# As Amended

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury

Open to Public

|                           | 4                   | miormation about Form 950 and its instructions is at w  | W W .113 | goviloinisso. V · ·          | mapection                       |  |  |  |
|---------------------------|---------------------|---|----------|------------------------------|---------------------------------|--|--|--|
| A F                       | or the              | e 2016 calendar year, or tax year beginning and endin   | ng       |                              |                                 |  |  |  |
| B C                       | heck if pplicabl    | INTERNATIONAL MILLING EDUCATION   |          | D Employer identific         | ation number                    |  |  |  |
| 느                         | chang<br>Name       | FOUNDATION  |          | 00.0                         | 411204                          |  |  |  |
| 느                         | _chang              | Doing business as   |          | 20-0411324                   |                                 |  |  |  |
| <u>_</u>                  | return<br>Final     | Number and street (or P.O. box if mail is not delivered to street address)  Room,                     |          | E Telephone number           |                                 |  |  |  |
| L_                        | اretum.<br>termin   | . ———————————   |          |                              | 338-3377<br>156,181.            |  |  |  |
| _                         | ated<br>Amen        | City or town, state or province, country, and ZIP or foreign postal code                              | İ        | G Gross receipts \$          |                                 |  |  |  |
| 늗                         | _Jreturn<br>∏Applic |   |          | H(a) Is this a group re      |                                 |  |  |  |
| Щ.                        | _tton<br>pendir     | SAME AS C ABOVE   | }        | for subordinates'            |                                 |  |  |  |
| . T                       |                     | empt status   | 527      | H(b) Are all subordinates in | cluded? Yes No                  |  |  |  |
| 1 1                       | Vehei               | te: N/A   | - 321    | H(c) Group exemption         | •                               |  |  |  |
| K F                       | orm of              |   | Year o   |                              | State of legal domicile: KS     |  |  |  |
|                           | rt I                | Summary   | . 1001 0 | or formation. 2000 [14       | Ciate of logar doff ficile, 210 |  |  |  |
|                           |                     |   | AND      | ASSIST IN                    | THE                             |  |  |  |
| Activities & Governance   |                     | EDUCATION OF MILLING ACTIVITIES   |          | ·                            | <del></del>                     |  |  |  |
| E                         |                     | Check this box I if the organization discontinued its operations or disposed of                       | fmore    | than 25% of its net as       | sets                            |  |  |  |
| Š                         |                     | Number of voting members of the governing body (Part VI, line 1a)                                     |          | 3                            | 14                              |  |  |  |
| ğ                         |                     | Number of independent voting members of the governing body (Part VI, line 1b)                         |          | 4                            | 13                              |  |  |  |
| 88                        |                     | Total number of individuals employed in calendar year 2016 (Part V, line 2a)                          |          | 5                            | 0                               |  |  |  |
| ξį                        |                     | Total number of volunteers (estimate if necessary)  | _        | 6                            | 35                              |  |  |  |
| ŧ                         |                     | Total unrelated business revenue from Part VIII, column (©) line(12F1)/F[)                            |          | 7a                           | 0.                              |  |  |  |
| ۷                         |                     | Net unrelated business taxable income from Form 990-T, line 34  |          | 7b                           | 0.                              |  |  |  |
| တ                         |                     |   |          | Prior Year                   | Current Year                    |  |  |  |
| 5                         | 8                   | Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)           |          | 78,892.                      | 95,935.                         |  |  |  |
| , E                       | 9                   | Program service revenue (Part VIII, line 2g)  |          | 0.                           | 0.                              |  |  |  |
| Revenue) 18               | 10                  | Investment income (Part VIII, column (A), lines 3, 4, and 70)   |          | 16,890.                      | 23,365.                         |  |  |  |
|                           | 11                  | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 18c, and 15e, 19.                          |          | <14,162.                     |                                 |  |  |  |
| ב                         |                     | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                    |          | 81,620.                      | 117,923.                        |  |  |  |
| !_                        | 13                  | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                                      |          | 2,500.                       | 2,500.                          |  |  |  |
| ©Éxpenses⊏U               | 14                  | Benefits paid to or for members (Part IX, column (A), line 4)   |          | 0.                           | 0.                              |  |  |  |
| Š                         | 15                  | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                     |          | 0.                           | 0.                              |  |  |  |
| Su                        | 16a                 | Professional fundraising fees (Part IX, column (A), line 11e)   |          | 0.                           | 0.                              |  |  |  |
| χġ                        | b                   | Total fundraising expenses (Part IX, column (D), line 25)   | . [      |                              |                                 |  |  |  |
|                           | 17                  | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)  | L        | 42,055.                      | 62,214.                         |  |  |  |
| _                         | 18                  | Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)                              |          | 44,555.                      | 64,714.                         |  |  |  |
|                           | 19                  | Revenue less expenses Subtract line 18 from line 12   |          | 37,065.                      | 53,209.                         |  |  |  |
| s or                      |                     |   | Beg      | ginning of Current Year      | End of Year                     |  |  |  |
| Net Assets<br>Fund Baland | 20                  | Total assets (Part X, line 16)  | ļ        | 816,592.                     | 914,938.                        |  |  |  |
| ige<br>Inge               | 21                  | Total liabilities (Part X, line 26)   |          | 0.                           | 3,415.                          |  |  |  |
|                           |                     | Net assets or fund balances Subtract line 21 from line 20   |          | 816,592.                     | 911,523.                        |  |  |  |
|                           | rt II               | Signature Block   |          | <del></del>                  |                                 |  |  |  |
|                           |                     | allies of perjury, I declare that I have examined this return, including accompanying schedules and   |          |                              | knowledge and belief, it is     |  |  |  |
| true,                     | correc              | ct, and complete Declaration of preparer (other than officer) is based on all information of which pr | eparer   | has any knowledge.           |                                 |  |  |  |
|                           |                     | Malue   |          | Kenu                         | my 2 20 1 8                     |  |  |  |
| Sigi                      | n                   | Signature st officer  |          | Date                         |                                 |  |  |  |
| Her                       | _                   | MELINDA FARRIS. SECRETARY   |          |                              |                                 |  |  |  |

