

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2020

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

Form header section containing organization name (COMMUNITY FOUNDATION OF THE OZARKS, INC.), EIN (23-7290968), address (425 EAST TRAFFICWAY STREET, SPRINGFIELD, MO 65806), and principal officer (BRIAN FOGLE).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, governance metrics, and financial data for Prior Year and Current Year.

Part II Signature Block

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.

Signature block section with fields for officer signature (BRIAN FOGLE), preparer name (JOSEPH PAGE), and preparer address (THE WHITLOCK COMPANY).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part 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 MISSION OF COMMUNITY FOUNDATION OF THE OZARKS IS TO ENHANCE THE QUALITY OF LIFE FOR OUR CITIZENS NOW AND FOR FUTURE GENERATIONS BY BUILDING COMMUNITY ENDOWMENTS, MEETING NEEDS THROUGH GRANTMAKING, PROVIDING LEADERSHIP, AND PROMOTING COLLABORATION ON COMMUNITY ISSUES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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 (Code:) (Expenses \$ 19,488,846. including grants of \$ 18,178,180.) (Revenue \$ 18,218,881.) THE FOUNDATION RECEIVES, DISTRIBUTES AND ADMINISTERS FUNDS FOR CHARITABLE AND PUBLIC PURPOSES, PRIMARILY PERMANENT ENDOWED FUNDS FOR THE SPRINGFIELD METROPOLITAN AREA, REGIONAL COMMUNITY FOUNDATIONS AND THE SOUTHERN TIER OF MISSOURI

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 19,488,846.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>	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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a 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?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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 on 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
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 on Schedule O.		
	1a 21		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 21		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	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 on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	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	X	
b	Other officers or key employees of the organization	X	
	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 taxable entity during the year?		X
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

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **BRIAN FOGLE - (417) 864-6199**
425 EAST TRAFFICWAY STREET, SPRINGFIELD, MO 65806

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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRIAN FOGLE PRESIDENT & CEO	49.00 1.00			X			175,830.	0.	32,259.	
(2) LUIS LEON CFO	50.00			X			137,366.	0.	15,102.	
(3) LOUISE KNAUER COO	50.00			X			111,263.	0.	20,776.	
(4) RHONDA CHRISTOPHER CHAIR	1.00 1.00	X		X			0.	0.	0.	
(5) ROBIN MORGAN VICE CHAIR	1.00 1.00	X		X			0.	0.	0.	
(6) LAURIE EDMONDSON SECRETARY	2.00	X		X			0.	0.	0.	
(7) DEAN THOMPSON TREASURER	2.00	X		X			0.	0.	0.	
(8) ABRAM MCGULL II CHAIR EMERITUS	1.00 1.00	X		X			0.	0.	0.	
(9) DEBRA SHANTZ/HART BOARD OF DIRECTORS	1.00 1.00	X					0.	0.	0.	
(10) MEGAN MORRIS STACK BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(11) MOREY MECHLIN EXECUTIVE COMMITTEE	1.00 1.00	X					0.	0.	0.	
(12) JIM HOLT EXECUTIVE COMMITTEE	1.00 1.00	X					0.	0.	0.	
(13) MARVIN SILLIMAN BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(14) JEFF LAYMAN IAB REPRESENTATIVE	1.00 1.00	X					0.	0.	0.	
(15) BRYAN VOWELS BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(16) RICHARD CAVENDER BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(17) KARI CREIGHTON BOARD OF DIRECTORS	2.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHAEL GARRETT BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(19) STAN IRWIN BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(20) EMILY KEMPELL BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(21) RON KRAETTLI BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(22) ANNE HERSCHEND-MCGREGOR BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(23) KRISTI MONTAGUE BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
(24) JEFF SCHRAG BOARD OF DIRECTORS	2.00	X					0.	0.	0.	
1b Subtotal							424,459.	0.	68,137.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							424,459.	0.	68,137.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
FIDUCIENT ADVISORS LLC 500 W MADISON ST, CHICAGO, IL 60661	INVESTMENT MANAGEMENT	209,885.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	3,034,124.				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	33,768,409.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 5,508,886.				
	h Total. Add lines 1a-1f			36,802,533.			
Program Service Revenue	2 a MANAGEMENT FEES	Business Code					
		900099	761,352.	761,352.			
	b OTHER REVENUES	900099	25,199.	25,199.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			786,551.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		4,578,201.		33,675.	4,544,526.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	159,609,046.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	144,608,344.				
	c Gain or (loss)	7c	15,000,702.				
	d Net gain or (loss)			15,000,702.	16,046,991.	-1,046,289.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a SPLIT-INTEREST AGREEMENTS	Business Code					
		900099	-57,268.	-57,268.			
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			-57,268.				
12 Total revenue. See instructions			57,110,719.	16,776,274.	-1,012,614.	4,544,526.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	14,409,874.	14,409,874.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,768,306.	3,768,306.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	418,259.	138,276.	179,726.	100,257.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,288,324.	425,920.	553,593.	308,811.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	65,306.	21,590.	28,062.	15,654.
9 Other employee benefits	312,399.	103,279.	134,238.	74,882.
10 Payroll taxes	111,678.	36,921.	47,988.	26,769.
11 Fees for services (nonemployees):				
a Management	463,733.	153,310.	199,266.	111,157.
b Legal	17,631.	5,829.	7,576.	4,226.
c Accounting	45,677.	15,101.	19,627.	10,949.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	374,125.	123,686.	160,761.	89,678.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	13,688.	4,525.	5,882.	3,281.
12 Advertising and promotion				
13 Office expenses	89,012.	29,428.	38,248.	21,336.
14 Information technology	194,938.	64,446.	83,765.	46,727.
15 Royalties				
16 Occupancy	117,906.	38,980.	50,664.	28,262.
17 Travel	9,850.	3,256.	4,233.	2,361.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,543.	6,461.	8,398.	4,684.
20 Interest	42,583.	14,078.	18,298.	10,207.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	69,396.	22,943.	29,819.	16,634.
23 Insurance	70,857.	23,426.	30,447.	16,984.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a RELATIONSHIPS	79,043.	26,131.	33,965.	18,947.
b PRINTING & PUBLICATIONS	73,038.	24,147.	31,384.	17,507.
c DUES & MEMBERSHIPS	55,008.	18,186.	23,637.	13,185.
d OTHER EXPENSES	25,784.	8,524.	11,080.	6,180.
e All other expenses	6,724.	2,223.	2,889.	1,612.
25 Total functional expenses. Add lines 1 through 24e	22,142,682.	19,488,846.	1,703,546.	950,290.
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)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	54,614,239.	2	60,017,849.
	3 Pledges and grants receivable, net	8,287,500.	3	5,645,469.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	1,268,618.	7	1,389,391.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	3,090.	9	26,699.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 12,072,576.		
	b Less: accumulated depreciation	10b 804,363.	10c	11,268,213.
	11 Investments - publicly traded securities	178,711,842.	11	255,098,049.
	12 Investments - other securities. See Part IV, line 11	55,552,137.	12	58,087,021.
	13 Investments - program-related. See Part IV, line 11	976,447.	13	1,717,355.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	547,946.	15	548,377.
16 Total assets. Add lines 1 through 15 (must equal line 33)	310,173,310.	16	393,798,423.	
Liabilities	17 Accounts payable and accrued expenses	349,989.	17	692,841.
	18 Grants payable		18	
	19 Deferred revenue	344,000.	19	22,000.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	258,807.	23	110,322.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	84,614,672.	25	100,473,393.
	26 Total liabilities. Add lines 17 through 25	85,567,468.	26	101,298,556.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	9,708,022.	27	17,088,478.
	28 Net assets with donor restrictions	214,897,820.	28	275,411,389.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	224,605,842.	32	292,499,867.
	33 Total liabilities and net assets/fund balances	310,173,310.	33	393,798,423.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	57,110,719.
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,142,682.
3	Revenue less expenses. Subtract line 2 from line 1	3	34,968,037.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	224,605,842.
5	Net unrealized gains (losses) on investments	5	34,192,247.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,266,260.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	292,499,866.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
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:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
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 Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on 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 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 on Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16530656.	30654947.	25378811.	34721300.	36802533.	144088247
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	16530656.	30654947.	25378811.	34721300.	36802533.	144088247
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14959887.
6 Public support. Subtract line 5 from line 4.						129128360

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	16530656.	30654947.	25378811.	34721300.	36802533.	144088247
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2897165.	2922020.	3744867.	5018443.	4578201.	19160696.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						163248943
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))	14	79.10	%
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	80.14	%
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
2a		
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.**
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines provided for supplemental information input.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization: COMMUNITY FOUNDATION OF THE OZARKS, INC. Employer identification number: 23-7290968

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for held easements at the end of the tax year, and yes/no questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with questions (1a, 1b, 2) regarding art and historical treasures, including checkboxes and dollar amount fields for revenue and assets.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	154,193,913.	145,271,345.	136,747,304.	128,053,421.	119,752,116.
b Contributions	25,532,249.	10,273,321.	8,439,888.	7,547,160.	6,867,501.
c Net investment earnings, gains, and losses	48,633,155.		3,109,718.	3,837,199.	4,710,357.
d Grants or scholarships	11,700,301.	1,350,753.	2,983,345.	2,251,588.	2,598,498.
e Other expenditures for facilities and programs					
f Administrative expenses	2,416,357.		42,220.	438,888.	678,055.
g End of year balance	214,242,659.	154,193,913.	145,271,345.	136,747,304.	128,053,421.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 54.4000 %
 - c Term endowment 45.6000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	10,199,808.			10,199,808.
b Buildings		1,561,139.	574,696.	986,443.
c Leasehold improvements				
d Equipment		158,509.	118,034.	40,475.
e Other		153,120.	111,633.	41,487.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				11,268,213.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) INVESTMENT IN LLC	1,328,697.	END-OF-YEAR MARKET VALUE
(B) HEDGE FUNDS	32,809,372.	END-OF-YEAR MARKET VALUE
(C) OTHER	424,743.	COST
(D) REIT INVESTMENTS	22,341,490.	END-OF-YEAR MARKET VALUE
(E) MISSION RELATED ASSET	1,182,719.	COST
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	58,087,021.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) AGENCY FUNDS	100,473,393.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	100,473,393.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	89,604,511.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	34,192,247.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	-1,698,455.
e	Add lines 2a through 2d	2e	32,493,792.
3	Subtract line 2e from line 1	3	57,110,719.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	57,110,719.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	21,673,576.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	21,673,576.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	469,106.
c	Add lines 4a and 4b	4c	469,106.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	22,142,682.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

ANNUAL ACTUARIAL ADJUSTMENT	-244,182.
INTEREST EXPENSE	-5,374.
MANAGEMENT FEES	-463,733.
TRANSFERS	-985,166.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-1,698,455.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INTEREST EXPENSE	5,374.
ROUNDING ADJUSTMENT	-1.
MANAGEMENT FEES	463,733.

Part XIII Supplemental Information *(continued)*

TOTAL TO SCHEDULE D, PART XII, LINE 4B 469,106.

Multiple horizontal lines for supplemental information.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ABILITIES FIRST 3216 S. NATIONAL AVE. SPRINGFIELD, MO 65807	27-5438649	501(C)(3)	25,474.	0.			SPECIFIC PROGRAM
ABOUT OUR KIDS, INC. PO BOX 375 LAMAR, MO 64756	20-1492167	501(C)(3)	17,600.	0.			SPECIFIC PROGRAM
ALL ABOARD LEARNING CENTER 106 E WASHINGTON CUBA, MO 65453	43-1941534	501(C)(3)	22,000.	0.			SPECIFIC PROGRAM
ALLIANCE OF SOUTHWEST MISSOURI 1027 S MAIN ST STE 7 LOWER LEVEL JOPLIN, MO 64801	43-1801349	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
ALZHEIMER'S ASSOCIATION - GREATER MISSOURI CHAPTER - 9370 OLIVE BLVD - ST. LOUIS, MO 63132	43-1485251	501(C)(3)	5,150.	0.			SPECIFIC PROGRAM
AMBASSADORS FOR CHILDREN 500 W. BATTLEFIELD, STE B SPRINGFIELD, MO 65807	43-0903657	501(C)(3)	11,100.	0.			SPECIFIC PROGRAM

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶** _____
- 3** Enter total number of other organizations listed in the line 1 table **▶** _____

