

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**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](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018**

Name of foundation CHARLES A SULLIVAN FOUNDATION C/O BANK OF BLUE VALLEY CO-TRUSTEE		<b>A Employer identification number</b> 48-1196696
Number and street (or P O box number if mail is not delivered to street address) 11935 RILEY STREET	Room/suite	<b>B Telephone number</b> (see instructions) (816) 751-4285
City or town, state or province, country, and ZIP or foreign postal code OVERLAND PARK, KS 66213		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>10,762,415</u>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	16,833	16,833		
	<b>4</b> Dividends and interest from securities	295,615	295,615		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	261,485			
	<b>b</b> Gross sales price for all assets on line 6a	1,709,304			
	<b>7</b> Capital gain net income (from Part IV, line 2)		261,485		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	7,237	457			
<b>12 Total.</b> Add lines 1 through 11	581,170	574,390			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	7,725	7,725		0
	<b>c</b> Other professional fees (attach schedule)	87,510	87,510		0
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	4,935	4,935		4,935
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	808	0		808
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	100,978	100,170		5,743
	<b>25</b> Contributions, gifts, grants paid	528,000			528,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	628,978	100,170		533,743	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-47,808				
<b>b Net investment income</b> (if negative, enter -0-)		474,220			
<b>c Adjusted net income</b> (if negative, enter -0-)					

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	358,202	671,055	671,055
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	5,021,000	4,275,644	8,872,763
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	877,680	1,246,620	1,190,772
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	34,685	32,218	27,825
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	6,291,567	6,225,537	10,762,415	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	6,291,567	6,225,537	
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	0	0		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	6,291,567	6,225,537		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	6,291,567	6,225,537		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	6,291,567
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-47,808
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	6,243,759
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	18,222
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	6,225,537

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	261,485
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	501,570	10,336,081	0.048526
2016	494,963	9,684,976	0.051106
2015	498,169	9,553,894	0.052143
2014	482,298	9,581,054	0.050339
2013	420,155	9,156,970	0.045884

<b>2</b> Total of line 1, column (d)	2	0.247998
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.049600
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	10,350,528
<b>5</b> Multiply line 4 by line 3	5	513,386
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	4,742
<b>7</b> Add lines 5 and 6	7	518,128
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	533,743

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes categories like 'Exempt operating foundations', 'Domestic foundations that meet the section 4940(e) requirements', and 'Tax based on investment income'. Total amount owed is 7,213.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Questions include 'During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?' and 'Has the foundation engaged in any activities that have not previously been reported to the IRS?'. Includes 'Yes' and 'No' columns.

Part VII-A Statements Regarding Activities (continued)

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.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of BANK OF BLUE VALLEY Telephone no (913) 234-3000

Located at PO BOX 26128 OVERLAND PARK KS ZIP+4 66225

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15

16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part 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.

1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official?
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance?
c 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 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?
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?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b 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 2018?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda... (2) Influence the outcome of any specific public election... (3) Provide a grant to an individual for travel... (4) Provide a grant to an organization other than a charitable... (5) Provide for any purpose other than religious... b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify... c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax... 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

Table with 5 columns: (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) Expense account, other allowances. Rows include CHARLES SULLIVAN, JACQUELINE SULLIVAN, TIMOTHY SULLIVAN, and BANK OF BLUE VALLEY.

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

Table with 5 columns: (a) Name and address of each employee paid more than \$50,000, (b) Title, and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans and deferred compensation, (e) Expense account, other allowances. First row contains "NONE".

Total number of other employees paid over \$50,000. 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services.</b>		<b>0</b>

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	9,770,201
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	710,124
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	27,825
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	10,508,150
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	10,508,150
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	157,622
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	10,350,528
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	517,526

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	517,526
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	4,742
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	4,742
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	512,784
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	512,784
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	512,784

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	533,743
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	533,743
<b>5</b>	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.	<b>5</b>	4,742
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	529,001

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				512,784
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .		9,663		
<b>c</b> From 2015. . . . .		34,492		
<b>d</b> From 2016. . . . .		14,850		
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	59,005			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>533,743</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				512,784
<b>e</b> Remaining amount distributed out of corpus	20,959			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )		0		0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	79,964			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> 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). . . . .	0			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	79,964			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .		9,663		
<b>b</b> Excess from 2015. . . . .		34,492		
<b>c</b> Excess from 2016. . . . .		14,850		
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .		20,959		