Type or print name and title Print/Type preparer's name Preparer's signa Paid JENNIFER A. ALLEN JENNIFER Firm's name ALLEN, GIBBS & HOULIK, I Preparer Firm's address 301 N. MAIN, **SUITE 1700** Use Only

May the IRS discuss this return with the preparer shown above? (see instru-LHA For Paperwork Reduction Act Notice, see the sep

WICHITA, KS 67202-4868

# As Amended

# INTERNATIONAL MILLING EDUCATION FOUNDATION

| Pai       | t III Statement of Program Service Accomplishments   |
|-----------|--|
|           | Check if Schedule O contains a response or note to any line in this Part III   |
| 1         | Briefly describe the organization's mission  |
|           | THE FOUNDATION'S MISSION IS TO STRENGTHEN THE GRAIN MILLING INDUSTRY   |
|           | THROUGH EDUCATIONAL PROGRAMS, PROFESSIONAL DEVELOPMENT EFFORTS AND RESEARCH PROJECTS.  |
|           | RESEARCH PROJECTS.   |
|           | Did the organization undertake any significant program services during the year which were not listed on the                                 |
| 2         | prior Form 990 or 990-EZ?  |
|           | If "Yes," describe these new services on Schedule O  |
| 3         | No. 1  |
| 3         | If "Yes," describe these changes on Schedule O   |
| 4         | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses          |
| •         | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
|           | revenue, if any, for each program service reported   |
| 4a        | CA 71A 2 FAA   |
|           | COLLECTION OF CONTRIBUTIONS TO AID AND ASSIST IN THE EDUCATION OF  |
|           | MILLING ACTIVITIES.  |
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|           | <del></del>  |
| 4b        | (Code) (Expenses \$  |
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| 4c        | (Code         ) (Expenses \$ including grants of \$) (Revenue \$)  |
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| 4d        | Other program services (Describe in Schedule O)  |
|           | (Expenses \$ including grants of \$ ) (Revenue \$  |
| <u>4e</u> | Total program service expenses ► 64,714.   |
|           | Form <b>990</b> (2016)   |