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY PO BOX 720366 OKLAHOMA CITY, OH 73162	13-1788491	501(C)(3)	145,593.	0.			SPECIFIC PROGRAM
AMERICAN CANCER SOCIETY - SPRINGFIELD AREA - 1001 CRAIG ROAD, SUITE 350 - ST. LOUIS, MO 63146	23-7040934	501(C)(3)	11,680.	0.			SPECIFIC PROGRAM
AMERICAN ENDOWMENT FOUNDATION 5700 DARROW RD STE 118 HUDSON, OH 44236	34-1747398	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
AMERICAN HEART ASSOCIATION 460 N LINDBERGH BLVD ST. LOUIS, MO 63141	13-5613797	501(C)(3)	22,867.	0.			SPECIFIC PROGRAM
AMERICAN KIDS, INC. 305 WIMBLEDON DRIVE, UNIT 6 BRANSON, MO 65616	73-1243062	501(C)(3)	14,000.	0.			SPECIFIC PROGRAM
AMERICAN RED CROSS NATIONAL HEADQUARTERS - 2025 E ST NW - WASHINGTON, DC 20006	44-0563832	501(C)(3)	9,481.	0.			SPECIFIC PROGRAM
AMERICAN RED CROSS OF SOUTHERN MISSOURI - 1545 N. WEST BYPASS - SPRINGFIELD, MO 65803	53-0196605	501(C)(3)	29,101.	0.			SPECIFIC PROGRAM
AMERICANS FOR OXFORD, INC. 500 FIFTH AVENUE, 32ND FLOOR NEW YORK, NY 10110	52-1495060	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
AMERICA'S CHARITIES 14383 NEWBROOK DRIVE, SUITE 300 PMB CHANTILLY, VA 20151	54-1517707	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANGEL WINGS EQUINE RESCUE 6600 LAWRENCE 2137 STOTTS CITY, MO 65756	47-1592431	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
APPLESEED NETWORK PO BOX 28 OZARK, MO 65721	84-4002645	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
ARC OF THE OZARKS 1501 E PYTHIAN SPRINGFIELD, MO 65802	43-6049004	501(C)(3)	7,800.	0.			SPECIFIC PROGRAM
AREA AGENCY ON AGING REGION TEN PO BOX 3990 JOPLIN, MO 64803	43-1159115	501(C)(3)	20,430.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
ARNHART BAPTIST CHURCH 8124 FR 1100 PURDY, MO 65734	44-0559931	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
ART FEEDS CARTHAGE PO BOX 891 CARTHAGE, MO 64836	27-1326336	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
ARTCENTRAL PO BOX 714 CARTHAGE, MO 64836	43-1409998	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
ARTS ON AVENUE INC PO BOX 914 WEST PLAINS, MO 65775	43-1489033	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
ASCENT RECOVERY RESIDENCES PO BOX 4368 JOPLIN, MO 64803	26-1682708	501(C)(3)	51,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASH GROVE R-IV SCHOOL DISTRICT 100 N MAPLE LN ASH GROVE, MO 65604	44-6001727	GOVERNMENTAL	52,814.	0.			SPECIFIC PROGRAM
ASH GROVE SUNSHINE CENTER 310 N PERRYMAN ST., PO BOX 72 ASH GROVE, MO 65604	12-4313873	501(C)(3)	7,217.	0.			SPECIFIC PROGRAM
ASKINOSIE FOUNDATION 514 E COMMERCIAL STREET SPRINGFIELD, MO 65803	82-4109289	501(C)(3)	12,000.	0.			SPECIFIC PROGRAM
ASSEMBLIES OF GOD 1445 N. BOONVILLE SPRINGFIELD, MO 65802	44-0577787	501(C)(3)	21,600.	0.			SPECIFIC PROGRAM
AUGUSTA PUBLIC SCHOOLS 410 BROADWAY AUGUSTA, MT 59410	81-6000576	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
AURORA R-VIII SCHOOL DISTRICT 201 SOUTH MADISON AURORA, MO 65605	44-6001732	GOVERNMENTAL	13,426.	0.			SPECIFIC PROGRAM
BAPTIST BIBLE COLLEGE 628 E KEARNEY ST SPRINGFIELD, MO 65803	44-0567840	501(C)(3)	22,450.	0.			SPECIFIC PROGRAM
BARNABAS FOUNDATION, INC PO BOX 3200 SPRINGFIELD, MO 65808	43-1700240	501(C)(3)	32,400.	0.			SPECIFIC PROGRAM
BARTON COUNTY GOOD SAMARITAN 1301 PARRY ST. LAMAR, MO 64759	43-1465283	501(C)(3)	21,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARTON COUNTY HEALTH DEPARTMENT 1301 EAST 12TH ST LAMAR, MO 64759	30-0184410	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BARTON COUNTY MEMORIAL PARK 100 GULF ST LAMAR, MO 64759	32-2677418	501(C)(3)	100,000.	0.			SPECIFIC PROGRAM
BIG BROTHERS BIG SISTERS OF EASTERN MISSOURI - 524 DEUSER STREET - ST. LOUIS, MO 63132	43-0669085	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BIG BROTHERS BIG SISTERS OF THE LAKE AREA - PO BOX 643 - LAKE OZARK, MO 65049	43-0953286	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BIG BROTHERS BIG SISTERS OF THE OZARKS - 3372 W BATTLEFIELD - SPRINGFIELD, MO 65807	43-0971303	501(C)(3)	20,795.	0.			SPECIFIC PROGRAM
BILLINGS CHRISTIAN CHURCH PO BOX 350 BILLINGS, MO 65610	43-1307634	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BISHOP KEMPER SCHOOL OF MINISTRY 701 SW 8TH AVENUE TOPEKA, KS 66603	46-3536944	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
BLOOMSDALE ST. VINCENT DE PAUL PANTRY - HWY Y - BLOOMSDALE, MO 63627	43-0652684	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BLOOMSDALE VOLUNTEER FIRE DEPARTMENT - PO BOX #42 - BLOOMSDALE, MO 63627	43-1217976	501(C)(3)	9,393.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOLIVAR R-I SCHOOL DISTRICT 524 W MADISON BOLIVAR, MO 65613	44-6000506	501(C)(3)	10,500.	0.			SPECIFIC PROGRAM
BONNIEBROOK HISTORICAL SOCIETY 485 ROSE O'NEILL RD WALNUT SHADE, MO 65771	51-0203806	501(C)(3)	10,100.	0.			SPECIFIC PROGRAM
BOURBON AREA COMMUNITY CENTER 453 N CHURCH ST SULLIVAN, MO 63080	43-1499808	501(C)(3)	6,908.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
BOURBON COMMUNITY DEVELOPMENT CORPORATION - P.O. BOX 593 - BOURBON, MO 65441	20-5354541	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BOYS & GIRLS CLUB OF GREATER SALEM 13 HAWTHORNE BLVD SALEM, MA 01970	04-2104912	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
BOYS & GIRLS CLUB OF THE OZARKS 1460 BEE CREEK RD BRANSON, MO 65616	43-1664669	501(C)(3)	14,650.	0.			SPECIFIC PROGRAM
BOYS AND GIRLS CLUB OF SOUTHWEST MISSOURI - 317 COMINGO - JOPLIN, MO 64801	44-0627566	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
BOYS AND GIRLS CLUBS OF SPRINGFIELD - 1410 N FREMONT AVE - SPRINGFIELD, MO 65802	44-0513659	501(C)(3)	244,702.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
BRANSON ARTS COUNCIL, INC. PO BOX 2004 BRANSON, MO 65615	43-1606888	501(C)(3)	10,750.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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BREAST CANCER FOUNDATION OF THE OZARKS - 620 W REPUBLIC RD STE 107 - SPRINGFIELD, MO 65807	43-1881450	501(C)(3)	195,550.	0.			SPECIFIC PROGRAM
BRENTWOOD CHRISTIAN CHURCH 1900 E BARATARIA SPRINGFIELD, MO 65804	44-6006164	501(C)(3)	29,850.	0.			SPECIFIC PROGRAM
BRIDGE OF FAITH COMMUNITY CHURCH PO BOX 1059 ROCKAWAY BEACH, MO 65740	20-8112523	501(C)(3)	7,500.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
BRIDGES FOR YOUTH P.O. BOX 9866 SPRINGFIELD, MO 65801	43-1718841	501(C)(3)	18,000.	0.			SPECIFIC PROGRAM
BRIGHT FUTURES: JOPLIN 825 SOUTH PEARL STREET JOPLIN, MO 64801	82-4599686	501(C)(3)	23,000.	0.			SPECIFIC PROGRAM
BROWNELL PUBLIC LIBRARY 44 COMMONS, PO BOX 146 LITTLE COMPTON, RI 02837	05-0259263	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
BRYANT WATERSHED PROJECT, INC (TRILLIUM TRUST) - 1376 BILL VIRDON BLVD, PO BOX 1725 - WEST PLAINS, MO 65775	43-1889711	501(C)(3)	5,978.	0.			SPECIFIC PROGRAM
BUILDING BRIDGES (UNITED WAY OF SOUTHWEST MISSOURI AND SOUTHEAST KANSAS) - 3510 E 3RD ST - JOPLIN, MO 64801	44-0556865	501(C)(3)	7,750.	0.			SPECIFIC PROGRAM
BURRELL FOUNDATION 2885 W BATTLEFIELD RD SPRINGFIELD, MO 65807	43-1467704	501(C)(3)	5,002.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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CAMDENTON R-III SCHOOL DISTRICT EDUCATION FOUNDATION, INC. - P.O. BOX 1409 - CAMDENTON, MO 65020	43-1911038	GOVERNMENTAL	5,750.	0.			SPECIFIC PROGRAM
CAMP BARNABAS P.O. BOX 3200 SPRINGFIELD, MO 65808	33-1122930	501(C)(3)	9,083.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
CAMP DAVID OF THE OZARKS 11305 PRIVATE DRIVE 5316 ROLLA, MO 65401	20-0366357	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CAPE GIRARDEAU PUBLIC SCHOOLS FOUNDATION - 301 N CLARK ST - CAPE GIRARDEAU, MO 63701	43-1666808	501(C)(3)	16,000.	0.			SPECIFIC PROGRAM
CARE TO LEARN 1740 S GLENSTONE AVE STE R SPRINGFIELD, MO 65804	47-1494384	501(C)(3)	69,300.	0.			SPECIFIC PROGRAM
CARTHAGE AREA UNITED WAY PO BOX 250 CARTHAGE, MO 64836	87-0705084	501(C)(3)	14,413.	0.			SPECIFIC PROGRAM
CARTHAGE COUNCIL ON THE ARTS PO BOX 33 CARTHAGE, MO 64836	43-1525120	501(C)(3)	9,758.	0.			SPECIFIC PROGRAM
CARTHAGE CRISIS CENTER INC 100 S MAIN ST CARTHAGE, MO 64836	43-1769385	501(C)(3)	7,225.	0.			SPECIFIC PROGRAM
CARTHAGE PUBLIC LIBRARY 612 S GARRISON CARTHAGE, MO 64836	44-6005089	501(C)(3)	6,162.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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CASA - 37TH JUDICIAL 101 WASHINGTON AVE WEST PLAINS, MO 65438	46-5125923	501(C)(3)	15,882.	0.			SPECIFIC PROGRAM
CASA OF SOUTHWEST MISSOURI PO BOX 4853 SPRINGFIELD, MO 65808	43-1524185	501(C)(3)	25,475.	0.			SPECIFIC PROGRAM
CASSVILLE R-IV SCHOOL DISTRICT 1501 MAIN ST CASSVILLE, MO 65625	44-6001377	GOVERNMENTAL	8,850.	0.			SPECIFIC PROGRAM
CASSVILLE SENIOR CENTER 1111 FAIR ST CASSVILLE, MO 65625	43-1221410	501(C)(3)	6,207.	0.			SPECIFIC PROGRAM
CASSVILLE UNITED METHODIST CHURCH 601 GRAVEL STREET CASSVILLE, MO 65625	43-1307914	501(C)(3)	5,850.	0.			SPECIFIC PROGRAM
CATHOLIC CHARITIES OF SOUTHERN MISSOURI - 424 EAST MONASTERY STREET - SPRINGFIELD, MO 65807	80-0455890	501(C)(3)	33,400.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
CATHOLIC CHURCH EXTENSION SOCIETY 150 SOUTH WACKER DRIVE SUITE 2000 CHICAGO, IL 60606	36-6000520	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
CATHOLIC RELIEF SERVICES 228 W. LEXINGTON ST. BALTIMORE, MD 21201	13-5563422	501(C)(3)	18,500.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
CEDAR FALLS HIGH SCHOOL 1015 DIVISION STREET CEDAR FALLS, IA 50613	42-0862684	GOVERNMENTAL	7,499.	0.			SPECIFIC PROGRAM

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CENTRAL MISSOURI FOSTER CARE & ADOPTION ASSOCIATION - 809 SWIFTS HIGHWAY - JEFFERSON CITY, MO 65101	80-0519145	501(C)(3)	27,752.	0.			SPECIFIC PROGRAM
CENTS OF PRIDE PO BOX 14849 SPRINGFIELD, MO 65814	38-3855890	501(C)(3)	16,000.	0.			SPECIFIC PROGRAM
CHAMPION ATHLETES OF THE OZARKS 1715 S KANSAS AVE SPRINGFIELD, MO 65807	43-1786541	501(C)(3)	6,300.	0.			SPECIFIC PROGRAM
CHILDREN'S CENTER OF SOUTHWEST MISSOURI - 1029 E 7TH STREET - JOPLIN, MO 64801	43-1740718	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
CHILDREN'S HAVEN OF SOUTHWEST MISSOURI - 711 SOUTH PICHER AVENUE - JOPLIN, MO 64801	04-3603881	501(C)(3)	9,930.	0.			SPECIFIC PROGRAM
CHILDREN'S MIRACLE NETWORK HOSPITALS - 3525 S. NATIONAL, STE. 203 - SPRINGFIELD, MO 65807	87-0387205	501(C)(3)	15,300.	0.			SPECIFIC PROGRAM
CHILDREN'S SMILE CENTER 601 N. 21ST STREET OZARK, MO 65721	57-1196229	501(C)(3)	39,143.	0.			SPECIFIC PROGRAM
CHILDREN'S TUMOR FOUNDATION PO BOX 7247 PHILADELPHIA, PA 19170	13-2298956	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CHRIST EPISCOPAL CHURCH 601 E WALNUT ST SPRINGFIELD, MO 65806	43-1657802	501(C)(3)	40,389.	0.			SPECIFIC PROGRAM

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CHRISTIAN ACTION MINISTRIES 610 S 6TH ST STE 102 BRANSON, MO 65616	43-1355905	501(C)(3)	96,272.	0.			SPECIFIC PROGRAM
CHRISTIAN COUNTY MUSEUM AND HISTORICAL SOCIETY - PO BOX 442 - OZARK, MO 65721	43-1114915	501(C)(3)	6,050.	0.			SPECIFIC PROGRAM
CHRISTIAN COUNTY SHERIFF DEPARTMENT - 110 W. ELM STREET RM 70 - OZARK, MO 65721	44-6000473	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
CHRISTOS HOUSE, INC. 1554 IMPERIAL CENTER WEST PLAINS, MO 65775	43-1468720	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
CHURCH DIVINITY SCHOOL OF THE PACIFIC - 2451 RIDGE ROAD - BERKELEY, CA 94709	94-1156508	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CITIZENS AGAINST DOMESTIC VIOLENCE PO BOX 245 CAMDENTON, MO 65020	43-1371497	501(C)(3)	14,243.	0.			SPECIFIC PROGRAM
CITY OF CLINTON 105 E OHIO ST CLINTON, MO 64735	43-0837752	GOVERNMENTAL	5,000.	0.			SPECIFIC PROGRAM
CITY OF ELDON PO BOX 355 ELDON, MO 65026	44-6000170	GOVERNMENTAL	5,961.	0.			SPECIFIC PROGRAM
CITY OF LAKE HELEN PO BOX 39 LAKE HELEN, FL 32744	26-0757181	GOVERNMENTAL	26,400.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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CITY OF MONTROSE 317 MISSOURI AVE MONTROSE, MO 64770	43-0983471	GOVERNMENTAL	7,500.	0.			SPECIFIC PROGRAM
CITY OF NIXA PO BOX 395 NIXA, MO 65714	44-6005734	GOVERNMENTAL	6,900.	0.			SPECIFIC PROGRAM
CITY OF SEYMOUR PO BOX 247 SEYMOUR, MO 65746	44-6005586	GOVERNMENTAL	16,574.	0.			SPECIFIC PROGRAM
CITY OF SPRINGFIELD, MISSOURI 840 BOONVILLE SPRINGFIELD, MO 65802	44-6000268	GOVERNMENTAL	35,000.	0.			SPECIFIC PROGRAM
CITY OF ST. JAMES 100 SOUTH JEFFERSON ST. JAMES, MO 65559	43-6003175	GOVERNMENTAL	16,872.	0.			SPECIFIC PROGRAM
CITY OF STE. GENEVIEVE 165 S. FOURTH ST STE GENEVIEVE, MO 63670	43-6003164	GOVERNMENTAL	22,677.	0.			SPECIFIC PROGRAM
CITY OF STE. GENEVIEVE FIRE DEPARTMENT - 165 S. FOURTH ST. - STE. GENEVIEVE, MO 63670	43-6003164	GOVERNMENTAL	9,241.	0.			SPECIFIC PROGRAM
CITY OF STE. GENEVIEVE HOUSING AUTHORITY - 35 ROBINWOOD DRIVE - STE GENEVIEVE, MO 63670	43-1269718	GOVERNMENTAL	5,000.	0.			SPECIFIC PROGRAM
CLEVER R-V SCHOOL DISTRICT 103 S PUBLIC AVE CLEVER, MO 65631	25-1925327	GOVERNMENTAL	10,000.	0.			SPECIFIC PROGRAM

