 5 2a		
b	Income tax for 2021. (This does not include the tax from Part V.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	87,271
b	Program-related investments—total from Part VIII-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4.	4	87,271
l —	<u> </u>		Form 990-PF (2021)
			,/

e From 2020		
 4 Qualifying distributions for 2021 from Part XI, line 4: \$ a Applied to 2020, 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)		

(Election required—see instruct	ions)		
c Treated as distributions out of c required—see instructions)			
d Applied to 2021 distributable a	mount		
e Remaining amount distributed	out of corpus		
5 Excess distributions carryover a	applied to 2021.		
(If an amount appears in colum same amount must be sh			
6 Enter the net total of each of indicated below:	column as		
a Corpus. Add lines 3f, 4c, and 4e	. Subtract line 5		
b Prior years' undistributed incom	ne. Subtract		

 Remaining amount distributed out of corpus 		
5 Excess distributions carryover applied to 2021.		
(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:		
a 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		
161		

d Subtract line 6c from line 6b. Taxable amount e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may

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8 Excess distributions carryover from 2016 not applied on line 5 or line 7 (see instructions). . . 9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9:

a Excess from 2017. . . . **b** Excess from 2018. . . . **c** Excess from 2019. . . . **d** Excess from 2020. . . . **e** Excess from 2021. . . .

	n 990-PF (2021)					Page 10
	art XIII Private Operating Found			· · · · · · · · · · · · · · · · · · ·		
1a	If the foundation has received a ruling or det foundation, and the ruling is effective for 20			-		
b	Check box to indicate whether the organizat	ion is a private operati	ing foundation desc	ribed in section	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 IX for each	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) lotal
	year listed	2,340	0	0	0	2,340
b	85% (0.85) of line 2a	1,989	0	0	0	1,989
С	Qualifying distributions from Part XI, line 4 for each year listed	87,271	50,270	209,235	79,439	426,215
d	Amounts included in line 2c not used					
	directly for active conduct of exempt					
	activities	0	0	0	0	0
е	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c	87,271	50,270	209,235	79,439	426,215
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
a	"Assets" alternative test—enter:				152 442	152 442
	(1) Value of assets				153,442	153,442
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				109,019	109,019
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in					
_	Part IX, line 6 for each year listed					0
С	"Support" alternative test—enter: (1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments					
	on securities loans (section				331,000	331,000
	512(a)(5)), or royalties) (2) Support from general public				331,000	331,000
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	t XIV Supplementary Information			oundation had	5,000 or more	in
	assets at any time during th		uctions.)			
l a	Information Regarding Foundation Man List any managers of the foundation who ha		han 20/ of the total	contributions resolv	and by the foundation	n
а	before the close of any tax year (but only if					11
	, , , , , , , , , , , , , , , , , , , ,	.,	, , , , , , , ,	(,,,,	
	PATRICIA REECE					
	JERRY REECE					
b	List any managers of the foundation who ow				ge portion of the	
	ownership of a partnership or other entity) of	of which the foundation	n has a 10% or grea	iter interest.		
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Scho	olarship, etc., Pro	grams:		
			• • • • •		Jana 1124 a annum	
	Check here if the foundation only mak unsolicited requests for funds. If the foundar	es contributions to pre	eselected charitable	e organizations and t s or organizations up	nder	
	other conditions, complete items 2a, b, c, a		s, etc. to marvidual	3 or organizations ar	idei	
	· · · · · · · · · · · · · · · · · · ·					
а	The name, address, and telephone number	or email address of the	e person to whom a	polications should b	e addressed:	
_	The fidine, address, and telephone named	or email address or the	, person to mioni a	ppca.:0::0 5ca.a 5	- uuu. csscu.	
h	The form in which applications should be su	hmitted and information	on and materials the	ov should include:		
b	The form in which applications should be su	billitted and illioillatit	on and materials the	ey should include.		
C	Any submission deadlines:					
d	Any restrictions or limitations on awards, su	ch as by geographical	areas, charitable fie	elds, kinds of institut	tions, or other	
	factors:					

Part XIV Supplementary Information (continued)

Supplementary information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment							
	Desirient	If recipient is an individual,					

Recipient	If recipient is an individual,	Foundation	Durnoss of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
Paid during the year	or substantial contributor			
J ,				
「otal			▶ 3a	
Approved for future payment				

Enter gros		Unrelated bus	inace income	Final radiant but an ablan	F12 F12 F14	(e)
	s amounts unless otherwise indicated.	Unrelated bus	(b)	Excluded by section	(d)	Related or exempt function income
a	m service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
d						
g Fees 2 Memb	and contracts from government agencies ership dues and assessments st on savings and temporary cash					
4 Divide	ments ends and interest from securities ental income or (loss) from real estate:	541900	41			
a Debtb Not6 Net re	t-financed property debt-financed property	531110	2,299			
8 Gain of invent						-59,73
10 Gross 11 Other	come or (loss) from special events: profit or (loss) from sales of inventory revenue: a					
c						
12 Subto13 Total.	tal. Add columns (b), (d), and (e)		2,340		(-59,73 -57,391
(See w	Evalain halaw haw aach activity for which	he Accomplishi			d importantly to	
•	the accomplishment of the foundation's e instructions.)	xempt purposes (of	ther than by provi	iding funds for such	purposes). (See	
5 5	TO ATTRACT AND RETAIN COMMUNITY INTEF HISTORICAL, CULTURAL, AND EDUCATIONAL					