FOUNDATION Form 990 (2016) FOUNDATION
Part IV Checklist of Required Schedules 20-0411324 Page 3

| •   |  |     | Yes | No  |
|-----|--|-----|-----|-----|
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  |     |     |     |
|     | If "Yes," complete Schedule A  | 1_  | X   |     |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors?   | 2   | X   |     |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I                                 | 3   |     | X   |
| 4   | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II                         | 4   |     | х   |
| 5   | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or   |     |     |     |
|     | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III   | 5   |     | X   |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to  |     |     |     |
|     | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I   | 6   |     | X   |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space,  |     |     |     |
|     | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.  | 7   |     | X   |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  | 8   |     | х   |
| 9   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for  |     |     |     |
|     | amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?  |     |     |     |
|     | If "Yes," complete Schedule D, Part IV   | 9   |     | X   |
| 10  | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent  |     |     |     |
|     | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V   | 10  |     | X   |
| 11  | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X  |     |     |     |
|     | as applicable  | _   |     |     |
| а   | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  | 11a |     | х   |
| b   | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total  |     |     |     |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b |     | Х   |
| С   | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total   |     |     |     |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   | 11c |     | X   |
| d   | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX                                 | 11d |     | х   |
| e   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  | 11e |     | X   |
| f   | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses  |     |     |     |
|     | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X   | 11f |     | Х   |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete  |     |     |     |
|     | Schedule D, Parts XI and XII   | 12a |     | X   |
| b   | Was the organization included in consolidated, independent audited financial statements for the tax year?  |     |     | 3,7 |
|     | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  | 12b |     | X   |
| 13  | is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  |     | -   |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | 14a | -   | X   |
| b   | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000   |     |     |     |
|     | or more? If "Yes," complete Schedule F, Parts I and IV   | 14b |     | х   |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any  | 140 |     |     |
|     | foreign organization? If "Yes," complete Schedule F, Parts II and IV   | 15  |     | Х   |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to   |     |     |     |
|     | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  | 16  |     | Х   |
| 17  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,  |     |     |     |
|     | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I   | 17  |     | X   |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines   |     |     |     |
|     | 1c and 8a? If "Yes," complete Schedule G, Part II  | 18  | X_  |     |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"   |     |     |     |
|     | complete Schedule G. Part III  | 19  | 1   | Х   |

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Part IV Checklist of Required Schedules (continued)

| •          |  |       | Yes          | No             |
|------------|--|-------|--------------|----------------|
| 20a        | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  | 20a   |              | X              |
| b          | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?   | 20b   |              |                |
| 21         | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or  |       |              |                |
|            | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21    |              | Х              |
| 22         | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on  |       |              |                |
|            | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22    |              | X              |
| 23         | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current   |       |              |                |
|            | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete   | i     |              |                |
|            | Schedule J   | _23   |              | X              |
| 24a        | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the  | ]     |              |                |
|            | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete   |       |              |                |
|            | Schedule K If "No", go to line 25a   | 24a   | l            | X              |
| b          | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | . 24b |              |                |
| С          | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease   | - }   |              | ļ              |
|            | any tax-exempt bonds?  | 24c   |              | L              |
| d          | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d   |              |                |
| 25a        | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit   | Ì     |              | Ì              |
|            | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a   |              | X              |
| b          | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and   | - {   |              | 1              |
|            | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete  |       |              |                |
|            | Schedule L, Part I   | . 25b |              | X              |
| 26         | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or  | ĺ     |              |                |
|            | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"   | -     |              |                |
|            | complete Schedule L, Part II   | 26    |              | X              |
| 27         | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial   |       |              |                |
|            | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member  | ł     |              | }              |
|            | of any of these persons? If "Yes," complete Schedule L, Part III   | 27    |              | X              |
| 28         | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV  | -     |              | l ,            |
|            | instructions for applicable filing thresholds, conditions, and exceptions)   |       | -            | ;              |
| а          | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28a   |              | X              |
|            | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28b   |              | X              |
| C          | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,  |       |              |                |
|            | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV   | 28c   | <u> </u>     | X              |
| 29         | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | _29_  |              | Х              |
| 30         | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation  |       |              | .,             |
|            | contributions? If "Yes," complete Schedule M   | 30_   | <u> </u>     | X              |
| 31         | Did the organization liquidate, terminate, or dissolve and cease operations?   |       |              | ٠,             |
| 00         | If "Yes," complete Schedule N, Part I  | 31    | <b> </b> -   | X              |
| 32         | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II   |       |              | х              |
| 22         | •  | 32    |              | <u> </u>       |
| 33         | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |       |              | Х              |
| 24         | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | 33    |              | <u> </u>       |
| 34         | Part V, line 1   |       | х            |                |
| 252        | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 34    |              | X              |
|            | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity  | 35a   | ļ            | <del>  ^</del> |
| U          | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  | 354   |              |                |
| 36         | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?   | 35b   | <del> </del> | <del> </del>   |
| JU         | If "Yes," complete Schedule R, Part V, line 2  | 20    | !            | х              |
| 37         | Did the organization conduct more than 5% of its activities through an entity that is not a related organization   | 36    | <del> </del> | <del>  ^</del> |
| <b>3</b> , | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | 37    |              | х              |
| 38         | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?   | 3'    | <del> </del> | <del> </del>   |
| ~          | Note. All Form 990 filers are required to complete Schedule O  | . 38  | х            | 1              |
|            | reservant entress mere and required to complete confedence of  |       | <del></del>  | Ь——            |