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CLINTON ANIMAL RESCUE ENDEAVOR 103 S GAIL DR CLINTON, MO 64735	26-2482075	501(C)(3)	6,058.	0.			SPECIFIC PROGRAM
CLINTON FRIENDS OF THE PARKS 147 N. E. 901 RD CLINTON, MO 64735	43-1896332	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CLINTON MAIN STREET, INC. 116 W JEFFERSON ST #B CLINTON, MO 64735	43-1528229	501(C)(3)	9,950.	0.			SPECIFIC PROGRAM
CLINTON SCHOOL DISTRICT 701 S 8TH ST CLINTON, MO 64735	44-6001380	501(C)(3)	8,091.	0.			SPECIFIC PROGRAM
CLINTON UNITED METHODIST CHURCH 601 S 4TH ST CLINTON, MO 64735	44-0590276	501(C)(3)	45,147.	0.			SPECIFIC PROGRAM
COLLEGE OF THE OZARKS P.O. BOX 17 POINT LOOKOUT, MO 65726	44-0556862	501(C)(3)	15,300.	0.			SPECIFIC PROGRAM
COMMUNITIES OF RECOVERY, INC. PO BOX 6224 BRANSON, MO 65615	46-1516182	501(C)(3)	50,892.	0.			SPECIFIC PROGRAM
COMMUNITY CLINIC OF SOUTHWEST MISSOURI - 701 S. JOPLIN AVE. - JOPLIN, MO 64801	43-1643962	501(C)(3)	23,000.	0.			SPECIFIC PROGRAM
COMMUNITY COUNSELING CENTER FOUNDATION - 402 S. SILVER SPRINGS ROAD - CAPE GIRARDEAU, MO 63703	43-1341480	501(C)(3)	9,200.	0.			SPECIFIC PROGRAM

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COMMUNITY OUTREACH MINISTRIES PO BOX 181 BOLIVAR, MO 65613	26-1545304	501(C)(3)	31,420.	0.			SPECIFIC PROGRAM
COMMUNITY PARTNERSHIP 937 BROADWAY, SUITE 306 CAPE GIRARDEAU, MO 63702	43-1722915	501(C)(3)	18,000.	0.			SPECIFIC PROGRAM
COMMUNITY PARTNERSHIP OF THE OZARKS - 330 N JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1830026	501(C)(3)	309,553.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
COMMUNITY SUPPORT SERVICES OF MISSOURI - 1325 FAIRMONT DR - JOPLIN, MO 64801	43-1121898	501(C)(3)	48,401.	0.			SPECIFIC PROGRAM
COMMUNITY THEATRE FOR SOUTHWEST MISSOURI - 2466 W OLD 66 BLVD - CARTHAGE, MO 64836	43-1453653	501(C)(3)	9,025.	0.			SPECIFIC PROGRAM
COMPASS LATINO 5118 JAY CREEK RD OAKWOOD, GA 30566	27-3742834	501(C)(3)	22,100.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
CONGREGATION OF MARY QUEEN - AMERICAN REGION - 625 SOUTH JEFFERSON - SPRINGFIELD, MO 65806	43-1499197	RELIGIOUS	5,000.	0.			SPECIFIC PROGRAM
CONGREGATION TEMPLE ISRAEL #1 RABBI ALVAN D. RUBIN DRIVE ST LOUIS, MO 63141	43-0653290	501(C)(3)	10,796.	0.			SPECIFIC PROGRAM
CONSERVATION FORCE 3240 SOUTH 1-10 SERVICE ROAD METAIRIE, LA 70001	72-1364493	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM

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CONSERVATION INTERNATIONAL FOUNDATION - 2011 CRYSTAL DRIVE SUITE 600 - ARLINGTON, VA 22202	52-1497470	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
CONVOY OF HOPE 330 S. PATTERSON AVE SPRINGFIELD, MO 65802	68-0051386	501(C)(3)	38,250.	0.			SPECIFIC PROGRAM
CORNEA RESEARCH FOUNDATION 9002 N MERIDIAN ST, SUITE 212 INDIANAPOLIS, IN 46260	31-1243592	501(C)(3)	12,000.	0.			SPECIFIC PROGRAM
COUCH R-I SCHOOL DISTRICT 21922 MO 142 MYRTLE, MO 65778	43-6000898	501(C)(3)	9,000.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
COUNCIL FOR A HEALTHY DENT COUNTY PO BOX 190 SALEM, MO 65560	27-2353430	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
COUNCIL OF CHURCHES 3000 E CHESTNUT EXP STE A SPRINGFIELD, MO 65802	43-0903657	501(C)(3)	69,504.	0.			SPECIFIC PROGRAM
COVENANT BAPTIST CHURCH 1350 E INDUSTRIAL RD MOUNT VERNON, MO 65712	43-1497087	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
COX COLLEGE OF NURSING 1423 N. JEFFERSON AVE SPRINGFIELD, MO 65807	44-0577118	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM
COX HEALTH FOUNDATION 3525 SOUTH NATIONAL, #204 SPRINGFIELD, MO 65807	43-6810485	501(C)(3)	145,964.	0.			SPECIFIC PROGRAM

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CREATIVE VISIONS 18820 PACIFIC COAST HIGHWAY, SUITE MALIBU, CA 90265	39-1902814	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
CROSS CATHOLIC OUTREACH PO BOX 97168 WASHINGTON, DC 20090	65-1156061	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CROSSLINES 615 N GLENSTONE SPRINGFIELD, MO 65802	43-0903657	501(C)(3)	32,532.	0.			SPECIFIC PROGRAM
CROSSLINES OF MONETT PO BOX 163 MONETT, MO 65708	43-1357771	501(C)(3)	40,000.	0.			SPECIFIC PROGRAM
CROSSWAY BAPTIST CHURCH 2900 N BARNES SPRINGFIELD, MO 65803		RELIGIOUS	15,880.	0.			SPECIFIC PROGRAM
CROWDER COLLEGE - CASSVILLE 4020 N MAIN STREET CASSVILLE, MO 65625	43-6057329	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
CUBA MINISTERIAL ALLIANCE PO BOX 72 CUBA, MO 65453	43-1431100	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
DALLAS COUNTY R-I SCHOOL DISTRICT 1323 S. ASH STREET BUFFALO, MO 65622	44-6001998	GOVERNMENTAL	6,885.	0.			SPECIFIC PROGRAM
DEVELOPMENTAL CENTER OF THE OZARKS 1545 E PYTHIAN SPRINGFIELD, MO 65802	44-0614402	501(C)(3)	49,164.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM

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DIAPER BANK OF THE OZARKS 1901 E. MEADOWMERE ST. SPRINGFIELD, MO 65804	46-2851972	501(C)(3)	33,600.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
DIOCESE OF SPRINGFIELD-CAPE GIRARDEAU - 601 S. JEFFERSON - SPRINGFIELD, MO 65806	44-0609997	501(C)(3)	20,575.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
DISCOVERY CENTER OF SPRINGFIELD 438 E ST LOUIS ST SPRINGFIELD, MO 65806	43-1568214	501(C)(3)	65,450.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
DOGWOOD RANCH 1004 EAST SKYLINE AVENUE, PO BOX 19 OZARK, MO 65721	20-4279204	501(C)(3)	33,500.	0.			SPECIFIC PROGRAM
DOLLYWOOD FOUNDATION 111 DOLLYWOOD LANE PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	16,713.	0.			SPECIFIC PROGRAM
DOULA FOUNDATION 1901 E MEADOWMERE ST SPRINGFIELD, MO 65804	30-0046369	501(C)(3)	39,000.	0.			SPECIFIC PROGRAM
DOWNTOWN HISTORIC DISTRICT OF WILLOW SPRINGS INC - 113 E MAIN ST - WILLOW SPGS, MO 65793	83-1745876	501(C)(3)	10,250.	0.			SPECIFIC PROGRAM
DOWNTOWN HOUSTON, INC. PO BOX 170 HOUSTON, MO 65483	43-1877245	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
DOWNTOWN SPRINGFIELD COMMUNITY CINEMA - 305 S. CAMPBELL AVE., SUITE 101 - SPRINGFIELD, MO 65806	27-2922629	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM