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2018</b>	<b>(b) 2017</b>	<b>(c) 2016</b>	<b>(d) 2015</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		<b>(e)</b> Related or exempt function income (See instructions )
	<b>(a)</b> Business code	<b>(b)</b> Amount	<b>(c)</b> Exclusion code	<b>(d)</b> Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	16,833	
<b>4</b> Dividends and interest from securities. . . . .			14	295,615	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			14	457	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	261,485	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
<b>a</b> FERRELLGAS PARTNERS, LP	211110	6,668			
<b>b</b> OAKTREE CAPITAL GROUP	211110	112			
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		6,780		574,390	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .					<b>581,170</b>

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions )

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

**Part XVII**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<b>1c</b>		<b>No</b>

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

<b>(a)</b> Line No	<b>(b)</b> Amount involved	<b>(c)</b> Name of noncharitable exempt organization	<b>(d)</b> Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  Yes  No

**b** If "Yes," complete the following schedule

<b>(a)</b> Name of organization	<b>(b)</b> Type of organization	<b>(c)</b> Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  \*\*\*\*\*  2019-05-14  \*\*\*\*\*

Signature of officer or trustee  Date  Title

May the IRS discuss this return with the preparer shown below (see instr )?  **Yes**  **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name STEVEN W REED CPAABVCFF	Preparer's Signature	Date 2019-05-14	Check if self-employed <input type="checkbox"/>	PTIN P00109135
	Firm's name <b>▶</b> BGBC PARTNERS LLP				Firm's EIN <b>▶</b> 20-5804172
	Firm's address <b>▶</b> 300 N MERIDIAN ST STE 1100 INDIANAPOLIS, IN 46204				Phone no (317) 633-4700

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 ABBOTT LABS SENIOR NOTE DTD		2009-02-27	2018-03-22
1 ACUITY BRANDS INC		2017-04-05	2018-11-13
ACUITY BRANDS INC		2017-04-05	2018-10-02
AMBEV SA SPONS ADR		2012-05-21	2018-02-06
AMERICAN BEACON SOUND POINT FLOATING RATE INCOME FUND		2017-11-27	2018-11-02
AMERICAN INTERNATIONAL GROUP INC		2015-09-17	2018-05-03
AMERICAN INTERNATIONAL GROUP INC		2015-09-17	2018-09-04
ANDERSONS INC		2011-01-19	2018-03-26
ANHEUSER BUSCH COS INC DTD		2009-10-06	2018-04-23
ASPEN INSURANCE HOLDINGS LTD		2016-02-05	2018-05-02

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
40,031		39,074	957
18,592		25,981	-7,389
23,401		25,981	-2,580
33,099		37,590	-4,491
198,069		200,000	-1,931
25,479		29,382	-3,903
26,502		29,382	-2,880
12,065		10,079	1,986
51,071		50,250	821
15,660		15,990	-330

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			957
			-7,389
			-2,580
			-4,491
			-1,931
			-3,903
			-2,880
			1,986
			821
			-330

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
ASPEN INSURANCE HOLDINGS LTD		2016-02-05	2018-08-08
1 BASF SE SPONSORED ADR		2013-10-03	2018-12-07
BASF SE SPONSORED ADR		2014-09-23	2018-12-07
BASF SE SPONSORED ADR		2015-09-01	2018-12-07
BRITISH AMERICAN TOBACCO		2017-07-25	2018-11-12
BROWN FORMAN CORP CL B		2016-01-27	2018-01-16
BROWN FORMAN CORP CL B		2016-02-03	2018-01-16
CITIGROUP INC DEP SHS C		2013-03-19	2018-10-22
DELUXE CORP		2006-03-15	2018-03-26
EVERGY INC		2008-07-17	2018-06-11

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
13,802		15,990	-2,188
13,068		19,314	-6,246
9,801		14,601	-4,800
29,403		35,343	-5,940
57,121		103,875	-46,754
46,591		32,704	13,887
53,247		38,272	14,975
50,000		50,000	0
177,271		60,996	116,275
13		10	3