# INTERNATIONAL MILLING EDUCATION Form 990 (2016) FOUNDATION Part V Statements Regarding Other IRS Filings and Tax Compliance

FOUNDATION

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| the Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  b. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return  b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?  b. If "Yes," the line a form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b. If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5a. Was the organization a party to a prohibited tax shelter transaction?  c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5b. Did any taxable party notify the organization file Form 8886-T?  5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7. Organizations that may receive deductible contributions under section 170(c). | Yes    |              |
|--|--------|--------------|
| the Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable  b. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  c. Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a. Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return  b. If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a. Did the organization have unrelated business gross income of \$1,000 or more during the year?  b. If "Yes," the line a form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O  4a. At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b. If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5a. Was the organization a party to a prohibited tax shelter transaction?  c. If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  5b. Did any taxable party notify the organization file Form 8886-T?  5c. Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  b. If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7. Organizations that may receive deductible contributions under section 170(c). |        | No           |
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| were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  |        | <u>X</u>     |
| 7 Organizations that may receive deductible contributions under section 170(c).  | 1      |              |
|  |        |              |
|  |        |              |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a   |        | X            |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided?  |        |              |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required  | ]      | Х            |
| to file Form 8282?   |        | <del></del>  |
| d If "Yes," indicate the number of Forms 8282 filed during the year  |        | '            |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  76  77  |        |              |
|  |        |              |
| by If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  7g   7g   7g   7g   7g   7g   7g   7g   |        |              |
| 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the   |        |              |
| sponsoring organization have excess business holdings at any time during the year?   |        |              |
| 9 Sponsoring organizations maintaining donor advised funds.  | $\neg$ |              |
| a Did the sponsoring organization make any taxable distributions under section 4966?   |        |              |
| b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  9b  |        |              |
| 10 Section 501(c)(7) organizations. Enter  |        |              |
| a Initiation fees and capital contributions included on Part VIII, line 12   |        |              |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  | )      | ,            |
| 11 Section 501(c)(12) organizations. Enter   | )      |              |
| a Gross income from members or shareholders 11a  | ,<br>R |              |
| b Gross income from other sources (Do not net amounts due or paid to other sources against   |        |              |
| amounts due or received from them )  | . 1    |              |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   |        |              |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b  |        | ĺ            |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers.  |        |              |
| a is the organization licensed to issue qualified health plans in more than one state?   |        |              |
| Note. See the instructions for additional information the organization must report on Schedule O   |        | ĺ            |
| b Enter the amount of reserves the organization is required to maintain by the states in which the   |        |              |
| organization is licensed to issue qualified health plans   |        | l            |
| c Enter the amount of reserves on hand   |        | <del>-</del> |
| 14a Did the organization receive any payments for indoor tanning services during the tax year?   |        | X            |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0  |        | i            |

FOUNDATION Form 990 (2016) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 14 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 13 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7ь Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Another's website ✓ Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

State the name, address, and telephone number of the person who possesses the organization's books and records > 913-338-3377 MELINDA FARRIS -

96TH TERRACE, SUITE 100, LENEXA 12351 W.