Pa	art XV		Information Re Exempt Organiz		ansfers To a	nd Transac	tions a	nd Relation	ships With Noi	ncharita	ble		.gc = 2
			ization directly or inc than section 501(c)(directly engag						on		Yes	No
a T	ransfer	s fron	n the reporting found	dation to a no	ncharitable exe	empt organizat	tion of:			Ī			
(1) Cas	h									1a(1)		No
(2) Oth	er ass	sets							[1a(2)		No
b (ther tra	ansac	tions:										
(1) Sale	es of a	assets to a noncharit	able exempt	organization.					[1b(1)		No
(2) Purd	chase	s of assets from a no	oncharitable e	exempt organiz	ation					1b(2)		No
(3) Ren	tal of	facilities, equipmen	t, or other as	sets					[1b(3)		No
(4) Reir	mburs	sement arrangement	S						. [1b(4)		No
(5) Loa	ns or	loan guarantees							🖺	1b(5)		No
			nce of services or me	•	•					· [1b(6)		No
	-		cilities, equipment, m							· L	1 c		No
i	f the go n any tr	oods, ansac	to any of the above other assets, or serv ction or sharing arrar	vices given by ngement, sho	the reporting for the reportin	foundation. If t) the value of	the founda the goods	ation received s, other assets	less than fair marl s, or services receiv	ket value red.			
(a) L	ine No.	(b) Amount involved	(c) Name of r	noncharitable exe	mpt organizatior	n (d)	Description of	transfers, transactions	s, and sharir	ng arran	gement	ts
							-						
C	escribe	d in s	cion directly or indire section 501(c) (other	than section	,			- 1 3.		es 🔽 I	No		
b If	"Yes,"		lete the following sc		1				(10				
			(a) Name of organizatio	n	(1	b) Type of organ	ization		(c) Description	n of relation	iship		
			penalties of perjury, I wledge and belief, it										
Sig He	n pr		er has any knowledge			2022-11-10			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	May the IF	RS discuss	this retu	ırn
		Sign	nature of officer or tr	ustee		Date		Title		with the p See instru			-
		-	Print/Type preparer's	name	Preparer's Sign	nature	Dat	to		PTIN			
					. reparer 3 Jigi		Dat	ıc	Check if self-		DO1000	266	
Pai	d		RACHEL M HARTNE	ĒΠ					employed ▶ □		P01289	369	
Pre	pare Onl		irm's name ► MAR	KSNELSON LI	_C					Firm's Ell	N ▶48-	12386	45
J 3(. J iii	- ⊢	irm's address ► 13	310 E 104TH S	ST SUITE 300								
		ľ								Phone no). (816)	743-7	7700
			K/	ANSAS CITY, N	MO 64131						J. (JIU)	, ,,, ,	, 50

efile GRAPHIC print	Submission Date - 2022-11-14		DLN	93491318005462
Schedule B	Schedule of	Contributors		OMB No. 1545-0047
(Form 990) Department of the Treasury Internal Revenue Service		90, 990-EZ, or 990-PF. <u>90</u> for the latest information.		2021
Name of the organization VOLLAND FOUNDATION INC				entification number
Organization type (che	eck one):		82-3782472	
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)() (enter number) orga	anization		
	4947(a)(1) nonexempt charital	ole trust not treated as a priva	ate foundatio	on
	☐ 527 political organization			
Form 990-PF	✓ 501(c)(3) exempt private found	dation		
	4947(a)(1) nonexempt charital	ple trust treated as a private fo	oundation	
	☐ 501(c)(3) taxable private found	dation		
determining a de	ney or other property) from any one contributor's total contributions. ion described in section 501(c)(3) filin	·		
regulations under sections 5 16b, and that re	09(a)(1) and 170(b)(1)(A)(vi), that che ceived from any one contributor, during the countributor on (i) Form 990, Part VIII, line 1	cked Schedule A (Form 990 or ng the year, total contribution	990-EZ), Pa s of the grea	rt II, line 13, 16a, or ater of (1) \$5,000 or
For an organizat contributor, during the year,	ion described in section 501(c)(7), (8) total contributions of more than \$1,0 toses, or for the prevention of cruelty	, or (10) filing Form 990 or 990 00 <i>exclusively</i> for religious, ch)-EZ that rec naritable, sci	reived from any one entific, literary, or
contributor, during the year, more than \$1,00 <i>exclusively</i> relig this organization	contributions exclusively for religious to this box is checked, enter here to because it received nonexclusively religious.	s, charitable, etc., purposes, b he total contributions that wer complete any of the parts unle eligious, charitable, etc., contr	ut no such c e received d ess the Gene	ontributions totaled luring the year for an eral Rule applies to
	on that isn't covered by the General R it must answer "No" on Part IV, line :			
	art I, line 2, to certify that it doesn't m	neet the filing requirements of	Schedule B	(Form 990,
For Paperwork Reduction A	ct Notice, see the Instructions	Cat. No. 30613X	Sche	dule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page 2 Name of organization Employer identification number 82-3782472 **VOLLAND FOUNDATION INC** Part I **Contributors Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (d) (a) (c) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution THE VOLLAND STORE LLC Person 24098 VOLLAND ROAD Payroll \$ 526,741 Noncash ALMA, KS 66401 (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 **HUMANITIES KANSAS - GRANT** Person 116 SW 6TH AVENUE SUITE 400 Payroll \$ 4,900 Noncash TOPEKA, KS 66603 (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person JERRY REECE 3 2021 BROOKWOOD Payroll \$84,921 Noncash MISSION HILLS, KS 66208 (Complete Part II for noncash contributions.) (c) (a) (b) (d) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 **Person** Payroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll \$ Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions.)