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-2,188
			-6,246
			-4,800
			-5,940
			-46,754
			13,887
			14,975
			0
			116,275
			3

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
EXPERIAN PLC		2017-08-10	2018-04-25
1 EXPERIAN PLC SPONSORED		2017-08-29	2018-04-25
FARMLAND PARTNERS INC		2017-05-17	2018-08-07
FERRELLGAS PARTNERS LP		2011-06-15	2018-03-26
FERRELLGAS PARTNERS LP		2011-06-15	2018-03-26
GENERAL MILLS INC		2005-03-02	2018-03-26
GENERAL MILLS INC		2008-09-24	2018-03-26
GREAT PLAINS ENERGY		2008-03-17	2018-06-05
GREAT PLAINS ENERGY		2008-07-17	2018-06-05
GREAT PLAINS ENERGY		2008-11-12	2018-06-05

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
22,530		19,940	2,590
33,794		29,450	4,344
29,800		48,895	-19,095
1,521		9,736	-8,215
		261	-261
41,362		28,005	13,357
93,515		70,577	22,938
24,434		24,434	0
12,452		12,452	0
17,500		17,500	0

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			2,590
			4,344
			-19,095
			-8,215
			-261
			13,357
			22,938
			0
			0
			0



**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
IMPERIAL BRANDS PLC		2012-01-05	2018-12-06
1 IMPERIAL BRANDS PLC		2012-01-06	2018-12-06
IMPERIAL BRANDS PLC		2012-05-21	2018-12-06
IMPERIAL BRANDS PLC		2013-03-26	2018-12-06
JAPAN TOBACCO INC		2017-10-04	2018-12-06
LUXOTTICA GROUP SPA		2016-02-01	2018-10-23
LYONDELLBASELL INDUSTRIES N		2013-07-29	2018-05-16
WALGREENS BOOTS ALLIANCE INC		2014-08-06	2018-03-01
WALGREENS BOOTS ALLIANCE INC		2004-01-09	2018-03-01
WALGREENS BOOTS ALLIANCE INC		2014-09-22	2018-03-01

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
537		673	-136
23,325		29,239	-5,914
23,861		30,604	-6,743
41,758		48,230	-6,472
24,620		32,860	-8,240
31,504		29,550	1,954
57,965		33,513	24,452
17,554		14,716	2,838
280,862		101,600	179,262
35,108		30,770	4,338

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-136
			-5,914
			-6,743
			-6,472
			-8,240
			1,954
			24,452
			2,838
			179,262
			4,338

**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>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo, day, yr)	<b>(d)</b> Date sold (mo, day, yr)
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
1,016			1,016

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			1,016

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

CHARLES SULLIVAN

JACQUELINE SULLIVAN

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ADVICE & AID PREGNANCY CENTER 11031 W 75TH TERRACE OVERLAND PARK, KS 66214	NONE	EXEMPT	GENERAL	15,000
AID TO WOMEN CENTER 2039 S MILL AVE SUITE C TEMPE, AZ 85282	NONE	EXEMPT	GENERAL	10,000
ALEXANDRA'S HOUSE 638 WEST 39TH TERRACE KANSAS CITY, MO 64111	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ARCHBISHOP'S CALL TO SHARE PO BOX 2568 SHAWNEE MISSION, KS 66201	NONE	EXEMPT	GENERAL	15,000
BETHANY HOUSE PO BOX 5930 TOLEDO, OH 43613	NONE	EXEMPT	GENERAL	15,000
BIRTHRIGHT OF KANSAS CITY 6309 WALNUT STREET KANSAS CITY, MO 64113	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . .</b>				528,000