Form 990 (2016)

statements available to the public during the tax year

FOUNDATION

Form 990 (2016)

20-0411324 F

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Check if Schedule O contains a response or note to any line in this Part VII |  |
|--|--|
|  |  |

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

」 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

| <b>(A)</b><br>Name and Title   | (B)<br>Average<br>hours per  | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              | th an    | ( <b>D)</b> Reportable compensation            | (E)<br>Reportable<br>compensation                | (F)<br>Estimated<br>amount of                                      |
|--|--|--|-----------------------|---------|--------------|------------------------------|----------|--|--|--|
|  | week<br>(list any<br>hours for<br>related<br>organizations<br>below<br>line) | stee or director   | Institutional trustee | Officer | Key employee | Highest compensated employee | Ī        | from<br>the<br>organization<br>(W-2/1099-MISC) | from related<br>organizations<br>(W-2/1099-MISC) | other compensation from the organization and related organizations |
| (1) BRAD ALLEN   | 1.00   | х  |                       | Х       |              |                              |          | 0.   | 0.   | 0  |
| CHAIRPERSON (A) TANK OF THE CONTROL OF T | 1.00   | ^  |                       | Δ       |              | ├                            | ├        | 0.   | U •  | 0.   |
| (2) IAN SLIMMON<br>TRUSTEE   | 1.00   | x  |                       |         |              |                              |          | 0.   | 0.   | 0.   |
| (3) MELINDA FARRIS   | 1.00   | -  |                       |         |              | -                            | ├─       | •  | <u> </u>   | <u>.</u>   |
| SECRETARY/TREASURER  | 40.00  | х  |                       | х       |              | 1                            |          | 0.   | 103,809.   | 15,731.  |
| (4) NELSON SELMER  | 1.00   | <del>                                     </del>   |                       |         |              | ╁                            | <u> </u> |  | 203,003.   | 137,310  |
| TRUSTEE  |  | $\mathbf{x}$   |                       |         | İ            |                              |          | 0.   | ٥.   | 0.   |
| (5) SCOTT EBBERT   | 1.00   |  |                       |         |              | 一                            | ┢        |  |  |  |
| TRUSTEE  |  | x  |                       |         |              |                              |          | 0.   | 0.   | 0.   |
| (6) GREG BALL  | 1.00   |  |                       |         |              | <b>†</b>                     | <u> </u> |  |  |  |
| TRUSTEE  |  | X  |                       |         |              |                              | ļ        | 0.   | 0.   | 0.   |
| (7) DARIN ELLIOTT  | 1.00   |  |                       |         |              |                              |          |  |  |  |
| TRUSTEE  |  | X  |                       |         |              |                              |          | 0.   | 0.   | 0.   |
| (8) JOHN MINER   | 1.00   |  |                       |         |              |                              |          |  |  |  |
| TRUSTEE  |  | X  |                       |         | L            | L                            | L        | 0.   | 0.   | 0.   |
| (9) ROY LOEPP  | 1.00   |  |                       |         |              |                              |          |  | _  | _  |
| PAST PRESIDENT   |  | Х  |                       | X       | L            | _                            | ╙        | 0.   | 0.   | 0.   |
| (10) STEPHEN DOYLE   | 1.00   |  |                       |         |              |                              |          |  |  |  |
| VICE CHAIRPERSON   | 4  | Х  | ļ                     | X       | ļ            | ļ                            | ļ        | 0.   | 0.   | 0.   |
| (11) STEPHEN BANKS   | 1.00   |  |                       |         |              |                              |          |  | _  | _  |
| TRUSTEE  | 1 00   | Х  |                       |         | <u> </u>     | -                            | -        | 0.   | 0.   | 0.   |
| (12) STEVE CURRAN  | 1.00   | x  |                       |         |              |                              |          | 0.   | 0.   | 0.   |
| TRUSTEE (13) JEFFREY HOLE  | 1.00   | ^  |                       | _       |              | ├                            | -        | 0.   | U •  | <u> </u>   |
| TREASURER  | 1.00   | х  |                       | х       |              |                              |          | 0.   | ٥.   | 0.   |
| (14) DREW STEWART  | 1.00   | _  | ┝                     | ₽       | $\vdash$     | $\vdash$                     | ₩        | - 0.   | <u> </u>   |  |
| TRUSTEE  | 1.00   | x  |                       |         | İ            |                              |          | 0.   | ٥.   | 0.   |
| 1100120  |  |  |                       |         |              |                              |          |  |  | •  |
|  |  | $\vdash$   | _                     |         | ┢            | <del> </del>                 |          |  |  |  |
|  |  | $\vdash$   | -                     | _       |              |                              | $\vdash$ |  |  | <u>-</u> .   |
|  |  |  |                       | ŀ       |              | 1                            | 1        |  |  |  |