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DREW LEWIS FOUNDATION INC 1126 N BROADWAY AVE BLDG A SPRINGFIELD, MO 65802	47-2991671	501(C)(3)	50,840.	0.			SPECIFIC PROGRAM
DRURY UNIVERSITY 900 N BENTON SPRINGFIELD, MO 65802	44-0552049	501(C)(3)	134,530.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
DYNAMIC STRIDES THERAPY, INC. 2673 E. SAWYER ROAD REPUBLIC, MO 65738	81-3551874	501(C)(3)	17,500.	0.			SPECIFIC PROGRAM
E3 RANCH FOUNDATION, INC 11710 PLAZA AMERICA DR STE 1010 RESTON, VA 20190	82-2269889	501(C)(3)	35,000.	0.			SPECIFIC PROGRAM
EAST GRAND COMMUNITY SERVICES 2220 EAST GRAND SPRINGFIELD, MO 65804	76-0750839	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
EDEN VILLAGE/THE GATHERING TREE PO BOX 2364 SPRINGFIELD, MO 65806	46-1371575	501(C)(3)	35,000.	0.			SPECIFIC PROGRAM
EDWARD JOHNSON MINISTRIES 113 CALLAWAY LANE MERIDIANVILLE, AL 35759	20-2940931	501(C)(3)	40,200.	0.			SPECIFIC PROGRAM
EL DORADO SPRINGS R-II SCHOOL DISTRICT - 901 S. GRAND - EL DORADO SPRINGS, MO 64744	44-6001481	501(C)(3)	10,283.	0.			SPECIFIC PROGRAM
ELEVATE BRANSON 310 GRETNA ROAD BRANSON, MO 65616	26-4727548	501(C)(3)	532,750.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMERGENCY SERVICES FOR CHILDREN 101 E. DALLAS ST. MOUNT VERNON, MO 65712	43-1671411	501(C)(3)	8,000.	0.			SPECIFIC PROGRAM
ETA KAPPA EDUCATION FUND PO BOX 7291 OVERLAND PARK, KS 66207	81-2848067	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
EVANGEL UNIVERSITY 1111 N GLENSTONE SPRINGFIELD, MO 65802	44-0589787	501(C)(3)	21,770.	0.			SPECIFIC PROGRAM
FAIR ACRES FAMILY YMCA, INC. 2600 S GRAND AVE CARTHAGE, MO 64836	43-1558437	501(C)(3)	12,137.	0.			SPECIFIC PROGRAM
FAIR GROVE SENIOR CENTER PO BOX 41 FAIR GROVE, MO 65648	27-2446607	501(C)(3)	6,450.	0.			SPECIFIC PROGRAM
FAIR HAVEN CHILDREN'S HOME 3132 N. FAIRHAVEN LOOP STRAFFORD, MO 65757	43-0815080	501(C)(3)	11,141.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
FAITH CHRISTIAN FAMILY CHURCH 17350 E VETERANS MEMORIAL PKWY WRIGHT CITY, MO 63390	71-0528646	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
FAITH COMMUNITY HEALTH CENTER, INC. - 610 SOUTH SIXTH STREET - BRANSON, MO 65616	94-3467834	501(C)(3)	54,400.	0.			SPECIFIC PROGRAM
FAMILY ENTERPRISES USA, INC 712 H STREET WASHINGTON, DC 20002	26-1640637	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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FAMILY LIFE CHURCH OF TEXAS INC 21463 BISCAYNE VALLEY LN. KATY, TX 77449	46-4413132	501(C)(3)	39,100.	0.			SPECIFIC PROGRAM
FAMILY SELF HELP CENTER INC DBA LAFAYETTE HOUSE - 1809 CONNOR AVENUE - JOPLIN, MO 64804	43-1170015	501(C)(3)	42,830.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
FATHER FLANAGAN'S BOYS TOWN 300 FLANAGAN BLVD BOYS TOWN, NE 68010	47-0376606	501(C)(3)	10,100.	0.			SPECIFIC PROGRAM
FECADEMIN FEDERACION MICHOCANA 9120 SONGFEST DR DOWNEY, CA 90240	84-4008453	501(C)(3)	12,000.	0.			SPECIFIC PROGRAM
FIRST & CALVARY PRESBYTERIAN CHURCH - 820 E CHERRY ST - SPRINGFIELD, MO 65806	44-0555219	501(C)(3)	10,733.	0.			SPECIFIC PROGRAM
FIRST BAPTIST CHURCH 119 N. SPRINGFIELD AVE BOLIVAR, MO 65613	44-0559931	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
FIRST BAPTIST CHURCH - CLEVER PO BOX 116 CLEVER, MO 65631		RELIGIOUS	50,000.	0.			SPECIFIC PROGRAM
FIRST CHRISTIAN CHURCH OF GAINESVILLE - PO BOX 125 - GAINESVILLE, MO 65655	43-1127807	501(C)(3)	10,945.	0.			SPECIFIC PROGRAM
FIRST CHRISTIAN CHURCH OF LAMAR 1208 WALNUT ST LAMAR, MO 64759	43-1301565	501(C)(3)	500,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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FIRST NATIONS DEVELOPMENT INSTITUTE - 2432 MAIN ST 2ND FLR - LONGMONT, CO 80501	54-1254491	501(C)(3)	8,000.	0.			SPECIFIC PROGRAM
FIRST PRESBYTERIAN CHURCH 220 NORTH ARBOR DRIVE HARRISON, AR 72601	44-0606868	501(C)(3)	12,531.	0.			SPECIFIC PROGRAM
FIRST PRESBYTERIAN CHURCH - AURORA 4 E. COLLEGE AURORA, MO 65605	43-1055281	501(C)(3)	5,575.	0.			SPECIFIC PROGRAM
FIRST STEP BACK HOME INC. 18 AUVERGNE DRIVE LAKE ST. LOUIS, MO 63367	20-8676289	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
FIRST UNITARIAN UNIVERSALIST CHURCH - 2434 E BATTLEFIELD - SPRINGFIELD, MO 65804	42-1093745	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
FIRST UNITED METHODIST CHURCH OF CARTHAGE - 617 S MAIN ST - CARTHAGE, MO 64836	44-0615076	501(C)(3)	14,242.	0.			SPECIFIC PROGRAM
FOCUS PO BOX 17408 DENVER, CO 80217	84-1522811	501(C)(3)	5,496.	0.			SPECIFIC PROGRAM
FOOD FOR MORGAN COUNTY PO BOX 44 VERSAILLES, MO 65084	45-3778751	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
FOOD FOR THE POOR, INC. 6401 LYONS RD COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	30,550.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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FOR THE KIDS 19221 LAWRENCE 2227 AURORA, MO 65605	82-3385302	501(C)(3)	7,875.	0.			SPECIFIC PROGRAM
FOSTER ADOPT CONNECT SPRINGFIELD 509 S CAVALIER SPRINGFIELD, MO 65802	43-1895965	501(C)(3)	5,175.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
FOUNDATION FOR RESTORATION OF STE. GENEVIEVE - PO BOX 88 - STE. GENEVIEVE, MO 63670	43-6076867	501(C)(3)	7,895.	0.			SPECIFIC PROGRAM
FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS - 1131 N. BOONVILLE - SPRINGFIELD, MO 65802	43-1560366	501(C)(3)	64,982.	0.			SPECIFIC PROGRAM
FOURCHE VALLEY RESCUE 6624 MAYAPPLE DRIVE FRENCH VILLAGE, MO 63036	81-5065625	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
FRANCISCAN UNIVERSITY 1235 UNIVERSITY BLVD. STEBENVILLE, OH 43952	34-0714818	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
FREEMAN HEALTH SYSTEM PO BOX 2325 JOPLIN, MO 64803	43-1704371	501(C)(3)	6,171.	0.			SPECIFIC PROGRAM
FRIENDS OF STE. GENEVIEVE COUNTY MEMORIAL HOSPITAL - 800 STE. GENEVIEVE DRIVE - STE. GENEVIEVE, MO 63670	84-1633893	501(C)(3)	7,500.	0.			SPECIFIC PROGRAM
FRIENDS OF THE GARDEN 2400 S. SCENIC SPRINGFIELD, MO 65807	43-1898848	501(C)(3)	43,952.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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FRIENDS OF THE ZOO 3043 N FORT ST SPRINGFIELD, MO 65803	23-7096596	501(C)(3)	21,533.	0.			SPECIFIC PROGRAM
GASCONADE COUNTY R-I SCHOOL DISTRICT - 164 BLUE PRIDE DR - HERMANN, MO 65041	43-6015434	GOVERNMENTAL	19,880.	0.			SPECIFIC PROGRAM
GENERATIONS VILLAGE 3808 OLIVIA ST SPRINGFIELD, MO 65810	82-1125195	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
GIFT OF HOPE 15366 US HIGHWAY 60 FORSYTH, MO 65653	43-1612944	501(C)(3)	7,800.	0.			SPECIFIC PROGRAM
GIVEPOWER FOUNDATION 415 EAST ST. ELMO, SUITE #1-F1 AUSTIN, TX 78745	47-1265705	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
GLOBAL FREEDOM CONCEPTS INC. 5118 JAY CREEK ROAD OAKWOOD, GA 30566	27-1778932	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
GOLDEN VALLEY MEMORIAL HOSPITAL FOUNDATION, INC. - 1600 N. 2ND STREET - CLINTON, MO 64735	43-1509160	501(C)(3)	23,150.	0.			SPECIFIC PROGRAM
GOOD SAMARITAN BOYS RANCH PO BOX 617 BRIGHTON, MO 65617	44-6006077	501(C)(3)	25,850.	0.			SPECIFIC PROGRAM
GOOD SAMARITAN CARE CLINIC PO BOX 160 MOUNTAIN VIEW, MO 65548	56-2418664	501(C)(3)	11,306.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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GOOD SHEPHERD LUTHERAN CHURCH 8975 COUNTY LANE 170 CARTHAGE, MO 64836	43-1454432	501(C)(3)	6,695.	0.			SPECIFIC PROGRAM
GORDON COLLEGE 255 GRAPEVINE COLLEGE WENHAM, MA 01984	04-2104258	501(C)(3)	34,000.	0.			SPECIFIC PROGRAM
GRACE CITY CHURCH 10729 N SERVICE RD W BOURBON, MO 65441	81-3268436	501(C)(3)	145,000.	0.			SPECIFIC PROGRAM
GRACE EPISCOPAL CHURCH PO BOX 596 CARTHAGE, MO 64836	44-0608719	501(C)(3)	23,812.	0.			SPECIFIC PROGRAM
GRACE UNITED METHODIST CHURCH 600 S JEFFERSON SPRINGFIELD, MO 65806	44-0651283	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
GREAT CIRCLE 1212 W LOMBARD ST SPRINGFIELD, MO 65806	43-0681471	501(C)(3)	18,900.	0.			SPECIFIC PROGRAM
GREATER OZARKS AUDUBON SOCIETY PO BOX 3231 SPRINGFIELD, MO 65808	43-1730027	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
GREENE COUNTY MEDICAL EXAMINER'S OFFICE - 916 NORTH CAMPBELL AVENUE - SPRINGFIELD, MO 65802	44-6000506	501(C)(3)	13,600.	0.			SPECIFIC PROGRAM
GREENE COUNTY SENIOR BOARD PO BOX 9766 SPRINGFIELD, MO 65804	37-1709405	501(C)(3)	40,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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GRO MARSHFIELD PO BOX 666 MARSHFIELD, MO 65706	82-2763359	501(C)(3)	257,642.	0.			SPECIFIC PROGRAM
GYN CANCERS ALLIANCE 3039 S FORT AVE STE A SPRINGFIELD, MO 65807	43-1943170	501(C)(3)	27,350.	0.			SPECIFIC PROGRAM
HABITAT FOR HUMANITY 322 W LAMAR ST AMERICUS, GA 31709	91-1914868	501(C)(3)	10,630.	0.			SPECIFIC PROGRAM
HABITAT FOR HUMANITY OF SPRINGFIELD - 2410 S SCENIC AVE - SPRINGFIELD, MO 65807	43-1470360	501(C)(3)	26,830.	0.			SPECIFIC PROGRAM
HALFWAY R-III SCHOOL DISTRICT 2150 HIGHWAY 32 HALFWAY, MO 65663	44-6001400	GOVERNMENTAL	9,859.	0.			SPECIFIC PROGRAM
HAND IN HAND MULTICULTURAL CENTER P.O. BOX 1577 SPRINGFIELD, MO 65801	43-1875591	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
HARMONY HOUSE PO BOX 3541 SPRINGFIELD, MO 65808	43-1082063	501(C)(3)	22,684.	0.			SPECIFIC PROGRAM
HARRY M. CORNELL ARTS & ENTERTAINMENT COMPLEX - PO BOX 1117 - JOPLIN, MO 64802	84-2831061	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
HART FOR ANIMALS PO BOX 623 MCHENRY, MD 21541	82-0584608	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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HAVEN OF THE OZARKS ANIMAL SANCTUARY - 9617 FARM RD 2190 - WASHBURN, MO 65772	43-1721978	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
HEARING CHARITIES OF AMERICA 1912 EAST MEYER BLVD KANSAS CITY, MO 64132	20-8572520	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
HEARTLAND WORSHIP CENTER 2340 OLD ROUTE 5 CAMDENTON, MO 65020	43-1149175	501(C)(3)	7,100.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
HEAVENLY HOPE 10603 ROTH QUARRY RD STE GENEVIEVE, MO 63670	84-1805759	501(C)(3)	8,337.	0.			SPECIFIC PROGRAM
HELP GIVE HOPE 2733 E BATTLEFIELD #332 SPRINGFIELD, MO 65804	43-1727982	501(C)(3)	44,522.	0.			SPECIFIC PROGRAM
HELPING HANDS ABUSE AND CRISIS CENTER OF HICKORY COUNTY - P.O. BOX 332 - HERMITAGE, MO 65668	84-2668100	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
HERMANN FIRE COMPANY NO. 1 214 E 2ND ST HERMANN, MO 65041	43-6110006	501(C)(3)	7,400.	0.			SPECIFIC PROGRAM
HEROES OUTREACH PROGRAM 59 COPPERAS ROAD ELDON, MO 65026	81-4742772	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
HILL CITY CHURCH 325 PARK CENTRAL E SPRINGFIELD, MO 65806	81-1584612	501(C)(3)	15,100.	0.			SPECIFIC PROGRAM

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HISTORIC RIVER DISTRICT PO BOX 1081 OZARK, MO 65721	82-3987983	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
HISTORY MUSEUM ON THE SQUARE PO BOX 2963 SPRINGFIELD, MO 65801	51-0148860	501(C)(3)	30,524.	0.			SPECIFIC PROGRAM
HOLIDAY CENTRAL OF MOUNT VERNON 14868 LAWRENCE 1137 MOUNT VERNON, MO 65712	84-2693286	501(C)(3)	7,000.	0.			SPECIFIC PROGRAM
HOLY SMOKE, INC 800 WATERFERN TRAIL DRIVE AUBURNDALE, FL 33823	38-3724534	501(C)(3)	20,001.	0.			SPECIFIC PROGRAM
HOLY TRINITY CATHOLIC CHURCH 2818 E BENNETT ST SPRINGFIELD, MO 65804	43-0889012	501(C)(3)	21,858.	0.			SPECIFIC PROGRAM
HONOR FLIGHT OF THE OZARKS 1615 SOUTH INGRAM MILL RD, SUITE F SPRINGFIELD, MO 65804	90-0937752	501(C)(3)	45,500.	0.			SPECIFIC PROGRAM
HOPE FOUNDATION PO BOX 1642 SPRINGFIELD, MO 65801	38-3809503	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
HOSPICE FOUNDATION OF THE OZARKS INC - PO BOX 9226 - SPRINGFIELD, MO 65801	43-1552783	501(C)(3)	5,255.	0.			SPECIFIC PROGRAM
HUMANE SOCIETY OF SOUTHEAST MISSOURI - 2536 BOUTIN DR - CAPE GIRARDEAU, MO 63701	43-1108057	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM

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HUMANE SOCIETY OF SOUTHWEST MISSOURI - 3161 W NORTON RD - SPRINGFIELD, MO 65803	44-0665046	501(C)(3)	440,004.	0.			SPECIFIC PROGRAM
I POUR LIFE PO BOX 5181 SPRINGFIELD, MO 65801	27-3482070	501(C)(3)	7,450.	0.			SPECIFIC PROGRAM
IMMACULATE CONCEPTION CATHOLIC CHURCH - 208 S HOPE ST, SUITE 102 - JACKSON, MO 63755	43-0653348	501(C)(3)	7,200.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
IMMACULATE CONCEPTION CHURCH 318 E SCIOTO ST ST. JAMES, MO 65559	90-0462704	501(C)(3)	43,000.	0.			SPECIFIC PROGRAM
IN TIME OF NEED FOUNDATION, INC. 3039 S KANSAS EXPY SPRINGFIELD, MO 65807	82-3114198	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
ISABEL'S HOUSE - CRISIS NURSERY OF THE OZARKS - 2750 W BENNETT ST - SPRINGFIELD, MO 65802	20-4574229	501(C)(3)	45,200.	0.			SPECIFIC PROGRAM
IVY BEND ANIMAL RESCUE 33455 IVY BEND ROAD STOVER, MO 65078	47-4949763	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
JAMES RIVER BASIN PARTNERSHIP 901 S NATIONAL AVE, PCOB SPRINGFIELD, MO 65897	31-1613753	501(C)(3)	13,226.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
JAMES RIVER CHURCH 6100 N 19TH ST OZARK, MO 65721	43-1564676	501(C)(3)	127,374.	0.			SPECIFIC PROGRAM

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JASPER COUNTY CORONER'S OFFICE 302 S. MAIN STREET CARTHAGE, MO 64836	44-6000531	501(C)(3)	7,300.	0.			SPECIFIC PROGRAM
JASPER COUNTY YOUTH FAIR, INC. 2408 GRAND AVE 220, PO BOX 1061 CARTHAGE, MO 64836	20-2833959	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
JDRF 26 BROADWAY, 14TH FLOOR NEW YORK, NY 10004	23-1907729	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
JEFFERSON AVENUE BAPTIST CHURCH 316 E. SUNSHINE SPRINGFIELD, MO 65807	43-0912735	501(C)(3)	5,276.	0.			SPECIFIC PROGRAM
JESUITS OF THE MISSOURI PROVINCE 4511 WEST PINE BLVD ST. LOUIS, MO 63108	43-0416129	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
JOHN HAGEE MINISTRIES PO BOX 1400 SAN ANTONIO, TX 78295	74-1764843	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
JOPLIN FAMILY YMCA PO BOX 227 JOPLIN, MO 64801	44-0552026	501(C)(3)	22,650.	0.			SPECIFIC PROGRAM
JOPLIN REGIONAL MEDICAL SCHOOL ALLIANCE - 100 S WOOD STREET - NEOSHO, MO 64850	27-3183285	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
JUST LIKE YOU FILMS 6320 BROOKSIDE PLAZA, SUITE 293 KANSAS CITY, MO 64113	26-4753087	501(C)(3)	12,500.	0.			SPECIFIC PROGRAM