▶ 3a

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BISHOP SULLIVAN CENTER 6435 TRUMAN ROAD KANSAS CITY, MO 64126	NONE	EXEMPT	GENERAL	20,000
BOWLING GREEN PREGNANCY CENTER 441 29 BOWLING GREEN, OH 43402	NONE	EXEMPT	GENERAL	10,000
BRIGHT FUTURES FUNDPO BOX 419037 KANSAS CITY, MO 64141	NONE	EXEMPT	GENERAL	7,500
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CATHOLIC CHARITIES OF KANSAS CITY 301 E ARMOUR BLVD SUITE 620 KANSAS CITY, MO 64111	NONE	EXEMPT	GENERAL	10,000
CATHOLIC CHARITIES OF NORTHEAST KANSAS 9720 W 87TH STREET OVERLAND PARK, KS 66212	NONE	EXEMPT	GENERAL	25,000
CATHOLIC RELIEF SERVICES PO BOX 17152 BALTIMORE, MD 21298	NONE	EXEMPT	GENERAL	10,000
<b>Total . . . . .</b>				<b>528,000</b>

▶ **3a**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
COMPASSION PREGNANCY CENTERS 37540 GRATIOT STE 100 CLINTON TOWNSHIP, MI 48036	NONE	EXEMPT	GENERAL	10,000
CRISIS PREGNANCY CENTERS PO BOX 908 250 S MAIN FLORENCE, AZ 85232	NONE	EXEMPT	GENERAL	15,000
CRISTO REY KANSAS CITY 211 LINWOOD BLVD KANSAS CITY, MO 64111	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000



**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DIOCESE OF PHOENIX PO BOX 13600 PHOENIX, AZ 85002	NONE	EXEMPT	GENERAL	3,000
FIRST WAY PREGNANCY CENTER 3501 N 16TH ST PHOENIX, AZ 85016	NONE	EXEMPT	GENERAL	15,000
FLORENCE CRITTENTON SERVICES PO BOX 36392 CHARLOTTE, NC 28236	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . .</b>				<b>528,000</b>

▶ **3a**

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOOTHILLS FOOD BANK PO BOX 715 CAREFREE, AZ 85377	NONE	EXEMPT	GENERAL	2,500
HARVESTERS 3801 TOPPING AVENUE KANSAS CITY, MO 64129	NONE	EXEMPT	GENERAL	7,500
HEARTBEAT OF TOLEDO 2130 MADISON AVENUE TOLEDO, OH 43624	NONE	EXEMPT	GENERAL	20,000
<b>Total . . . . . ▶ 3a</b>				528,000

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOLY NAME CATHOLIC SCHOOL 1007 SOUTHWEST BLVD KANSAS CITY, KS 66103	NONE	EXEMPT	GENERAL	5,000
HOPE HOUSEPO BOX 577 LEE S SUMMIT, MO 64063	NONE	EXEMPT	GENERAL	15,000
KANSANS FOR LIFE2501 E CENTRAL WICHITA, KS 67214	NONE	EXEMPT	GENERAL	10,000
<b>Total . . . . . ▶ 3a</b>				528,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LIFE CHOICES WOMEN'S CLINIC 9303 N 7TH STREET SUITE 4 PHOENIX, AZ 85020	NONE	EXEMPT	GENERAL	5,000
MAGGIE'S PLACEPO BOX 1102 PHOENIX, AZ 85001	NONE	EXEMPT	GENERAL	15,000
MARY'S CHOICE PREGNANCY CENTER CO CATHOLIC ARCHDIOCESE 12615 PARALLEL DRIVE KANSAS CITY, KS 66109	NONE	EXEMPT	GENERAL	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MIRA VIA3737 WEONA AVENUE CHARLOTTE, NC 28209	NONE	EXEMPT	GENERAL	10,000
MOM'S HOUSE2505 FRANKLIN AVENUE TOLEDO, OH 43610	NONE	EXEMPT	GENERAL	15,000
MOTHER'S REFUGE 14400 E 42ND SOUTH SUITE 220 INDEPENDENCE, MO 64055	NONE	EXEMPT	GENERAL	15,000
<b>Total . . . . . ▶ 3a</b>				528,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NOTRE DAME ACADEMY 731 GRACE HALL NOTRE DAME, IN 46556	NONE	EXEMPT	GENERAL	15,000
PREGNANCY CARE CENTER 2420 7TH STREET COLUMBUS, IN 47201	NONE	EXEMPT	GENERAL	10,000
PREGNANCY CENTER OF GREATER TOLEDO 716 N WESTWOOD AVENUE TOLEDO, OH 46307	NONE	EXEMPT	GENERAL	12,500
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PREGNANCY RESOURCE CENTER OF SANTA CRUZ 1570 SOQUEL DRIVE SANTA CRUZ, CA 95065	NONE	EXEMPT	GENERAL	7,500
ROSE BROOKS CENTERPO BOX 320599 KANSAS CITY, MO 64132	NONE	EXEMPT	GENERAL	5,000
SAFEHOMEPO BOX 4563 OVERLAND PARK, KS 66204	NONE	EXEMPT	GENERAL	15,000
<b>Total . . . . .</b>				<b>528,000</b>