| Form 990 (2016)        | FOUNDATI  | <u> </u>   |                                |                       |         |                |                              |                                  |  | 20-0                          | <u>4113</u>        | <u> 324</u> | Pa                        | age 8          |
|------------------------|---|--|--------------------------------|-----------------------|---------|----------------|------------------------------|----------------------------------|--|-------------------------------|--------------------|-------------|---------------------------|----------------|
| Part VII Section A. (  | Officers, Directors, Trus   | stees, Key Em  | ploy                           | ees.                  | , an    | d Hi           | ighe                         | st C                             | ompensated Employe                       | es (continued)                |                    |             |                           |                |
| Name a                 | (B)<br>Average<br>hours per<br>week   | box  | not c<br>, unle<br>cer an      | Pos<br>heck<br>sa pe  | rson    | than<br>is bot | h an                         | (D) Reportable compensation from | (E) Reportable compensation from related | on                            | (F) Estimat amount |             |                           |                |
| ·                      |   | (list any<br>hours for<br>related<br>organizations<br>below<br>line) | Individual trustee or director | institutional trustee | Officer | Key employee   | Highest compensated employee | Former                           | the<br>organization<br>(W-2/1099-MISC)   | organization<br>(W-2/1099-MIS | าร                 | orga        | m the<br>rizati<br>relate | e<br>Ion<br>ed |
|                        |   |  |                                |                       |         |                | _                            |                                  |  |                               |                    |             | _                         |                |
|                        |   |  |                                |                       |         |                |                              |                                  |  |                               |                    |             |                           |                |
|                        |   |  | _                              |                       |         |                |                              |                                  |  |                               |                    |             |                           |                |
|                        |   |  | _                              |                       |         |                | [<br>                        | _                                |  |                               |                    |             |                           |                |
|                        |   |  |                                |                       |         |                |                              |                                  |  |                               |                    |             |                           |                |
|                        |   |  |                                |                       |         | -              |                              |                                  |  |                               | -                  |             |                           |                |
| 1b Sub-total           | uation sheets to Part V   | II, Section A  | <u>L</u> .                     | <u> </u>              |         | <u> </u>       | <u>L,</u> _                  | <u> </u>                         | 0.                                       | 103,8                         | 09.                |             | 5,7                       | 0.             |
|                        | b and 1c) dividuals (including but in the organization                          | not limited to th  | nose                           | liste                 | ed a    | bov            | e) w                         | ho r                             | 0 • eceived more than \$100              | 103,8<br>0,000 of reportab    |                    | 15          | 5,7                       | 31.            |
| 3 Did the organization | on list any <b>forme</b> r officer  |  |                                | e, ke                 | ey ei   | mplo           | oyee                         | , or                             | highest compensated e                    | employee on                   |                    |             | Yes                       | No             |
| 4 For any individual   | complete Schedule J for a listed on line 1a, is the sizations greater than \$15 | um of reportab   | le c                           |                       |         |                |                              |                                  |  | the organization              | · · · [            | 3           |                           | x<br>x         |
| • •                    | ted on line 1a receive or<br>ganization? If "Yes," cor<br>nt Contractors        | -  |                                |                       |         | -              | -                            | relat                            | ted organization or indiv                | vidual for services           | s [                | 5           |                           | X              |
| 1 Complete this tab    | le for your five highest co<br>Report compensation for                          | •  |                                |                       |         |                |                              |                                  |  |                               | npensa             |             |                           |                |
| <del></del>            | (A)<br>Name and busines   | s address  | N                              | ON                    | E       |                | _                            | _                                | (B) Description of                       | services                      | Co                 | (Comper     |                           | <u>a</u>       |
|                        |   |  |                                |                       | _       |                | <u> </u>                     | -                                |  |                               |                    |             |                           |                |
|                        |   |  |                                |                       |         |                |                              |                                  |  |                               |                    |             |                           |                |
|                        |   |  |                                |                       | _       | _              |                              | _                                |  | <del></del>                   | -                  | _           |                           |                |
|                        | ndependent contractors<br>pensation from the organ                              | -  | not I                          | ımıte                 | ed to   | tho            | ose li                       | sted                             | d above) who received i                  | more than                     |                    |             |                           |                |
| Ψ100,000 01 0011β      | rondation from the bigar  | ii.auoii   |                                |                       | _       |                | <u> </u>                     |                                  |  | <del></del>                   |                    |             | 200 /                     |                |