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KANAKUK INSTITUTE 1353 LAKESHORE DRIVE BRANSON, MO 65616	43-1926319	501(C)(3)	31,500.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
KANAKUK KAMPS DBA KANAKUK MINISTRIES - 1353 LAKESHORE DRIVE - BRANSON, MO 65616	43-1815310	501(C)(3)	115,000.	0.			SPECIFIC PROGRAM
KANSAS MASONIC HOME ENDOWMENT ASSOCIATION - 402 S MARTINSON ST - WICHITA, KS 67213	48-1163199	501(C)(3)	6,188.	0.			SPECIFIC PROGRAM
KBY CONGREGATIONS TOGETHER, INC. PO BOX 23170 BROOKLYN, NY 11202	57-1199898	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
KELLOGG LAKE NATURE CENTER & PRESERVE - 12022 OLD 66 BLVD - CARTHAGE, MO 64836	43-1929241	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
KEMPER MUSEUM OF CONTEMPORARY ART 4420 WARWICK BLVD KANSAS CITY, MO 64111	43-1715390	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
KIDS ACROSS AMERICA PO BOX 930 BRANSON, MO 65616	43-1348373	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
KIDS HARBOR, INC. 5717 CHAPEL DRIVE OSAGE BEACH, MO 65065	43-1927828	501(C)(3)	10,008.	0.			SPECIFIC PROGRAM
KIMBERLING AREA SENIOR CENTER 63 KIMBERLING HILLS BLVD., PO BOX 8 KIMBERLING CITY, MO 65686	43-1548205	501(C)(3)	7,482.	0.			SPECIFIC PROGRAM

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KING'S WAY UNITED METHODIST CHURCH 2401 SOUTH LONE PINE SPRINGFIELD, MO 65804	44-0601681	501(C)(3)	5,800.	0.			SPECIFIC PROGRAM
K-LIFE MINISTRIES 1353 LAKESHORE DRIVE BRANSON, MO 65616	43-1538224	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
KNIGHT ALZHEIMBER'S DISEASE RESEARCH CENTER - 4488 FOREST PARK BLVD - ST LOUIS, MO 63108	43-0653611	501(C)(3)	7,248.	0.			SPECIFIC PROGRAM
KNIGHTS OF COLUMBUS CHARITIES PO BOX 1966 NEW HAVEN, CT 06509	23-7227608	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
KSMU RADIO/MISSOURI STATE UNIVERSITY - 901 S NATIONAL, STRONG HALL 115 - SPRINGFIELD, MO 65897	44-6000308	501(C)(3)	5,975.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
LAKE AREA COMMUNITY DEVELOPMENT CORPORATION - 3162 BAGNELL DAM BLVD - LAKE OZARK, MO 65049	84-2117643	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
LAKE AREA HELPING HANDS HOMELESS SHELTER - 68 HOLDEN DR, PO BOX 1141 - CAMDENTON, MO 65020	43-1660679	501(C)(3)	17,000.	0.			SPECIFIC PROGRAM
LAKE AREA INDUSTRIES 1720 N. BUSINESS ROUTE 5 CAMDENTON, MO 65020	43-1294096	501(C)(3)	5,750.	0.			SPECIFIC PROGRAM
LAKE OF THE OZARKS DEVELOPMENT CENTER, INC. - PO BOX 753 - CAMDENTON, MO 65020	43-1151779	501(C)(3)	8,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LAKE OF THE OZARKS SHOOTOUT, INC PO BOX 568 SUNRISE BEACH, MO 65079	26-2067090	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
LAKE OZARK CHRISTIAN CHURCH PO BOX 194 LAKE OZARK, MO 65049	43-1193150	501(C)(3)	8,100.	0.			SPECIFIC PROGRAM
LAKELAND SCHOOL DISTRICT 12530 LAKELAND SCHOOL DR DEEPWATER, MO 64740	43-1042567	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
LAMAR AREA CHRISTIAN MINISTRIES ASSOCIATION - 758 STATE HWY C - LAMAR, MO 64759	43-1465283	501(C)(3)	14,000.	0.			SPECIFIC PROGRAM
LAMAR R-1 SCHOOL DISTRICT 202 W 7TH ST LAMAR, MO 64759	44-6003166	GOVERNMENTAL	13,375.	0.			SPECIFIC PROGRAM
LAMAR SHELTERED WORKSHOP 1401 MAPLE ST LAMAR, MO 64759	43-1021020	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
LAMAR UNITED METHODIST CHURCH 900 POPLAR ST LAMAR, MO 64759		RELIGIOUS	6,000.	0.			SPECIFIC PROGRAM
LAMB HOUSE (LAKE AREA MINISTRIES BENEVOLENCE) - 50 ILLINOIS STREET, PO BOX 717 - CAMDENTON, MO 65020	43-1476190	501(C)(3)	10,250.	0.			SPECIFIC PROGRAM
LEAST OF THESE 1720 JAMES RIVER RD OZARK, MO 65721	43-1867039	501(C)(3)	39,850.	0.			SPECIFIC PROGRAM

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LIFE HOUSE CENTER 11 N. CLARK ST., PO BOX 695 SULLIVAN, MO 63080	82-2051500	501(C)(3)	45,000.	0.			SPECIFIC PROGRAM
LIFE INC. PO BOX 967 FARMINGTON, MO 63640	43-1748647	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
LIFE TEEN INC PO BOX 117299 ATLANTA, GA 30368	86-0602592	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
LIFECHOICES 531 E 7TH ST JOPLIN, MO 64801	43-1518912	501(C)(3)	29,000.	0.			SPECIFIC PROGRAM
LIFELINE PREGNANCY CARE CENTER 201 LUCIA AVE CUBA, MO 65453	65-1230810	501(C)(3)	5,250.	0.			SPECIFIC PROGRAM
LIGHTHOUSE CHILD & FAMILY DEVELOPMENT CENTER - 900 N BENTON, LAY HALL - SPRINGFIELD, MO 65802	26-2610308	501(C)(3)	93,750.	0.			SPECIFIC PROGRAM
LITTLE ONES MINISTRIES PO BOX 892040 OKLAHOMA CITY, OH 73189	43-1914361	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
LOST AND FOUND, INC PO BOX 3008 SPRINGFIELD, MO 65808	43-1896981	501(C)(3)	77,700.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
LUTHERAN FAMILY & CHILDREN SERVICES - 2130 N. GLENSTONE - SPRINGFIELD, MO 65803	43-0652650	501(C)(3)	19,650.	0.			SPECIFIC PROGRAM

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MADISON FIRST BAPTIST CHURCH 124 VICTORIA LANE EAST HENDERSONVILLE, TN 37075	81-5422139	RELIGIOUS	21,100.	0.			SPECIFIC PROGRAM
MAKE A WISH FOUNDATION MISSOURI 13523 BARRETT PARKWAY DR SUITE 241 BALLWIN, MO 63021	43-1550697	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
MANSFIELD AREA COMMUNITY BETTERMENT ASSOCIATION - P.O. BOX 38 - MANSFIELD, MO 65704	43-1805198	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
MAPLE PARK CEMETERY ASSOCIATION 300 WEST GRAND SPRINGFIELD, MO 65807	80-0860396	501(C)(3)	10,553.	0.			SPECIFIC PROGRAM
MARION C. EARLY R-V SCHOOL DISTRICT - 5305 S MAIN ST - MORRISVILLE, MO 65710	44-6001489	GOVERNMENTAL	56,577.	0.			SPECIFIC PROGRAM
MARSHFIELD SENIOR CENTER P.O. BOX 305 MARSHFIELD, MO 65706	43-1311844	501(C)(3)	5,186.	0.			SPECIFIC PROGRAM
MARSHFIELD UNITED METHODIST CHURCH 220 S. ELM MARSHFIELD, MO 65706	43-1135312	501(C)(3)	18,100.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
MERCY COLLEGE OF NURSING (SBU) 4431 S. FREMONT SPRINGFIELD, MO 65804	32-0195818	501(C)(3)	23,000.	0.			SPECIFIC PROGRAM
MERCY HEALTH FOUNDATION SPRINGFIELD - 3265 S. NATIONAL AVE, SUITE 200 - SPRINGFIELD, MO 65807	32-0195818	501(C)(3)	35,764.	0.			SPECIFIC PROGRAM

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MERCY HOME FOR BOYS AND GIRLS 1140 WEST JACKSON BLVD CHICAGO, IL 60607	36-2171726	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
MERCY MULTIPLIED PO BOX 111060 NASHVILLE, TN 37222	72-0973419	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
MILLER CHRISTIAN SERVICE CENTER P.O. BOX 251 MILLER, MO 65707	43-1499216	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
MISSOURI ASPHALT PAVEMENT ASSOCIATION RESEARCH & EDUCATION FUND INC - PO BOX 104855 - JEFFERSON CITY, MO 65110	43-1895337	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
MISSOURI BAPTIST HOSPITAL OF SULLIVAN - 751 SAPPINGTON BRIDGE RD - SULLIVAN, MO 63080	43-1459495	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
MISSOURI DEPARTMENT OF NATURAL RESOURCES - PO BOX 176 - JEFFERSON CITY, MO 65102	44-6000987	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
MISSOURI FORGET-ME-NOT HORSE RESCUE AND SANCTUARY - 1025 HERITAGE RD - LINN CREEK, MO 65052	45-3787871	501(C)(3)	12,600.	0.			SPECIFIC PROGRAM
MISSOURI HOSPICE & PALLIATIVE CARE ASSOCIATION - PO BOX 105318 - JEFFERSON CITY, MO 65101	43-1213065	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM
MISSOURI SOUTHERN FOUNDATION 3950 E NEWMAN ROAD JOPLIN, MO 64801	43-0907114	501(C)(3)	27,105.	0.			SPECIFIC PROGRAM

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MISSOURI SOUTHERN STATE UNIVERSITY 3950 NEWMAN RD JOPLIN, MO 64801	43-0813540	501(C)(3)	61,780.	0.			SPECIFIC PROGRAM
MISSOURI STATE UNIVERSITY 901 S NATIONAL AVE SPRINGFIELD, MO 65897	43-1234200	501(C)(3)	117,931.	0.			SPECIFIC PROGRAM
MISSOURI STATE UNIVERSITY - WEST PLAINS - 128 GARFIELD AVENUE - WEST PLAINS, MO 63629	43-1234200	501(C)(3)	22,245.	0.			SPECIFIC PROGRAM
MISSOURI STATE UNIVERSITY FOUNDATION - 300 S JEFFERSON AVE - SPRINGFIELD, MO 65806	43-1234200	501(C)(3)	186,396.	0.			SPECIFIC PROGRAM
MONETT COMMUNITY OUTREACH PO BOX 6 MONETT, MO 65708	45-3936275	501(C)(3)	17,675.	0.			SPECIFIC PROGRAM
MOREHEAD STATE UNIVERSITY 150 UNIVERSITY BLVD., 901 GINGER HA MOREHEAD, KY 40351	34-1363913	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
MORRISVILLE CEMETERY ASSOCIATION 1043 HWY 215 MORRISVILLE, MO 65710	44-0667307	501(C)(3)	9,606.	0.			SPECIFIC PROGRAM
MSU - WEST PLAINS CAMPUS 128 GARFIELD WEST PLAINS, MO 65775	43-1641443	501(C)(3)	5,989.	0.			SPECIFIC PROGRAM
MT. VERNON R-V SCHOOL DISTRICT 730 S LANDRUM ST MT. VERNON, MO 65712	44-6003597	GOVERNMENTAL	48,233.	0.			SPECIFIC PROGRAM

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MWANGAZA INTERNATIONAL 721 KENTUCKY AVE JOPLIN, MO 64801	27-0360838	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
NATIONAL AVENUE CHRISTIAN CHURCH 1515 S NATIONAL SPRINGFIELD, MO 65804	44-0593005	501(C)(3)	5,075.	0.			SPECIFIC PROGRAM
NATIONAL RURAL EDUCATION ASSOCIATION - 615 MCCALLIE AVE - CHATTANOOGA, TN 37403	23-7033384	501(C)(3)	12,000.	0.			SPECIFIC PROGRAM
NEW COVENANT ACADEMY 3304 S COX RD SPRINGFIELD, MO 65807	43-1226560	501(C)(3)	7,500.	0.			SPECIFIC PROGRAM
NEW LIFE MISSION INN - MISSOURI PO BOX 545 PERRYVILLE, MO 63775	26-4787265	501(C)(3)	12,000.	0.			SPECIFIC PROGRAM
NEWBURG COMMUNITY REVITALIZATION PROGRAM GROUP - PO BOX 31 - NEWBURG, MO 65550	74-3103946	501(C)(3)	8,000.	0.			SPECIFIC PROGRAM
NEWBURG R-II SCHOOLS 701 WOLF PRIDE DRIVE NEWBURG, MO 65550	43-6002495	GOVERNMENTAL	8,000.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
NEWLIFE ETHIOPIA PO BOX 731783 PUYALLUP, WA 98373	81-3431164	501(C)(3)	9,100.	0.			SPECIFIC PROGRAM
NIANGUA R-V SCHOOL DISTRICT 301 RUMSEY ST. NIANGUA, MO 65713	44-6003666	GOVERNMENTAL	13,000.	0.			SPECIFIC PROGRAM

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NIXA R-II SCHOOL DISTRICT 301 S MAIN ST NIXA, MO 65714	44-6003678	GOVERNMENTAL	41,754.	0.			SPECIFIC PROGRAM
NOURISHKC PO BOX 10337 KANSAS CITY, MO 64171	43-1525298	501(C)(3)	6,500.	0.			SPECIFIC PROGRAM
OACAC 215 SOUTH BARNES SPRINGFIELD, MO 65802	43-0836672	501(C)(3)	5,292.	0.			SPECIFIC PROGRAM
OATS 2501 MAGUIRE BLVD STE. 101 COLUMBIA, MO 65201	43-1016961	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
OATS, INC. 2501 MAGUIRE BLVD. COLUMBIA, MO 65201	43-1016961	501(C)(3)	17,200.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
OPEN DOORS UNITED METHODIST CHURCH 6238 E STATE HWY 86 BLUE EYE, MO 65611	43-1227963	501(C)(3)	6,000.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
OTC FOUNDATION 1001 E CHESTNUT EXPY SPRINGFIELD, MO 65802	43-1753974	501(C)(3)	178,508.	0.			SPECIFIC PROGRAM
OUT OF POVERTY THRU EDUCATION 2128 WILLIAM ST. #107 CAPE GIRARDEAU, MO 63703	26-3863312	501(C)(3)	92,000.	0.			SPECIFIC PROGRAM
OZARK ACTION, INC. 710 E MAIN WEST PLAINS, MO 65775	43-0838508	501(C)(3)	19,469.	0.			SPECIFIC PROGRAM