	B (Form 990) (2021)		Page				
Name of o	organization FOUNDATION INC		Employer identification number				
			82-3782472				
Part III	Exclusively religious, charitable, (8), or (10) that total more than through (e) and the following linexclusively religious, charitable, information once. See instructionally equalizate copies of Part III if additional to the copies of Part III i	ntributor. Complete columns (a) g Part III, enter the total of					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, a	(e) Transfer of gift and ZIP 4 Relationship	of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift				
Part I		<u> </u>					
		<u> </u>					
	Transferee's name, address, a	(e) Transfer of gift and ZIP 4 Relationship	of transferor to transferee				
(a)			I				
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, a	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				
		-					
		(a) Transfer of gift					
	Transferee's name, address, a	(e) Transfer of gift and ZIP 4 Relationship	of transferor to transferee				

Schedule B (Form 990) (2021)

efile GRAPHIC print	Submission	on Date - 2022-11-14	4	D	LN: 93491318005462
		Name: VOLLAND	FOUNDATION INC 172		
Category		Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

efile GRAPHIC print	Submission I	Date - 2022-11-14		DL	N: 93491318005462
	_	me: VOLLAND FO			
Categor	У	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES		2,584	0	0	2,584

Submission Date - 2022-11-14

efile GRAPHIC print

DESIGN/CONSULTING FEES

REPAIRS AND MAINTENANCE

OFFICE SUPPLIES

UTILITIES

Description

EIN: 82-3782472

Description	Expenses per Books	Net Investment Income	Income	Charitable Purposes
BANKING SERVICES CHARGES	162	0	0	162
BUSINESS LICENSES & PERMITS	540	0	0	540
OFFICE SUPPLIES	1,041	0	0	1,041
CONTRACT LABOR	4,201	0	0	4,201
MEALS (100%)	2,348	0	0	2,348
LAWN MAINTENANCE	4,281	0	0	4,281
REPAIRS AND MAINTENANCE	1,842	0	0	1,842
ADVERTISING AND PROMOTION	5,375	0	0	5,375
MARKETING	7,644	0	0	7,644
MISCELLANEOUS EXPENSE	406	0	0	406
DUES AND SUBSCRIPTIONS	6	0	0	6
SQUARE SERVICE FEES	360	0	0	360
ART EXHIBITS	2,156	0	0	2,156
AUDIO/VISUAL	208	0	0	208
CREDIT CARD FEES	150	0	0	150
DESIGN/CONSULTING FEES	120	0	0	120
INSURANCE	3,798	3,798	3,798	0
CLEANING	1,990	1,990	1,990	0

293

70

215

1,641

293

70

215

1,641

293

70

215

1,641

0

0

0

Net Investment

Adjusted Net

DLN: 93491318005462

Dishursements for

efile GRAPHIC print	Submission D	Date - 2022-11-14		DL	N: 93491318005462
		me: VOLLAND FO			
Category	y	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING FEES		3,500	0	0	3,500

efile GRAPHIC print	Submission Date - 2022-11-14	DLN: 93491318005462
	Name: VOLLAND EIN: 82-378247	
	Name	Address
PATRICIA REECE		2021 BROOKWOOD RD MISSION HILLS, KS 662081224
JERRY REECE		2021 BROOKWOOD RD MISSION HILLS, KS 662081224

efile GRAPHIC print	DI	N: 93491318005462			
	ľ	Name: VOLLAND FO EIN: 82-3782472			
Category	,	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY TAXES		890	0	0	890
PROPERTY TAXES		753	753	753	0

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