632008 11-11-16

FOUNDATION

20-0411324

Form 990 (2016) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (C) Unrelated Total revenue Related or exempt function business revenue revenue 1 a Federated campaigns 1b b Membership dues 43,837. c Fundraising events d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 52,098. similar amounts not included above Q Noncash contributions included in lines 1a-1f \$ 95,935 h Total. Add lines 1a-1f Business Code Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 18,576 18,576. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 41,670. assets other than inventory b Less cost or other basis 36,881. and sales expenses 4,789. c Gain or (loss) 4,789. 4,789. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 43,837. of including \$ contributions reported on line 1c) See Part IV, line 18 1,377. **b** Less direct expenses <1,377. <1,377.> c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d

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21,988. Form **990** (2016)

117,923.

Total revenue. See instructions.

Ō.

FOUNDATION

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Part IX Statement of Functional Expenses

| OCCU | Check if Schedule O contains a respons   |                |                          | imprete column (ry              | X                              |
|------|--|----------------|--------------------------|---------------------------------|--------------------------------|
| Do r | not include amounts reported on lines 6b,  | (A)            | (B)                      | (C)                             | (D)                            |
|      | Bb, 9b, and 10b of Part VIII.  | Total expenses | Program service expenses | Management and general expenses | (D)<br>Fundraising<br>expenses |
| 1    | Grants and other assistance to domestic organizations  | <del></del>    | expenses                 | general expenses                | expenses                       |
| •    | and domestic governments. See Part IV, line 21   |                |                          |                                 |                                |
| 2    | Grants and other assistance to domestic  |                |                          |                                 |                                |
| 2    | Individuals See Part IV, line 22   | 2,500.         | 2,500.                   |                                 |                                |
| 3    | Grants and other assistance to foreign   | 2,3000         | 2,000                    |                                 |                                |
| 3    | organizations, foreign governments, and foreign  |                |                          | }                               | 1                              |
|      | individuals See Part IV, lines 15 and 16   |                | ľ                        |                                 |                                |
| 4    | Benefits paid to or for members  |                |                          | -                               |                                |
| 5    | Compensation of current officers, directors,   |                |                          |                                 |                                |
| 3    | trustees, and key employees  |                |                          | j                               |                                |
| 6    | Compensation not included above, to disqualified   |                |                          |                                 |                                |
| Ū    | persons (as defined under section 4958(f)(1)) and  |                |                          |                                 |                                |
|      | persons described in section 4958(c)(3)(B)   |                |                          |                                 |                                |
| 7    | Other salaries and wages   | <del></del>    |                          |                                 |                                |
| 8    | Pension plan accruals and contributions (include   |                |                          |                                 |                                |
| Ū    | section 401(k) and 403(b) employer contributions)  | İ              |                          | 1                               |                                |
| 9    | Other employee benefits  |                |                          |                                 |                                |
| 10   | Payroll taxes  |                |                          |                                 | <del></del>                    |
| 11   | Fees for services (non-employees)  | <del>_</del>   |                          |                                 |                                |
| a    | Management   |                |                          |                                 |                                |
|      | Legal  |                |                          |                                 | <del></del>                    |
|      | Accounting   |                |                          |                                 | <del></del>                    |
| d    | Lobbying   |                |                          |                                 |                                |
| e    | Professional fundraising services. See Part IV, line 17  |                |                          |                                 |                                |
| f    | Investment management fees   |                |                          |                                 |                                |
| g    | Other (If line 11g amount exceeds 10% of line 25,  |                |                          |                                 |                                |
| ·    | column (A) amount, list line 11g expenses on Sch O.)   | 54,706.        | 54,706.                  |                                 |                                |