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OZARK ACTORS THEATRE PO BOX K ROLLA, MO 65402	43-1477102	501(C)(3)	10,502.	0.			SPECIFIC PROGRAM
OZARK COUNTY HEALTH DEPARTMENT PO BOX 180 GAINESVILLE, MO 65655	43-1271723	501(C)(3)	25,500.	0.			SPECIFIC PROGRAM
OZARK EMPIRE FAIR FOUNDATION 3001 N GRANT AVE SPRINGFIELD, MO 65803	55-0855326	501(C)(3)	8,500.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
OZARK GREENWAYS PO BOX 50733 SPRINGFIELD, MO 65805	43-1525122	501(C)(3)	48,200.	0.			SPECIFIC PROGRAM
OZARK LAND TRUST PO BOX 1512 COLUMBIA, MO 65205	43-1304715	501(C)(3)	8,164.	0.			SPECIFIC PROGRAM
OZARK R-VI SCHOOL DISTRICT 1600 W. JACKSON ST OZARK, MO 65721	44-6003892	GOVERNMENTAL	5,041.	0.			SPECIFIC PROGRAM
OZARK SOCIETY FOUNDATION PO BOX 2914 LITTLE ROCK, AR 72203	51-0170417	501(C)(3)	26,250.	0.			SPECIFIC PROGRAM
OZARK TRAILS COUNCIL, BSA 1616 S EASTGATE SPRINGFIELD, MO 65809	44-0546294	501(C)(3)	12,850.	0.			SPECIFIC PROGRAM
OZARKS COIN CLUB PO BOX 3913 SPRINGFIELD, MO 65808	45-3155292	501(C)(3)	22,500.	0.			SPECIFIC PROGRAM

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OZARKS COUNSELING CENTER 614 SOUTH AVE SPRINGFIELD, MO 65806	44-0595115	501(C)(3)	15,600.	0.			SPECIFIC PROGRAM
OZARKS FAMILY YMCA 1 YMCA DRIVE MOUNTAIN GROVE, MO 65711	43-1617662	501(C)(3)	53,388.	0.			SPECIFIC PROGRAM
OZARKS FOOD HARVEST PO BOX 5746 SPRINGFIELD, MO 65801	43-1426384	501(C)(3)	145,914.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
OZARKS HEALTHCARE FOUNDATION PO BOX 1100 WEST PLAINS, MO 65775	43-1834356	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM
OZARKS LITERACY COUNCIL 397 E CENTRAL ST SPRINGFIELD, MO 65802	43-1162068	501(C)(3)	22,493.	0.			SPECIFIC PROGRAM
OZARKS LYRIC OPERA 411 N SHERMAN AVE SPRINGFIELD, MO 65802	43-1222808	501(C)(3)	20,194.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
OZARKS NEW HOPE INC 102 S HICKORY ST MOUNT VERNON, MO 65712	47-2948707	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
OZARKS PUBLIC TELEVISION 901 S. NATIONAL AVE SPRINGFIELD, MO 65897	43-1234200	501(C)(3)	10,719.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
OZARKS REGIONAL YMCA 417 S JEFFERSON SPRINGFIELD, MO 65806	44-0545283	501(C)(3)	116,071.	0.			SPECIFIC PROGRAM

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OZARKS TEEN TRANSITION PROGRAM 509 E SOUTH ST OZARK, MO 65721	82-4179202	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
OZARKS WATER WATCH: UPPER WHITE RIVER BASIN FOUNDATION - P.O. BOX 636 - KIMBERLING CITY, MO 65686	43-1942991	501(C)(3)	64,558.	0.			SPECIFIC PROGRAM
OZORA COMMUNITY FIRE PROTECTION ASSOCIATION - 17919 STATE ROUTE N - ST. MARY, MO 63673	43-1254072	501(C)(3)	14,000.	0.			SPECIFIC PROGRAM
PAWNEE COUNTY WORKSHOP PO BOX 63 CLEVELAND, OH 74020	73-1216618	501(C)(3)	26,120.	0.			SPECIFIC PROGRAM
PAWNEE PUBLIC SCHOOLS 615 DENVER ST PAWNEE, OH 74058	84-3720967	GOVERNMENTAL	5,000.	0.			SPECIFIC PROGRAM
PAYNE STEWART FOUNDATION 1900 SUMMITT TOWER BLVD, SUITE 260 ORLANDO, FL 32810	59-3531198	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
PETERSON OUTDOORS MINISTRIES PO BOX 469 WEBB CITY, MO 64870	27-1922154	501(C)(3)	20,900.	0.			SPECIFIC PROGRAM
PFLAG - SPRINGFIELD PO BOX 1752 SPRINGFIELD, MO 65801	43-1712253	501(C)(3)	6,350.	0.			SPECIFIC PROGRAM
PHILANTHROPY MISSOURI FORMERLY GATEWAY CENTER FOR GIVING - #2 OAK KNOLL PARK STE 300 - ST. LOUIS, MO 63105	43-0953940	501(C)(3)	50,604.	0.			SPECIFIC PROGRAM

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PITTS CHAPEL UNITED METHODIST CHURCH - 600 N BENTON AVE - SPRINGFIELD, MO 65806	43-1365573	501(C)(3)	10,750.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
PLANNED PARENTHOOD OF THE ST. LOUIS REGION AND SOUTHWEST MISSOURI - 4251 FOREST PARK AVENUE - ST. LOUIS, MO 63108	43-0652666	501(C)(3)	21,421.	0.			SPECIFIC PROGRAM
POLK COUNTY CARES PO BOX 48 BOLIVAR, MO 65613	84-3803394	501(C)(3)	11,408.	0.			SPECIFIC PROGRAM
POLK COUNTY COMMUNITY CONNECTIONS P.O. BOX 124 BOLIVAR, MO 65613	42-1536938	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
POLK COUNTY GENEALOGICAL SOCIETY PO BOX 632 BOLIVAR, MO 65613	43-1813850	501(C)(3)	6,214.	0.			SPECIFIC PROGRAM
PREGNANCY LIFE LINE, INC 19621 STATE HIGHWAY 413 BRANSON WEST, MO 65737	34-1991474	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
PREGNANCY RESOURCE CENTER OF SOUTHWEST FLORIDA - 9911 CORKSCREW ROAD, STE. 201 - ESTERO, FL 33928	59-3427729	501(C)(3)	54,000.	0.			SPECIFIC PROGRAM
PRESBYTERIAN CHILDREN'S HOMES AND SERVICES - 630 W KEARNEY ST - SPRINGFIELD, MO 65803	75-0818172	501(C)(3)	11,447.	0.			SPECIFIC PROGRAM
PRIMROSE PLACE 3850 S. NATIONAL STE. 500 SPRINGFIELD, MO 65807	43-1183783	501(C)(3)	34,284.	0.			SPECIFIC PROGRAM

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PRISON FELLOWSHIP MINISTRIES PO BOX 1550 MERRIFIELD, VA 22116	62-0988294	501(C)(3)	7,000.	0.			SPECIFIC PROGRAM
PROGRESS AND ACTION THROUGH COMMUNITY EFFORT - 504 MAIN ST - CASSVILLE, MO 65625	43-1615979	501(C)(3)	36,050.	0.			SPECIFIC PROGRAM
PROJECT HOPE 1419 S. ENTERPRISE SPRINGFIELD, MO 65804	43-1864044	501(C)(3)	15,250.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
RAPHA HOUSE INTERNATIONAL, INC. 712 S. MAIN ST., PO BOX 1569 JOPLIN, MO 64802	27-2523416	501(C)(3)	23,111.	0.			SPECIFIC PROGRAM
RAZORBACK FOUNDATION 1295 S. RAZORBACK RD., STE. A FAYETTEVILLE, AR 72701	71-0540644	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
RECOVERY RESOURCES, INC. 303 E. 11TH STREET CASSVILLE, MO 65625	32-0398372	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
REDEEMER LUTHERAN CHURCH 920 S ALTA LN OLATHE, KS 66061	23-7060227	501(C)(3)	11,100.	0.			SPECIFIC PROGRAM
RESCUE ONE 1927 E BENNETT STE B SPRINGFIELD, MO 65804	46-5050383	501(C)(3)	19,100.	0.			SPECIFIC PROGRAM
RIDGECREST BAPTIST CHURCH 2210 W REPUBLIC RD SPRINGFIELD, MO 65807	43-1308699	501(C)(3)	19,766.	0.			SPECIFIC PROGRAM

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ROMERO INSTITUTE 210 HIGH ST, SECOND FLOOR SANTA CRUZ, CA 95060	95-3527131	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
RONALD MCDONALD HOUSE CHARITIES OF THE OZARKS - 949 E PRIMROSE ST - SPRINGFIELD, MO 65807	43-1371143	501(C)(3)	38,278.	0.			SPECIFIC PROGRAM
ROTARY FOUNDATION 1560 SHERMAN AVENUE EVANSTON, IL 60201	36-3245072	501(C)(3)	13,000.	0.			SPECIFIC PROGRAM
SAFE AND SOBER INC. 3331 E RIDGEVIEW STREET SPRINGFIELD, MO 65804	46-3408060	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
SAFE FAMILIES FOR CHILDREN, SOUTHEAST MISSOURI - 1410 WEDGEWOOD DRIVE - JACKSON, MO 63755	45-3194102	501(C)(3)	5,613.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SALEM AREA COMMUNITY BETTERMENT ASSOCIATION - PO BOX 190 - SALEM, MO 65560	43-1677891	501(C)(3)	21,227.	0.			SPECIFIC PROGRAM
SALEM PUBLIC LIBRARY 403 N. JACKSON ST. SALEM, MO 65560	04-3690774	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
SALVATION ARMY 1130 HAMPTON AVE ST. LOUIS, MO 63139	36-2167910	501(C)(3)	15,924.	0.			SPECIFIC PROGRAM
SALVATION ARMY - COFFEYVILLE, KANSAS - PO BOX 514 - COFFEYVILLE, KS 67337	13-5562351	501(C)(3)	6,348.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY - DENT COUNTY 1200 W. ROLLA ROAD, PO BOX 190 SALEM, MO 65560	43-0653584	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
SALVATION ARMY - JEFFERSON CITY PO BOX 55 JEFFERSON CITY, MO 65102	36-2167910	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM
SALVATION ARMY - JOPLIN 320 E. 8TH JOPLIN, MO 64801	44-0545998	501(C)(3)	5,060.	0.			SPECIFIC PROGRAM
SALVATION ARMY OF SPRINGFIELD, MO P.O. BOX 9685 SPRINGFIELD, MO 65801	58-0660607	501(C)(3)	60,785.	0.			SPECIFIC PROGRAM
SAMARITAN CENTER 1317 S. 2ND CLINTON, MO 64735	43-1439793	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
SARCOXIE CEMETERY ASSOCIATION PO BOX 541 SARCOXIE, MO 64862	44-0603750	501(C)(3)	8,140.	0.			SPECIFIC PROGRAM
SARCOXIE R-II SCHOOL DISTRICT 101 S. 17TH ST. SARCOXIE, MO 64862	44-6004287	GOVERNMENTAL	15,477.	0.			SPECIFIC PROGRAM
SCHOOL SISTERS OF NOTRE DAME 320 EAST RIPA AVE ST. LOUIS, MO 63125	45-1296033	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
SECOND BAPTIST CHURCH 3111 E. BATTLEFIELD SPRINGFIELD, MO 65804	44-0656227	501(C)(3)	20,100.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

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SENIOR AGE AREA AGENCY ON AGING 1735 S. FORT AVE. SPRINGFIELD, MO 65807	43-1018538	501(C)(3)	25,500.	0.			SPECIFIC PROGRAM
SEYMOUR AREA ARTS COUNCIL PO BOX 76 SEYMOUR, MO 65746	20-1925624	501(C)(3)	10,450.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SEYMOUR NAZARENE CHURCH PO BOX 477 SEYMOUR, MO 65746	43-1461234	501(C)(3)	10,200.	0.			SPECIFIC PROGRAM
SHILOH CEMETERY ASSOCIATION PO BOX 307 MOUNT VERNON, MO 65712	43-1506278	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
SIGMA CHI EDUCATIONAL FOUNDATION OF MISSOURI - 6904 VALLEY RD. - KANSAS CITY, MO 64113	48-1120253	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
SILVER DOLLAR CITY FOUNDATION 7347 W HWY 76 BRANSON, MO 65616	43-1742873	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
SISTERS OF SAINTS CYRIL & METHODIUS - 580 RAILROAD STREET - DANVILLE, PA 17821	24-0795486	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
SKAGGS FOUNDATION 101 SKAGGS ROAD, SUITE 404 BRANSON, MO 65615	30-0107007	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
SOLACE HOUSE OF THE OZARKS PO BOX 4467 JOPLIN, MO 64803	83-1728497	501(C)(3)	7,767.	0.			SPECIFIC PROGRAM

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SOUTHEAST MISSOURI CHILDREN'S MUSEUM DBA DISCOVERY PLAYHOUSE - 502 BROADWAY STREET, PO BOX 1251 - CAPE GIRARDEAU, MO 63701	74-3163851	501(C)(3)	7,500.	0.			SPECIFIC PROGRAM
SOUTHEAST MISSOURI FOOD BANK PO BOX 190 SIKESTON, MO 63801	43-1395863	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
SOUTHEAST MISSOURI NETWORK AGAINST SEXUAL VIOLENCE - 1359 N MT AUBURN RD - CAPE GIRARDEAU, MO 63701	43-1799296	501(C)(3)	20,000.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SOUTHMINSTER PRESBYTERIAN CHURCH 2245 S HOLLAND SPRINGFIELD, MO 65807	44-0667828	501(C)(3)	25,963.	0.			SPECIFIC PROGRAM
SOUTHWEST BAPTIST UNIVERSITY 1601 S SPRINGFIELD BOLIVAR, MO 65613	44-0567385	501(C)(3)	55,166.	0.			SPECIFIC PROGRAM
SOUTHWEST MISSOURI COMMUNITY ALLIANCE - 1601 S WALL AVE - JOPLIN, MO 64804	43-1801349	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
SPECIAL OLYMPICS MISSOURI 305 SPECIAL OLYMPICS DR JEFFERSON CITY, MO 65101	23-7328374	501(C)(3)	5,075.	0.			SPECIFIC PROGRAM
SPRINGFIELD ART MUSEUM 1111 E. BROOKSIDE SPRINGFIELD, MO 65807	44-6000268	501(C)(3)	8,620.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SPRINGFIELD BALLET INC 411 N SHERMAN PKWY SPRINGFIELD, MO 65802	43-1089752	501(C)(3)	35,000.	0.			SPECIFIC PROGRAM