▶ **3a**

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOJOURNER CENTER PO BOX 20156 PHOENIX, AZ 85036	NONE	EXEMPT	GENERAL	10,000
THE SISTERS SERVANTS OF MARY 800 N 18TH STREET KANSAS CITY, KS 66102	NONE	EXEMPT	GENERAL	5,000
UNIVERSITY OF TOLEDO FOUNDATION 2801 W BANCROFT STREET MS319 TOLEDO, OH 436063395	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . .</b>				<b>528,000</b>

▶ 3a



**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WYANDOTTE PREGNANCY CLINIC 3021 N 54TH STREET KANSAS CITY, KS 66104	NONE	EXEMPT	GENERAL	55,000
HISTORIC SOUTH INITIATIVE PO BOX 1008 TOLEDO, OH 43697	NONE	EXEMPT	GENERAL	25,000
LIFE CARE PREGNANCY CENTER 261 NIAGARA CARTHAGE RD CARTHAGE, NC 28327	NONE	EXEMPT	GENERAL	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				528,000

**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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SECOND HARVEST FOOD BANK 6621 N OLD SR 3 MUNCIE, IN 47303	NONE	EXEMPT	GENERAL	2,500
SOUTHWEST AUTISM RESEARCH AND RESOURCE CENTER 300 N 18TH STREET PHOENIX, AZ 85006	NONE	EXEMPT	GENERAL	5,000
<b>Total . . . . . ▶ 3a</b>				528,000

**TY 2018 Accounting Fees Schedule****Name:** CHARLES A SULLIVAN FOUNDATION

C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	7,725	7,725		0

**TY 2018 Investments Corporate Bonds Schedule****Name:** CHARLES A SULLIVAN FOUNDATION

C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BONDS	1,246,620	1,190,772

**TY 2018 Investments Corporate Stock Schedule**

**Name:** CHARLES A SULLIVAN FOUNDATION  
C/O BANK OF BLUE VALLEY CO-TRUSTEE  
**EIN:** 48-1196696

**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CORPORATE STOCK	4,275,644	8,872,763

**TY 2018 Investments - Other Schedule****Name:** CHARLES A SULLIVAN FOUNDATION

C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
INVESTMENT IN OAKTREE CAPITAL GROUP	AT COST	32,218	27,825

**TY 2018 Other Decreases Schedule**

**Name:** CHARLES A SULLIVAN FOUNDATION  
C/O BANK OF BLUE VALLEY CO-TRUSTEE  
**EIN:** 48-1196696

<b>Description</b>	<b>Amount</b>
NON DEDUCTIBLE EXPENSES	18,222

**TY 2018 Other Expenses Schedule**

**Name:** CHARLES A SULLIVAN FOUNDATION  
C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER EXPENSES	808	0		808



**TY 2018 Other Income Schedule****Name:** CHARLES A SULLIVAN FOUNDATION

C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BANK OF BLUE VALLEY - NONDIVIDEND DISTRIBUTION	334	334	334
BANK OF BLUE VALLEY - UNRECAP SEC 1250 GAIN	123	123	123
FERRELLGAS PARTNERS, LP	6,668	0	6,668
OAKTREE CAPITAL GROUP	112	0	112

**TY 2018 Other Professional Fees Schedule**

**Name:** CHARLES A SULLIVAN FOUNDATION  
C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	87,510	87,510		0

**TY 2018 Taxes Schedule**

**Name:** CHARLES A SULLIVAN FOUNDATION  
C/O BANK OF BLUE VALLEY CO-TRUSTEE

**EIN:** 48-1196696

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BANK OF BLUE RIVER TAXES - FOREIGN	4,933	4,933		4,933
OAKTREE CAPITAL GROUP - FOREIGN	2	2		2