| 12   | Advertising and promotion  | 868.           | 868.                     |                                 |                                |
| 13   | Office expenses  |                |                          |                                 |                                |
| 14   | Information technology   |                |                          |                                 |                                |
| 15   | Royalties  |                |                          |                                 |                                |
| 16   | Occupancy  |                |                          |                                 |                                |
| 17   | Travel   |                |                          |                                 |                                |
| 18   | Payments of travel or entertainment expenses   | ,              |                          |                                 |                                |
|      | for any federal, state, or local public officials  |                |                          |                                 |                                |
| 19   | Conferences, conventions, and meetings   |                |                          |                                 |                                |
| 20   | Interest   |                |                          |                                 |                                |
| 21   | Payments to affiliates   |                |                          |                                 |                                |
| 22   | Depreciation, depletion, and amortization  |                |                          |                                 |                                |
| 23   | Insurance  |                |                          |                                 |                                |
| 24   | Other expenses. Itemize expenses not covered   |                |                          |                                 |                                |
|      | above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) |                |                          |                                 |                                |
|      | amount, list line 24e expenses on Schedule 0.)   |                |                          |                                 | <del></del>                    |
| а    | BANK SERVICE CHARGES   | 4,869.         | 4,869.                   |                                 |                                |
| b    | MISCELLANEOUS EXPENSES   | 1,771.         | 1,771.                   |                                 |                                |
| С    |  |                |                          |                                 | _ <del></del>                  |
| d    |  |                |                          |                                 |                                |
| е    | All other expenses   | - CA 771A      | CA 714                   |                                 |                                |
| 25   | Total functional expenses Add lines 1 through 24e  | 64,714.        | 64,714.                  | 0.                              | 0.                             |
| 26   | Joint costs. Complete this line only if the organization   |                |                          |                                 |                                |
|      | reported in column (B) joint costs from a combined   |                |                          |                                 |                                |
|      | educational campaign and fundraising solicitation.   |                |                          |                                 |                                |
| _    | Check here if following SOP 98-2 (ASC 958-720)   |                |                          |                                 |                                |

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20-0411324 Page 11 FOUNDATION Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 9.973 13,001. Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 12,236. Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. 7 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D 10b b Less accumulated depreciation 10c 794,383. 901,937. 11 Investments - publicly traded securities 11 Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 816,592. 914,938. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 17 Grants payable 18 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 0 3,415. 25 Schedule D 3.415 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Assets or Fund Balances 701,592. 796,523. 27 Unrestricted net assets 115,000. 115,000. 28 Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.

> 914,938. Form 990 (2016)

911,523.

31

32

33

816,592.

816,592.

30

31

33

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total net assets or fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Form 990 (2016)

### INTERNATIONAL MILLING EDUCATION

20-0411324 Form 990 (2016) FOUNDATION Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 117,923 Total revenue (must equal Part VIII, column (A), line 12) 64,714. Total expenses (must equal Part IX, column (A), line 25) 2 53,209.Revenue less expenses Subtract line 2 from line 1 3 816,592. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 41,722. Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 0. Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 911,523. 10 column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes Nο Accounting method used to prepare the Form 990 Cash X Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Both consolidated and separate basis X Separate basis Consolidated basis b Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Х Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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