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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SPRINGFIELD CATHOLIC SCHOOLS 2340 S EASTGATE AVE SPRINGFIELD, MO 65809	44-0619146	501(C)(3)	60,550.	0.			SPECIFIC PROGRAM
SPRINGFIELD CENTERS FOR DYSLEXIA AND LEARNING - 1000 E PRIMROSE ST, SUITE 540 - SPRINGFIELD, MO 65807	47-4081640	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
SPRINGFIELD COMMUNITY GARDENS 1126A N BROADWAY AVE SPRINGFIELD, MO 65802	27-1883334	501(C)(3)	9,500.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SPRINGFIELD CONTEMPORARY THEATRE INC. - PO BOX 6228 - SPRINGFIELD, MO 65801	94-3445098	501(C)(3)	13,000.	0.			SPECIFIC PROGRAM
SPRINGFIELD DREAM CENTER 829 WEST ATLANTIC ST. SPRINGFIELD, MO 65803	05-0574634	501(C)(3)	30,081.	0.			SPECIFIC PROGRAM
SPRINGFIELD GREENE COUNTY LIBRARY DISTRICT - 4653 SOUTH CAMPBELL AVENUE - SPRINGFIELD, MO 65801	43-1655656	501(C)(3)	7,460.	0.			SPECIFIC PROGRAM
SPRINGFIELD GREENE COUNTY PARKS DEPT - 840 N BOONVILLE - SPRINGFIELD, MO 65802	44-6000268	501(C)(3)	55,152.	0.			SPECIFIC PROGRAM
SPRINGFIELD LITTLE THEATRE 311 E WALNUT SPRINGFIELD, MO 65806	43-0893064	501(C)(3)	55,000.	0.			SPECIFIC PROGRAM
SPRINGFIELD POLICE DEPARTMENT 321 EAST CHESTNUT SPRINGFIELD, MO 65802	44-6000268	501(C)(3)	14,285.	0.			SPECIFIC PROGRAM

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SPRINGFIELD R-12 PUBLIC SCHOOLS 1359 E ST LOUIS ST SPRINGFIELD, MO 65802	44-6005539	GOVERNMENTAL	23,046.	0.			SPECIFIC PROGRAM
SPRINGFIELD REGIONAL ARTS COUNCIL 411 N SHERMAN PKWY SPRINGFIELD, MO 65802	43-1225541	501(C)(3)	52,800.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SPRINGFIELD SYMPHONY ORCHESTRA 411 N SHERMAN PKWY SPRINGFIELD, MO 65802	43-0797224	501(C)(3)	43,677.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SPRINGFIELD VICTORY MISSION PO BOX 2884 SPRINGFIELD, MO 65801	43-1345089	501(C)(3)	58,765.	0.			SPECIFIC PROGRAM
SPRINGFIELD WORKSHOP FOUNDATION 2835 W. BENNETT SPRINGFIELD, MO 65802	26-4456587	501(C)(3)	11,550.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
SPRINGFIELD-GREENE COUNTY LIBRARY DISTRICT - 4653 S CAMPBELL - SPRINGFIELD, MO 65810	05-0534215	501(C)(3)	9,657.	0.			SPECIFIC PROGRAM
SPRINGFIELD-GREENE COUNTY PUBLIC LIBRARY FOUNDATION - 4653 S CAMPBELL AVE - SPRINGFIELD, MO 65810	43-1655656	501(C)(3)	57,263.	0.			SPECIFIC PROGRAM
ST GENEVIEVE GOLDEN AGE CLUB INC 727 PARKWOOD DRIVE STE. GENEVIEVE, MO 63670	52-1072753	501(C)(3)	16,000.	0.			SPECIFIC PROGRAM
ST JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	18,801.	0.			SPECIFIC PROGRAM

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ST. AGNES CATHEDRAL 533 S JEFFERSON SPRINGFIELD, MO 65806	44-0581498	501(C)(3)	15,500.	0.			SPECIFIC PROGRAM
ST. AGNES CATHOLIC CHURCH 40 ST. AGNES DR, P.O. BOX 124 BLOOMSDALE, MO 63627	43-0691483	501(C)(3)	8,900.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
ST. AGNES SCHOOL 6539 US HIGHWAY 61 BLOOMSDALE, MO 63627	43-0691483	501(C)(3)	5,032.	0.			SPECIFIC PROGRAM
ST. ANN CATHOLIC SCHOOL 7231 MISSION ROAD PRAIRIE VILLAGE, KS 66208	48-0650538	501(C)(3)	15,000.	0.			SPECIFIC PROGRAM
ST. COLETTA OF WISCONSIN N4637 COUNTY ROAD Y JEFFERSON, WI 53549	39-0816855	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
ST. JAMES EPISCOPAL CHURCH 2645 E. SOUTHERN HILLS BLVD. SPRINGFIELD, MO 65804	44-0666149	501(C)(3)	33,800.	0.			SPECIFIC PROGRAM
ST. JOHN'S EPISCOPAL CHURCH 515 E DIVISION ST SPRINGFIELD, MO 65803	43-1021021	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
ST. JOHN'S LUTHERAN CHURCH 5732 FARM ROAD 1057 PURDY, MO 65734	43-0900098	501(C)(3)	16,795.	0.			SPECIFIC PROGRAM
ST. JOSEPH'S INDIAN SCHOOL PO BOX 100 CHAMBERLAIN, SD 57325	46-0235912	501(C)(3)	9,000.	0.			SPECIFIC PROGRAM

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ST. MARY'S CATHOLIC CHURCH 200 FRONT ST PIERCE CITY, MO 65723	43-0920029	501(C)(3)	17,000.	0.			SPECIFIC PROGRAM
ST. PATRICK PARISH 17 ST. PATRICK LANE ROLLA, MO 65401	43-0653548	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
ST. PATRICK'S CATHOLIC CHURCH 638 WEST D AVENUE KINGMAN, KS 67068	48-0543796	501(C)(3)	6,990.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
ST. PAUL'S UNITED METHODIST CHURCH OF JOPLIN - 2423 WEST 26TH STREET - JOPLIN, MO 64804	43-1149608	501(C)(3)	91,008.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
ST. SUSANNE'S CATHOLIC CHURCH 700 W SLOAN, HWY V MT. VERNON, MO 65712	43-1693914	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
ST. THOMAS MORE CATHOLIC CHURCH 6180 W UTOPIA RD GLENDALE, AZ 85308	94-3456003	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
STATE HISTORICAL SOCIETY OF MISSOURI - 1020 LOWRY STREET - COLUMBIA, MO 65201	43-6035196	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
STATE THEATER ARTS COUNCIL PO BOX 11 MOUND CITY, MO 64470	43-1494632	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE CATHOLIC PARISH 49 DUBOURG PLACE STE GENEVIEVE, MO 63670	43-0653472	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM

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STE. GENEVIEVE CO. SHELTERED WORKSHOP - 10929 INDUSTRIAL DRIVE - STE GENEVIEVE, MO 63670	51-0200666	501(C)(3)	14,246.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE COMMUNITY SERVICES FORUM - PO BOX 248 - STE GENEVIEVE, MO 63670	43-1656059	501(C)(3)	28,404.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE COUNTY P.O. BOX 306 STE GENEVIEVE, MO 63670	43-6003165	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE COUNTY COMMUNITY CENTER - 21390 MISSOURI 32 - STE GENEVIEVE, MO 63670	43-1792195	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE COUNTY LIBRARY 21388 MO HWY 32 SAINTE GENEVIEVE, MO 63670	43-6003165	501(C)(3)	5,938.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE MUSEUM 360 MARKET ST STE GENEVIEVE, MO 63670	43-1329600	501(C)(3)	9,873.	0.			SPECIFIC PROGRAM
STE. GENEVIEVE PARISH ST. VINCENT DE PAUL SOCIETY - 49 DUBOURG PLACE - STE. GENEVIEVE, MO 63670	43-0653472	501(C)(3)	12,500.	0.			SPECIFIC PROGRAM
STERLING YMCA 254 ESSEX STREET BEVERLY, MA 01915	04-2104913	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
STOCKTON COMMUNITY DEVELOPMENT CORPORATION - P.O. BOX 1001 - STOCKTON, MO 65785	47-0927756	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM

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STOCKTON R-I SCHOOL DISTRICT 906 SOUTH ST, PO BOX 190 STOCKTON, MO 65785	44-6001498	GOVERNMENTAL	6,273.	0.			SPECIFIC PROGRAM
SUMMIT CHRISTIAN CHURCH 7075 PYRAMID HWY SPARKS, NV 89436	88-0408725	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
TANEYHILLS COMMUNITY LIBRARY 200 S. 4TH STREET BRANSON, MO 65616	51-0161765	501(C)(3)	17,875.	0.			SPECIFIC PROGRAM
TETON SCIENCE SCHOOLS 700 COYOTE CANYON RD JACKSON, WY 83001	83-0219163	501(C)(3)	28,575.	0.			SPECIFIC PROGRAM
TEXAS COUNTY FOOD PANTRY 102A E STATE ROUTE 17 HOUSTON, MO 65483	43-1566581	501(C)(3)	20,500.	0.			SPECIFIC PROGRAM
THE ASSOCIATION FOR THE BLIND 1680 EAST LOMBARD SPRINGFIELD, MO 65802	80-0280486	501(C)(3)	17,947.	0.			SPECIFIC PROGRAM
THE BRIDGE - A CHRISTIAN CHURCH 800 S MAIN CARTHAGE, MO 64836	43-1127807	501(C)(3)	5,600.	0.			SPECIFIC PROGRAM
THE CARING PEOPLE 192 EXPRESSWAY LANE SUITE 240 BRANSON, MO 65616	43-1748286	501(C)(3)	100,134.	0.			SPECIFIC PROGRAM
THE CARTER CENTER, INC. 453 FREEDON PARKWAY NE ATLANTA, GA 30307	58-1454716	501(C)(3)	7,000.	0.			SPECIFIC PROGRAM

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THE CHANGING TABLE 1340 CASTLE CT OSAGE BEACH, MO 65065	83-2446099	501(C)(3)	9,200.	0.			SPECIFIC PROGRAM
THE CHILD ADVOCACY CENTER 1033 E WALNUT ST SPRINGFIELD, MO 65806	43-1729078	501(C)(3)	65,865.	0.			SPECIFIC PROGRAM
THE COLLEGE OF WOOSTER 1189 BEALL AVE WOOSTER, OH 44691	34-0714654	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
THE DOWNTOWN CHURCH OF SPRINGFIELD MISSOURI - 413 E WALNUT ST - SPRINGFIELD, MO 65806	84-1751805	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
THE DREAM FACTORY OF SOUTHEAST MISSOURI - PO BOX 192 - JACKSON, MO 63755	38-3913653	501(C)(3)	5,113.	0.			SPECIFIC PROGRAM
THE DREAM FACTORY, INC. PO BOX 719 OSAGE BEACH, MO 65065	61-1192721	501(C)(3)	86,602.	0.			SPECIFIC PROGRAM
THE ELLIS FOUNDATION PO BOX 54 FORT SCOTT, KS 66701	48-1093604	501(C)(3)	44,000.	0.			SPECIFIC PROGRAM
THE FOOD BANK FOR CENTRAL & NORTHEAST MISSOURI, INC. - 2101 VANDIVER DRIVE - COLUMBIA, MO 65202	43-1238934	501(C)(3)	18,460.	0.			SPECIFIC PROGRAM
THE FORGOTTEN INITIATIVE 1357 N BROAD CREEK STRAFFORD, MO 65757	35-1902841	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM

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THE FOUNDATION: THE COUNCIL OF CHURCHES OF THE OZARKS - 627 N GLENSTONE - SPRINGFIELD, MO 65802	43-1819544	501(C)(3)	9,946.	0.			SPECIFIC PROGRAM
THE GEEK FOUNDATION 433 W WALNUT SPRINGFIELD, MO 65806	81-3466119	501(C)(3)	15,063.	0.			SPECIFIC PROGRAM
THE KITCHEN FOUNDATION 730 N GLENSTONE AVE SPRINGFIELD, MO 65802	43-1747868	501(C)(3)	9,250.	0.			SPECIFIC PROGRAM
THE KITCHEN, INC. 730 N GLENSTONE AVE SPRINGFIELD, MO 65802	43-1384531	501(C)(3)	452,658.	0.			SPECIFIC PROGRAM, CAPITAL CAMPAIGN
THE SAINTS ACADEMY 111 NEW BALCH STREET BEVERLY, MA 01915	45-3264587	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM
THE SPRINGS CHURCH 5500 S SOUTHWOOD RD SPRINGFIELD, MO 65804	43-1673161	501(C)(3)	38,000.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
THE TOOTH TRUCK INC 949 E PRIMROSE ST SPRINGFIELD, MO 65807	41-2028871	501(C)(3)	5,500.	0.			SPECIFIC PROGRAM
THE UNITED METHODIST CHURCH OF THE RESURRECTION - 13720 ROE AVE - LEAWOOD, KS 66224	48-1107898	501(C)(3)	12,500.	0.			SPECIFIC PROGRAM
THE VENUES CHURCH PO BOX 14097 SPRINGFIELD, MO 65814	46-1740911	501(C)(3)	16,837.	0.			SPECIFIC PROGRAM

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THE WELL CHURCH 720 E NORTON RD SPRINGFIELD, MO 65803	47-5051831	501(C)(3)	26,985.	0.			SPECIFIC PROGRAM
THOMAS JEFFERSON INDEPENDENT DAY SCHOOL - 3401 E. NEWMAN ROAD - JOPLIN, MO 64801	43-1626282	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
TORCHBEARER FOUNDATION 7236 WESTFIELD WOODS DRIVE O'FALLON, MO 63368	47-0847030	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
TRI-LAKES HUMANE SOCIETY PO BOX 588 REEDS SPRING, MO 65737	43-1140649	501(C)(3)	8,100.	0.			SPECIFIC PROGRAM
TRINITY EPISCOPAL CHURCH 16 EAST 4TH ST COVINGTON, KY 41011		RELIGIOUS	15,000.	0.			SPECIFIC PROGRAM
TRINITY LUTHERAN CHURCH - CLINTON 1267 E HWY 7 CLINTON, MO 64735	43-6044550	501(C)(3)	12,750.	0.			SPECIFIC PROGRAM
TRINITY-BY-THE-COVE EPISCOPAL CHURCH - 553 GALLEON DRIVE - NAPLES, FL 34102	59-0774204	501(C)(3)	28,200.	0.			SPECIFIC PROGRAM
UJIMA LANGUAGE AND LITERACY 918 E CALHOUN ST. SPRINGFIELD, MO 65802	30-1005791	501(C)(3)	32,294.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
UNITED METHODIST CHURCH OF SALEM, MISSOURI - 801 EAST SCENIC RIVERS BLVD. - SALEM, MO 65560	43-0731516	501(C)(3)	32,500.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM

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UNITED MINISTRIES IN HIGHER EDUCATION - 630 E GRAND ST - SPRINGFIELD, MO 65807	51-0155226	501(C)(3)	22,723.	0.			SPECIFIC PROGRAM
UNITED WAY OF THE OZARKS 320 N JEFFERSON SPRINGFIELD, MO 65806	44-0552047	501(C)(3)	68,860.	0.			GENERAL OPERATING SUPPORT, SPECIFIC PROGRAM
UNIVERSITY OF ARKANSAS P O BOX 1404 FAYETTEVILLE, AR 72702	47-0872543	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
UNIVERSITY OF ARKANSAS FOUNDATION 200 HOLZ HALL FAYETTEVILLE, AR 72701	71-6056774	501(C)(3)	50,000.	0.			SPECIFIC PROGRAM
UNIVERSITY OF MISSOURI 407 REYNOLDS ALUMNI CENTER COLUMBIA, MO 65211	26-6440629	501(C)(3)	17,993.	0.			SPECIFIC PROGRAM
UNIVERSITY OF MISSOURI EXTENSION - BARTON COUNTY - 801 EAST 12TH STREET - LAMAR, MO 64759	26-6440629	501(C)(3)	12,225.	0.			SPECIFIC PROGRAM
UNIVERSITY OF MISSOURI SCHOOL OF MEDICINE - 407 REYNOLDS ALUMNI CENTER - COLUMBIA, MO 65211	26-6440629	501(C)(3)	30,000.	0.			SPECIFIC PROGRAM
UNIVERSITY OF NORTH DAKOTA 3501 UNIVERSITY AVE., STOP 8157 GRAND FORKS, ND 58202	51-0151923	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
UNIVERSITY OF ROCHESTER PO BOX 270032 ROCHESTER, NY 14627	16-0743209	501(C)(3)	20,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN - PLATTEVILLE - 1 UNIVERSITY PLAZA - PLATTEVILLE, WI 53818	39-1281988	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM
URICH ATHLETIC BOOSTERS 11748 NW HWY AB, PO BOX 41 URICH, MO 64788	81-2761829	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
VERONA R-VII SCHOOL DISTRICT 101 E ELLA ST, PO BOX 7 VERONA, MO 65769	44-6004656	GOVERNMENTAL	12,661.	0.			SPECIFIC PROGRAM
VICTIM CENTER, INC. 815 W TAMPA ST SPRINGFIELD, MO 65802	43-1149629	501(C)(3)	49,460.	0.			SPECIFIC PROGRAM
VICTORY MISSION + MINISTRY 1610 N. BROADWAY AVE SPRINGFIELD, MO 65803	43-1345089	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
VISION CARTHAGE 221 W. 4TH STREET, SUITE 8 CARTHAGE, MO 64836	45-4306952	501(C)(3)	11,000.	0.			SPECIFIC PROGRAM
VITAE FOUNDATION PO BOX 791 JEFFERSON CITY, MO 65102	43-1138252	501(C)(3)	38,000.	0.			SPECIFIC PROGRAM
VIVA CUBA, INC. PO BOX H CUBA, MO 65453	43-1589547	501(C)(3)	21,000.	0.			SPECIFIC PROGRAM
WALDENSIAN PRESBYTERIAN CHURCH 2250 FARM RD 1080 MONETT, MO 65708	43-1151593	501(C)(3)	5,673.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WARSAW R-IX SCHOOL DISTRICT - BENTON COUNTY - PO BOX 248 - WARSAW, MO 65355	44-6005440	501(C)(3)	10,880.	0.			SPECIFIC PROGRAM
WATERED GARDENS 531 KENTUCKY AVE JOPLIN, MO 64801	20-2586821	501(C)(3)	12,875.	0.			SPECIFIC PROGRAM
WATERSHED COMMITTEE OF THE OZARKS 2400 E VALLEY WATER MILL RD SPRINGFIELD, MO 65803	43-1531628	501(C)(3)	22,088.	0.			SPECIFIC PROGRAM
WAYMARK CHURCH - FIRST BAPTIST CHURCH - PO BOX 310 - MONETT, MO 65708	44-0609254	RELIGIOUS	24,000.	0.			SPECIFIC PROGRAM
WCCA TV 415 MAIN ST WORCESTER, MA 01608	04-2984716	501(C)(3)	7,100.	0.			SPECIFIC PROGRAM
WEINGARTEN VOLUNTEER FIRE DEPARTMENT - 13491 HWY 32 - STE. GENEVIEVE, MO 63670	43-1326479	501(C)(3)	8,500.	0.			SPECIFIC PROGRAM
WESLEY UNITED METHODIST CHURCH 922 W REPUBLIC RD SPRINGFIELD, MO 65807	43-6067877	501(C)(3)	41,597.	0.			SPECIFIC PROGRAM
WEST PLAINS CHRISTIAN CLINIC PO BOX 988 WEST PLAINS, MO 65775	27-1307333	501(C)(3)	7,500.	0.			SPECIFIC PROGRAM
WEST PLAINS R-VII SCHOOL DISTRICT 610 EAST OLDEN STREET WEST PLAINS, MO 65775	44-6004756	GOVERNMENTAL	6,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST PLAINS SENIOR CENTER 416 E MAIN STREET WEST PLAINS, MO 65775	43-1498830	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
WESTMINSTER PRESBYTERIAN CHURCH 1551 E PORTLAND SPRINGFIELD, MO 65804	44-0602350	501(C)(3)	35,700.	0.			SPECIFIC PROGRAM
WESTWOOD BAPTIST ACADEMY 419 CR 5231 POPLAR BLUFF, MO 63901	43-1454184	501(C)(3)	6,000.	0.			SPECIFIC PROGRAM
WILDCAT GLADES FRIENDS GROUP PO BOX 3063 JOPLIN, MO 64803	82-4159839	501(C)(3)	11,239.	0.			SPECIFIC PROGRAM
WILLARD R-II SCHOOL DISTRICT 500 E KIME ST WILLARD, MO 65781	44-6004826	501(C)(3)	10,600.	0.			SPECIFIC PROGRAM
WILLOW SPRINGS R-IV SCHOOL DISTRICT - 215 W FOURTH ST - WILLOW SPRINGS, MO 65793	44-6004841	501(C)(3)	12,115.	0.			SPECIFIC PROGRAM
WILLOW SPRINGS SCHOOL DISTRICT 215 W 4TH ST WILLOW SPRINGS, MO 65793	12-5854670	GOVERNMENTAL	5,200.	0.			SPECIFIC PROGRAM
WINGS OF HOPE 18370 WINGS OF HOPE BLVD ST. LOUIS, MO 63005	43-0909606	501(C)(3)	10,000.	0.			SPECIFIC PROGRAM
WISE HILL CEMETERY ASSOCIATION 602 E MILLER ROAD REPUBLIC, MO 65738	43-1185278	501(C)(3)	25,000.	0.			SPECIFIC PROGRAM

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOMEN'S MEDICAL RESPITE PO BOX 385 SPRINGFIELD, MO 65801	47-4631889	501(C)(3)	5,000.	0.			SPECIFIC PROGRAM
WONDERLAND CAMP 18591 MILLER CIR. ROCKY MOUNT, MO 65072	43-0965327	501(C)(3)	14,000.	0.			SPECIFIC PROGRAM
WOODLAND HILLS FAMILY CHURCH 3953 GREEN MOUNTAIN DR BRANSON, MO 65616	03-0449853	501(C)(3)	11,520.	0.			SPECIFIC PROGRAM
WYCLIFFE ASSOCIATES PO BOX 620143 ORLANDO, FL 32862	95-2584324	501(C)(3)	8,000.	0.			SPECIFIC PROGRAM
WYCLIFFE BIBLE TRANSLATORS PO BOX 628200 ORLANDO, FL 32862	95-1831097	501(C)(3)	6,800.	0.			SPECIFIC PROGRAM
ZELL VOLUNTEER FIRE DEPARTMENT 10993 STATE RT A STE. GENEVIEVE, MO 63670	43-1306990	501(C)(3)	6,992.	0.			SPECIFIC PROGRAM

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	849	1,564,894.	0.		
BENEVOLENCE AND DISASTER RELIEF	320	428,687.	0.		

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRIAN FOGLE PRESIDENT & CEO	(i)	175,830.	0.	0.	8,759.	23,500.	208,089.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) LUIS LEON CFO	(i)	137,366.	0.	0.	6,811.	8,291.	152,468.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	195	5,458,886.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (BONDS AND FIX)	X	1	50,000.	FMV
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

DONATED SECURITIES ARE SENT TO THE COMMUNITY FOUNDATION'S PROFESSIONAL INVESTMENT ADVISORS, WHO SELL THE SECURITIES AND PLACE THE PROCEEDS IN THE FOUNDATIONS INVESTMENT PORTFOLIO.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOUTHERN MISSOURI

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS REVIEWED BY THE AUDIT/OPERATIONS COMMITTEE IN DETAIL, ALONG WITH
THE PRESIDENT & CEO AND CFO. AFTER THAT REVIEW AND APPROVAL, A COPY IS
SENT TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

CONFLICT OF INTEREST FORMS MUST BE COMPLETED BY BOARD MEMBERS AND STAFF

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD ANNUALLY REVIEWS AND APPROVES ALL SALARIES, INCLUDING THE CEO.
SALARIES COMPARISONS WERE PROVIDED THIS YEAR BY SUTHERLAND-EDWARDS, A
CONSULTING FIRM. THE EXECUTIVE COMMITTEE PERIODICALLY PROVIDES PERFORMANCE
REVIEWS WITH THE CEO.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ANNUITY ACTUARIAL ADJUSTMENT	-244,182.
RECLASSIFICATION TO AGENCY FUNDS	-36,910.
TRANSFERS OUT	-985,166.
ROUNDING	-2.

TOTAL TO FORM 990, PART XI, LINE 9 -1,266,260.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization

COMMUNITY FOUNDATION OF THE OZARKS, INC.

Employer identification number

23-7290968

FORM 990, PART XII, LINE 2C

NO CHANGES FROM PRIOR YEAR

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **COMMUNITY FOUNDATION OF THE OZARKS, INC.** Employer identification number **23-7290968**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
COMMUNITY FOUNDATION OF THE OZARKS STOCK TRUST - 71-6225763, 425 E TRAFFICWAY, SPRINGFIELD, MO 65806	THE FOUNDATION RECEIVES AND DISTRIBUTES FUNDS FOR CHARITABLE PURPOSES	MISSOURI	501(C)(3)	LINE 12B, II	COMMUNITY FOUNDATION OF THE OZARKS, INC.	X	
LEZAH STENGER FOUNDATION - 43-1872019 5051 S NATIONAL AVE SPRINGFIELD, MO 65810	ORGANIZED AS A SUPPORTING ORGANIZATION FOR THE COMMUNITY FOUNDATION	MISSOURI	501(C)(3)	LINE 12B, II	COMMUNITY FOUNDATION OF THE OZARKS, INC.	X	
OZARKS CHARITABLE REAL ESTATE FOUNDATION LLC - 41-2086647, P.O. BOX 8960, SPRINGFIELD, MO 65807	FOUNDATION RECEIVES, MANAGES AND DISTRIBUTES REAL ESTATE DONATIONS FOR	MISSOURI	501(C)(3)	LINE 12B, II	COMMUNITY FOUNDATION OF THE OZARKS, INC.	X	

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER TRUST - 33-6105597 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER TRUST - 43-6741681 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER TRUST - 43-6741682 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER UNITRUST - 27-6544927 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER UNITRUST - 27-6566066 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER TRUST - 85-6231564 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER TRUST - 85-6233196 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X
CHARITABLE REMAINDER TRUST - 85-6236805 P.O. BOX 8960 SPRINGFIELD, MO 65801	INVESTMENT	MO		TRUST			100%		X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LEZAH STENGER FOUNDATION COMMUNITY FOUNDATION OF THE OZARKS STOCK	C	15,000.	
(2) TRUST	C	834,472.	
(3) OZARKS CHARITABLE REAL ESTATE FOUNDATION	C	2,199,652.	
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) <small>Are all partners sec. 501(c)(3) orgs.?</small>		(f) Share of total income	(g) Share of end-of-year assets	(h) <small>Dispropor- tionate allocations?</small>		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) <small>General or managing partner?</small>		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

OZARKS CHARITABLE REAL ESTATE FOUNDATION LLC

PRIMARY ACTIVITY: FOUNDATION RECEIVES, MANAGES AND DISTRIBUTES REAL ESTATE DONATIONS FOR CFO

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

For calendar year 2020, or fiscal year beginning JUL 1, 2020, and ending JUN 30, 2021

2020

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization or person subject to tax

Taxpayer identification number

COMMUNITY FOUNDATION OF THE OZARKS, INC.

23-7290968

Name and title of officer or person subject to tax

**BRIAN FOGLE
PRESIDENT**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, 5a, 6a, or 7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, 5b, 6b, or 7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	0.
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above organization or I am a person subject to tax with respect to (name of organization) _____, (EIN) _____ and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **THE WHITLOCK COMPANY** to enter my PIN **81395**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

43066899999

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.**

ERO's signature ▶

Date ▶

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2020)